

Provider News

Simply Healthcare Plans, Inc. (Simply)

Provider Services: Medicaid & Florida Healthy Kids: **844-405-4296** • Medicare: **844-405-4297** | <https://provider.simplyhealthcareplans.com>

Clear Health Alliance (CHA)

Provider Services: Medicaid: **844-405-4296** | <https://provider.clearhealthalliance.com>

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Want to receive our *Provider News* and other communications via email?

Submit your email address to **Simply** and **CHA**.

Simply:



CHA:





Simply Healthcare Plans, Inc. | Medicaid, Florida Healthy Kids and Medicare Advantage
Clear Health Alliance | Medicaid

COVID-19 information

Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA) are closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical teams are 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 the [Simply website](#) and [CHA website](#).

SFLPEC-1898-20/SFLCARE-0208-20



Administration

Simply Healthcare Plans, Inc. | Medicaid

2021 CAHPS Survey results

Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an annual standardized survey conducted between January and May to assess consumer experiences with their provider and health plan, received by a random sample of patients. We use the results to measure our performance against our goals and determine the effectiveness of actions implemented to improve.

2021 NCOA Health Plan Star Rating			
★★★★☆			
Survey Measures	2021 Rate	2021 All Affiliates Adult Medicaid Average	2020 NCOA Quality Compass® National Average (All LOB)
Getting Care			
Getting Needed Care Composite (% Always or Usually)	78.04%	84.54%	82.96%
Ease of Getting Needed Care (% Always or Usually)	80.00%	86.26%	85.86%
Ease of Seeing a Specialist (% Always or Usually)	76.09%	82.83%	80.11%
Getting Care Quickly Composite (% Always or Usually)	83.81%	82.88%	82.35%
Ease of Getting Urgent Care (% Always or Usually)	86.84%	83.10%	85.03%
Ease of Getting a Check-Up or Routine Care (% Always or Usually)	80.77%	82.66%	79.82%
Satisfaction with Plan Physicians			
Rating of Personal Doctor (% 9 or 10)	69.82%	67.80%	69.24%
Rating of Specialist Seen Most Often (% 9 or 10)	76.47%	67.86%	69.47%
Rating of All Healthcare (% 9 or 10)	63.36%	57.70%	57.67%
Coordination of Care (Always or Usually)	81.01%	83.88%	85.14%
Satisfaction with Plan Services			
Rating of Health Plan (% 9 or 10)	62.38%	59.68%	62.23%

Providers directly affect over half of the questions used for scoring. Simply Healthcare Plans, Inc. offers an online course for providers and office staff designed to teach how to improve communication skills, build patient trust and commitment, and expand your knowledge of the *CAHPS Survey*. The Improving the Patient Experience course is available at no cost and is eligible for one continuing medical education (CME) credit by the American Academy of Family Physicians. Providers can access the course at <https://www.mydiversepatients.com/le-ptexp.html>.

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

SFL-NL-0387-21

Administration — Digital Tools

Simply Healthcare Plans, Inc. | Medicaid, Florida Healthy Kids and Medicare Advantage
Clear Health Alliance | Medicaid

Availity Authorization app available beginning in 2022

Submitting prior authorizations is now easier and multi-payer

We know how much easier it is when you have access to digital apps that streamline your work. Thousands of providers already use the Availity* Authorization app to submit prior authorizations for other payers. Now, we want to make it easier to submit prior authorization requests to Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA) by making the app available in 2022 to our providers as well.

ICR is still available

If you need to refer to an authorization that was submitted through the Interactive Care Reviewer (ICR), you still have access to that information. We have developed a pathway for you to access your ICR dashboard — You simply follow the prompts provided through the Availity Authorization app.

Innovation in progress

While we grow the Availity Authorization app to provide even greater functionality and to expand Simply- and CHA-specific prior authorizations, we have provided access to ICR for:

- Appeals
- Behavioral health authorizations
- Federal Employee Program authorizations
- Medical specialty pharmacy authorizations

Notices in the Availity Authorization app will guide you through the process for accessing ICR for these Alternate Authorization/ Appeal functions.

Begin submitting digital prior authorizations through the Authorization app in 2022

If you aren't already familiar with the Availity Authorization app, live training and recorded webinars are available.

Date	Time (All training sessions are one hour)
Wednesday, January 5, 2022	11 a.m. ET/8 a.m. PT
Tuesday, January 11, 2022	3 p.m. ET/12 p.m. PT
Thursday, January 20, 2022	12 p.m. ET/9 a.m. PT
Tuesday, January 25, 2022	12 p.m. ET/9 a.m. PT
Wednesday, January 26, 2022	3 p.m. ET/12 p.m. PT

You can always log onto [availity.com](https://www.availity.com) to view the webinars at your convenience. From **Help & Training**, select **Get Trained** to access the Availity Learning Center. Select the **Session** tab to see all upcoming live webinars.

Tip: To find the authorization training faster, use keyword **AvAuthRef** in the search field.

Now, give it a try

Eliminate the time and costs associated with faxing prior authorizations by using the Availity Authorization app. It's easy, convenient, and available when you are, 24/7.

Get access by logging onto [availity.com](https://www.availity.com). Under the *Patient Registration* tab, select **Authorizations & Referrals**. The app is easy to navigate with intuitive functions that walk you through the submission.

Tips: You will need to have the Authorization Role assignment in order to access the app and to submit prior authorizations. Your organization's Availity administrator can assign the role to you.

If you have any questions, reach out to Availity at **800-282-4548**.

* Availity, LLC is an independent company providing administrative support services on behalf of Simply Healthcare Plans, Inc. and Clear Health Alliance.

SFL-NL-0362-21/SFL-NL-0394-21



Policy Updates



Simply Healthcare Plans, Inc. | Medicare Advantage

Medical step therapy updates

Effective February 1, 2022, the following medications will be included in the Part B medical step therapy precertification review. Step therapy review will apply upon precertification initiation, in addition to the current medical necessity review (as is current procedure). Step therapy will not apply for members who are actively receiving nonpreferred medications listed below.

<i>Clinical Criteria</i>	<i>Preferred drug(s)</i>	<i>Nonpreferred drug(s)</i>
ING-CC-0075	Rituxan, Riabni	Ruxience, Truxima
ING-CC-0167	Rituxan, Riabni	Ruxience, Truxima

SHPCRNL-0127-21

Visit the [Clinical Criteria website](#) to search for the specific *Clinical Criteria*.

Policy Updates — Prior Authorization

Simply Healthcare Plans, Inc. | Medicaid and Florida Healthy Kids
Clear Health Alliance | Medicaid

Prior authorization updates for medications billed under the medical benefit

Effective for dates of service on and after March 1, 2022, the following medication codes billed on medical claims from current or new *Clinical Criteria* documents will require prior authorization.



Simply Healthcare Plans, Inc. | Medicaid
Clear Health Alliance | Medicaid

<i>Clinical Criteria</i>	HCPGS or CPT® code(s)	Drug
ING-CC-0191	J9247	Pepaxto
ING-CC-0192	J1448	Cosela

SFL-NL-0389-21/SFLPEC-2928-21

Simply Healthcare Plans, Inc. | Medicaid
Clear Health Alliance | Medicaid

<i>Clinical Criteria</i>	HCPGS or CPT® code(s)	Drug
ING-CC-0116	J9036	Belrapzo
ING-CC-0104	J0642	Khapzory

SFLPEC-2829-21/SFL-NL-0392-21

Simply Healthcare Plans, Inc. | Medicaid and Florida Healthy Kids

<i>Clinical Criteria</i>	HCPGS or CPT® code(s)	Drug
ING-CC-0183	J3590	Sogroya®
ING-CC-0184	J9348	Danyelza®
ING-CC-0185	C9074, J0224	Oxlumo™
ING-CC-0186	J9353	Margenza™
ING-CC-0187	Q2054	Breyanzi®
ING-CC-0188	J3490, J3590	Imcivree™
ING-CC-0189	J1426	Amondys 45™
ING-CC-0190	J3490, J3590, C9399	Nulibry™

SFLPEC-2811-21/SFL-NL-0388-21

Simply Healthcare Plans, Inc. | Florida Healthy Kids

<i>Clinical Criteria</i>	HCPGS or CPT® code(s)	Drug
ING-CC-0116	J9036	Belrapzo
ING-CC-0161	J9227	Sarclisa
ING-CC-0104	J0642	Khapzory

SFL-NL-0391-21

Please note, inclusion of a national drug code on your medical claim will help expedite claim processing of drugs billed with a not otherwise classified (NOC) code.

Visit the [Clinical Criteria website](#) to search for the specific *Clinical Criteria*.



Simply Healthcare Plans, Inc. | Medicare Advantage

Simply Healthcare Plans, Inc. expands specialty pharmacy precertification list

Effective for dates of service on and after April 1, 2022, the specialty Medicare Part B drugs listed in the table below will be included in our precertification review process.

Federal and state law, as well as state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these precertification rules and must be considered first when determining coverage. Noncompliance with new requirements may result in denied claims.

HCPCS or CPT® code	Medicare Part B drugs
J3490, J3590	Saphnelo
J3490, J3590	Ryplazim
J3590	Rylaze

SFLCARE-0485-21/SHPCRNL-0129-21

Policy Updates — *Medical Policies and Clinical 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://medicalpolicy.simplyhealthcareplans.com/shp_search.html.

Simply Healthcare Plans, Inc. | Medicaid, Florida Healthy Kids and Medicare Advantage
Clear Health Alliance | Medicaid

February 2021 update

Notes/updates:

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

- *CG-LAB-17 - Molecular Gastrointestinal Pathogen Panel (GIPP) Testing for Infectious Diarrhea in the Outpatient Setting
 - Outlines the medical necessity and not medically necessary criteria for multiplex PCR-based panel testing of gastrointestinal pathogens for infectious diarrhea in the outpatient setting
- *ANC.00008 - Cosmetic and Reconstructive Services of the Head and Neck
 - Added otoplasty using a custom-fabricated device, including but not limited to a custom fabricated alloplastic implant, as cosmetic and not medically necessary
- *CG-OR-PR-04 - Cranial Remodeling Bands and Helmets (Cranial Orthotics)
 - Removed condition requirement from reconstructive criteria and replaced current diagnostic reconstructive criteria with criteria based on one of the following cephalometric measurements: the cephalic index, the cephalic vault asymmetry index, the oblique diameter difference index, or the cranioproportional index of plagiocephelometry
- *CG-SURG-78 - Locoregional and Surgical Techniques for Treating Primary and Metastatic Liver Malignancies
 - Added TACE using immunoembolization (for example, using granulocyte-macrophage colony-stimulating factor [GM-CSF]) as not medically necessary for all liver-related indications
- *CG-SURG-82 - Bone-Anchored and Bone Conduction Hearing Aids
 - Revised audiologic pure tone average bone conduction threshold criteria for unilateral implant for bilateral hearing loss
 - Added not medically necessary statement for when medical necessity criteria have not been met and clarified not medically necessary statement regarding replacement parts or upgrades
 - Added bone conduction hearing aids using an adhesive adapter behind the ear as not medically necessary for all indications
- CG-GENE-22 - Gene Expression Profiling for Managing Breast Cancer Treatment
 - A new *Clinical Guideline* was created from the content contained in GENE.00011. There are no changes to the guideline content and the publish date is April 7, 2021.



February 2021 update (cont.)

- CG-GENE-23 - Genetic Testing for Heritable Cardiac Conditions
 - A new *Clinical Guideline* was created from the content contained in GENE.00007 and GENE.00017. There are no changes to the guideline content and the publish date is April 7, 2021
- CG-SURG-110 - Lung Volume Reduction Surgery
 - A new *Clinical Guideline* was created from content contained in SURG.00022. There are no changes to the guideline content and the publish date is June 25, 2021

AIM Specialty Health[®] (AIM)** *Clinical Appropriateness Guideline* updates. To view AIM guidelines, visit the [AIM page](#).

- The *Small Joint Surgery Guideline* has been revised and will be effective on March 14, 2021.
- The following Guidelines have been revised and will be effective on January 2, 2022:
 - * Joint Surgery
 - * Spine Surgery

* AIM Specialty Health is an independent company providing some utilization review services on behalf of Simply Healthcare Plans, Inc. and Clear Health Alliance.

SFL-NL-0300-21

Medical Policies

On February 11, 2021, the Medical Policy and Technology Assessment Committee (MPTAC) approved several *Medical Policies* applicable to Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA). These guidelines take effect January 2, 2022.

Clinical UM Guidelines

On February 11, 2021, the MPTAC approved several *Clinical UM Guidelines* applicable to Simply and CHA. These guidelines were adopted by the Medical Operations Committee for Simply and CHA members on February 25, 2021. These guidelines take effect January 2, 2022.



[Read more online.](#)

Products and Programs — Pharmacy

Simply Healthcare Plans, Inc. | Medicaid, Florida Healthy Kids and Medicare Advantage
Clear Health Alliance | Medicaid

Important update on Botox®

Effective January 1, 2022, CVS Specialty Pharmacy* and IngenioRx Specialty Pharmacy* will no longer distribute the brand name drug Botox,® but it will still be available to Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA) members either through buy and bill or through an available retail pharmacy.

Please note:

- This is not a change in member benefits. This is a change in the Botox vendor only.
- If the member is not using IngenioRx/CVS Specialty Pharmacy to obtain Botox, no action is needed.

Simply | Medicaid and Florida Healthy Kids
CHA | Medicaid

For Botox managed under a member's medical benefit

Effective January 1, 2022, you will need to buy this drug and bill Simply and CHA.

If you have questions regarding a member's medical specialty pharmacy benefits, call Simply Provider Services at **877-577-9044** or CHA Provider Services at **844-405-4296**.

For Botox managed under a member's pharmacy benefit

Effective January 1, 2022, members who currently obtain Botox through IngenioRx Specialty Pharmacy using their pharmacy benefit must change to another in-network pharmacy that distributes Botox.

If you have questions regarding a member's pharmacy benefit, call Pharmacy Member Services:

- Simply (MMA): **833-214-3607**
- CHA: **833-235-2028**
- Florida Healthy Kids: **833-267-3110**

SFL-NL-0380-21

Simply | Medicare Advantage

For Botox managed under a Medicare member's part B (medical) benefit

Providers should be using buy and bill for any Medicare member who currently receive Botox through their part B (medical) benefit. If your patient is receiving Botox using their part B benefit and is receiving their prescription from IngenioRx/CVS Specialty pharmacy, effective January 1, 2022, IngenioRx/CVS Specialty will no longer filled the prescription. As of January 1, 2022, you will need to buy this drug and bill your patient's health plan.

If you have questions regarding a Medicare member's part B benefits, call Provider Services using the information on the back of the member's ID card.

For Botox managed under a Medicare member's part D (pharmacy) benefit

Effective January 1, 2022, Medicare members who currently receive Botox through IngenioRx/CVS Specialty Pharmacy using their part D (pharmacy) benefit must change to another in-network specialty or retail pharmacy that can obtain and dispense Botox.

If you have questions regarding a Medicare member's part D benefit, call Pharmacy Member Services using the information on the back of the member's ID card.

SHPCRNL-0126-21

** CVS is an independent company providing pharmacy services on behalf of Simply Healthcare Plans, Inc. and Clear Health Alliance. IngenioRx, Inc. is an independent company providing pharmacy benefit management services on behalf of Simply Healthcare Plans, Inc. and Clear Health Alliance.*



Quality Management

Simply Healthcare Plans, Inc. | Medicaid and Florida Healthy Kids
Clear Health Alliance | Medicaid

Reducing the burden of medical record review and improving health outcomes with HEDIS ECDS reporting

The HEDIS® Electronic Clinical Data Systems (ECDS) reporting methodology encourages the exchange of the information needed to provide high-quality health-care services.

The ECDS Reporting Standard provides a method to collect, and report structured electronic clinical data for HEDIS quality measurement and improvement.

Benefits to providers:

- Reduced burden of medical record review for quality reporting
- Improved health outcomes and care quality due to greater insights for more specific patient-centered care

ECDS reporting is part of the National Committee for Quality Assurance's (NCQA) larger strategy to enable a Digital Quality System and is aligned with the industry's move to digital measures.

Learn more about NCQA's digital quality system and what it means to you and your practice [online](#).

ECDS measures

The first publicly reported measure using the HEDIS ECDS Reporting Standard is the Prenatal Immunization Status (PRS) measure. In 2022, NCQA will include the PRS measure in Health Plan Ratings for Medicaid and Commercial plans for measurement year 2021.

For HEDIS measurement year 2022, the following measures can be reported using ECDS:

- Childhood Immunization Status (CIS-E)*
- Immunizations for Adolescents (IMA-E)*
- Breast Cancer Screening (BCS-E)
- Colorectal Cancer Screening (COL-E)
- Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)
- Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)*
- Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)
- Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)
- Depression Remission or Response for Adolescents and Adults (DRR-E)
- Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)
- Adult Immunization Status (AIS-E)
- Prenatal Immunization Status (PRS-E) (Accreditation measure for 2021)
- Prenatal Depression Screening and Follow-Up (PND-E)
- Postpartum Depression Screening and Follow-Up (PDS-E)

* Indicates that this is the first year that the measure can be reported using ECDS

Of note, NCQA added the ECDS reporting method to three existing HEDIS measures: Breast Cancer Screening, Colorectal Cancer Screening and Follow-up Care for Children Prescribed ADHD Medication. Initially, the ECDS method will be optional, which provides health plans an opportunity to try out reporting using the ECDS method before it is required to transition to ECDS only in the future.

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

SFL-NL-0382-21