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To: PEIA PPB Plan Providers

From: Gloria Long
Deputy Director for Insurance Programs and Services

Date: June 17, 2009

Re: PEIA PPB Plan Changes

On July 1, 2009, PEIA will implement a number of changes to the PEIA PPB Plan. This letter provides a brief introduction to each change. More information is available on PEIA's website at www.wvpeia.com under "Providers" on the left side of the page.

1. Wells Fargo TPA will continue as PEIA's Third Party Administrator for claims processing, and all claims should still be sent to Wells Fargo TPA. Wells Fargo has subcontracted with Aetna Signature Administrators and ActiveHealth Management for other services
2. ActiveHealth Management will provide utilization management, medical case management, and disease management services. ActiveHealth will handle precertification and preauthorization of services, prior approval of out-of-network services, and case management services to members with serious or long-term illnesses or injuries.
3. PEIA made changes to its list of services requiring precertification:

Inpatient admissions:

1. Hysterectomy,
2. Laminectomy
3. Laminectomy with spinal fusion surgery,
4. Discectomy with spinal fusion surgery,
5. Spinal fusion surgery,
6. Artificial intervertebral disc surgery,
7. Insertion of implantable devices including, but not limited to; implantable defibrillators, implantable pumps, spinal cord stimulators, neuromuscular stimulators and bone growth stimulators,
8. Uvulopalatopharyngoplasty,
9. Leforte osteotomy,
10. Elective and cosmetic surgeries including, but not limited to breast reduction, blepharoplasty, abdominoplasty, breast reconstruction, and surgery for varicose veins,
11. Bariatric surgery (gastric bypass, Lap-band, etc.)
12. Transplants and transplant evaluations (including but not limited to: kidney, liver, heart, lung and pancreas, small bowel, and bone marrow replacement or stem cell transfer after high dose chemotherapy),
13. Mental health, and
14. All admissions to out-of-state hospitals/facilities.

Outpatient services:

- 1) home health care services
- 2) partial/day mental health programs,
- 3) durable medical equipment purchases and/or rentals of \$1,000 or more, and
- 4) surgeries:
 - a) hysterectomy,
 - b) uvulopalatopharyngoplasty,
 - c) Leforte osteotomy,
 - d) implantable devices including, but not limited to implantable defibrillators, implantable pumps, spinal cord stimulators, neuromuscular stimulators, and bone growth stimulators,

- e) elective and cosmetic surgeries including, but not limited to, breast reduction, blepharoplasty, abdominoplasty, breast reconstruction, and treatment for varicose veins,
 - f) bariatric surgery (gastric bypass, etc.),
 - g) transplants,
 - h) discectomy with spinal fusion surgery,
 - i) laminectomy
 - j) laminectomy with spinal fusion surgery,
 - k) spinal fusion surgery, and
 - l) artificial disc surgery
- 5) sleep studies, services and equipment.
 - 6) continuous glucose monitors
 - 7) Any potentially experimental/investigational procedure or medical device
 - 8) CT scan of sinuses or brain
 - 9) CTA (CT angiography)
 - 10) MRI scan of knee and spine (includes cervical, thoracic, and lumbar)
 - 11) SPECT (single photon emission computed tomography) of brain and lung
 - 12) IMRT (intensity modulated radiation therapy)
 - 13) Hyperbaric Oxygen Therapy (HBOT)
 - 14) Elective (non-emergent) air ambulance transportation
4. PEIA has implemented a “Procrit[®] First” policy for patients requiring erythropoietin stimulating agents. Epoetin alfa (Procrit[®]) will be required as the first-line therapy for these patients rather than Aranesp[®] or Epogen[®]. This policy was effective on May 1, 2009.
 5. Wells Fargo TPA will issue new ID cards to PPB Plan members. Patients will begin using the new cards on July 1.
 6. Aetna Signature Administrators (ASA) Preferred Provider Organization will become PEIA’s out-of-state network. If you are referring a patient out-of-state, use ASA’s “DocFind” at www.aetna.com/docfind/custom/asa/ to determine if a medical provider is part of the network.
 7. Beginning July 1, 2009, the PPB Plan will no longer cover biofeedback.
 8. Several drugs have been added to the list requiring prior authorization or step therapy, and several more drugs now have quantity limits. See the complete list at www.wvpeia.com -- just click on “Providers” on the left side of the page.

Also, please note the following:

- A. If you are a medical provider under sanction by Medicare and Medicaid or excluded from the PEIA network because of an adverse audit, PEIA will not pay for medical services provided to members and will seek reimbursement if it does. If a PEIA member seeks medical services from you while in this situation, please refer them to another medical provider.
- B. The West Virginia Legislature passed five bills related PEIA during the 2009 session. More information about each is available on the website, just click on “Providers” on the left side of the page.

For more information about changes and updates, go to www.wvpeia.com. Click on “Providers” on the left side of the page. You may also call Wells Fargo TPA at 1-304-353-7820 or 1-888-440-7342 (toll-free) for more information.