



Healthy Blue

HERITAGE
HEALTH

Provider News

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<https://provider.healthybluene.com>

Provider Services: 833-388-1406 • 7 a.m. to 8 p.m. CT Monday to Friday



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COVID-19 information from Healthy Blue

Healthy Blue is closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part.

For additional information, reference the *COVID-19 Updates* page on our [website](#).



Policy Updates — *Medical Policies and Clinical Utilization Management Guidelines*

The *Medical Policies, Clinical Utilization Management (UM) Guidelines*, and *Third-Party Criteria* below were developed and/or revised to support clinical coding edits. Note, several policies and guidelines were revised to provide clarification only and are not included. Existing precertification requirements have not changed.

To view a guideline, visit <https://provider.healthybluene.com/nebraska-provider/medical-policies-and-clinical-guidelines>.

August 2021 update

Notes/updates:

Updates marked with an asterisk (*) notate that the criteria may be perceived as more restrictive.

- *CG-SURG-112 — Carpal Tunnel Decompression Surgery
 - Outlines the *Medically Necessary* and *Not Medically Necessary* criteria for carpal tunnel decompression surgery
- *CG-SURG-113 — Tonsillectomy with or without Adenoidectomy for Adults
 - Outlines the *Medically Necessary* and *Not Medically Necessary* criteria
- *DME.00043 — Neuromuscular Electrical Training for the Treatment of Obstructive Sleep Apnea or Snoring
 - The use of a neuromuscular electrical training device is considered *Investigational & Not Medically Necessary* for the treatment of obstructive sleep apnea or snoring
- *GENE.00058 — TruGraf Blood Gene Expression Test for Transplant Monitoring
 - TruGraf blood gene expression test is considered *Investigational & Not Medically Necessary* for monitoring immunosuppression in transplant recipients and for all other indications
- *LAB.00040 — Serum Biomarker Tests for Risk of Preeclampsia
 - Serum biomarker tests to diagnosis, screen for, or assess risk of preeclampsia are considered *Investigational & Not Medically Necessary*
- *LAB.00042 — Molecular Signature Test for Predicting Response to Tumor Necrosis Factor Inhibitor Therapy
 - Molecular signature testing to predict response to Tumor Necrosis Factor inhibitor (TNFi) therapy is considered *Investigational & Not Medically Necessary* for all uses, including but not limited to guiding treatment for rheumatoid arthritis
- *OR-PR.00007 — Microprocessor Controlled Knee-Ankle-Foot Orthosis
 - Outlines the *Medically Necessary* and *Not Medically Necessary* criteria for the use of a microprocessor controlled knee-ankle-foot orthosis
- *SURG.00032 — Patent Foramen Ovale and Left Atrial Appendage Closure Devices for Stroke Prevention
 - Added *Medically Necessary* statement for transcatheter closure of left atrial appendage (LAA) for individuals with non-valvular atrial fibrillation for the prevention of stroke when criteria are met
 - Revised *Investigational & Not Medically Necessary* statement for transcatheter closure of left atrial appendage when the criteria are not met





August 2021 update (cont.)

- *SURG.00077 — Uterine Fibroid Ablation: Laparoscopic, Percutaneous, or Transcervical Image Guided Techniques
 - Added *Medically Necessary* statement on use of laparoscopic or transcervical radiofrequency ablation
 - Added *Not Medically Necessary* statement on use of laparoscopic or transcervical radiofrequency ablation when criteria in *Medically Necessary* statement are not met
 - Removed laparoscopic radiofrequency ablation from *Investigational & Not Medically Necessary* statement
 - Removed *Investigational & Not Medically Necessary* statement on radiofrequency ablation using a transcervical approach

Medical Policies

On August 12, 2021, the Medical Policy and Technology Assessment Committee (MPTAC) approved several *Medical Policies* applicable to Healthy Blue. These guidelines take effect January 5, 2022.

Clinical UM Guidelines

On August 12, 2021, the MPTAC approved several *Clinical UM Guidelines* applicable to Healthy Blue. These guidelines were adopted by the Medical Operations Committee for members on September 23, 2021. These guidelines take effect January 5, 2022.



Read more online.

BNE-NL-0091-21



Quality Management

HEDIS measures: Follow-Up After ED Visits for Mental Illness and Alcohol and Drug Dependency

The following HEDIS® measures assess the percentage of emergency department (ED) visits for which the member received a follow-up appointment within seven days and 30 days of being seen in the ED for mental illness or for alcohol and other drug dependence.

Follow-Up After ED Visit for Mental Illness (FUM)

Evaluates the percentage of ED visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit with any practitioner for mental illness. Two rates are reported. The percentage of ED visits for which the member received:

- Follow-up within seven days of the ED visit.
- Follow-up within 30 days of the ED visit.

Timely follow-up care for people with mental illness can lead to fewer repeat visits to the ED and improved physical and mental health function.

Follow-Up After ED Visit for Alcohol and Other Drug Abuse or Dependence (FUA)

Evaluates the percentage of ED visits for members 13 years of age and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, who had a follow-up visit with any practitioner for AOD. Two rates are reported. The percentage of ED visits for which the member received:

- Follow-up within seven days of the ED visit.
- Follow-up within 30 days of the ED visit.

According to studies, follow-up care for individuals with AOD who were seen in the ED is associated with reduced substance use, repeat ED visits, and hospital admissions.

Members earn rewards for screenings through the Healthy Rewards Program

Through Healthy Rewards, members receive incentives for completing their follow-up appointments. They can redeem their reward dollars for retail gift cards.

Screening	Reward	Timing
Follow-Up After ED Visit for Mental Illness (FUM)	\$25	Annually
Follow-Up After ED Visit for Alcohol and Other Drug Abuse or Dependence (FUA)	\$25	Annually

Helpful tips:

- Maintain appointment availability for patients with recent ED visits.
- Assist in scheduling in-person or telehealth follow-up appointments as soon as possible after the ED visit.
- Use appropriate documentation and correct coding. Use the same diagnosis for mental illness or substance use for follow-up visits (a non-mental health/non-substance diagnosis code will not fulfill the measure).
- Reference the plan's *Quality Measures Desktop Reference for Medicaid Providers* and the *HEDIS® Benchmarks and Coding Guidelines for Quality* that is provided for coding information.
- Educate patients on the importance of compliance with their discharge plan and their follow-up appointments.
- Reach out to patients who cancel their appointments and assist with rescheduling as soon as possible.
- Facilitate referrals to behavioral healthcare specialists when appropriate.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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