# **Provider newsletter**



Mental Health Texas (mentalhealthx.org) The Texas Statewide Behavioral Health Coordinating Council (SBHCC) recently announced the redesign of the Mental Health Texas website, mentalhealthtx.org.

This website is a resource to help people locate mental health and substance use disorder services, get information about common mental health conditions and social services, and find crisis hotline services. Wellness information includes stress management, healthy living, and recovery resources. The website also includes mental health resources related to COVID-19.

There are links to Texas programs to support the health and social needs of your patients, such as:

- Your Texas Benefits
- Supplemental Nutrition Assistance Program (SNAP)
- Texas 2-1-1
- Texas Dept. of Housing & Community Affairs
- Legal Services
- Unemployment Benefits

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Aetna Better Health of Texas

### AetnaBetterHealth.com/Texas



## Mental Health Texas (continued from previous page)

This website is a valuable resource for patients, providers, and caregivers. There are links on the homepage for a provider search (mental health, substance use) and crisis intervention via phone, chat, text, and TTY. It's a one-stop page to help you navigate mental health and supportive services for children, teens, seniors, and veterans in Texas.



## The Child Psychiatry Access Network

The Child Psychiatry Access Network (CPAN) is a network of Texas academic hubs that provides telemedicine-based consultation, care coordination, and training to pediatricians and other primary care providers to assist them in addressing mental health issues in their patients. CPAN is an initiative of the Texas Child Mental Health Care Consortium (TMHCC), created in 2019 by the 86th Texas Legislature. The state allocated \$99 million to address critical gaps in access to child mental health care and bridge the continuum of care between primary care physicians and child-adolescent psychiatry.

- Estimations show that 1.4 million Texas youth have a diagnosable mental, behavioral, or developmental disorder
- Up to one-third of pediatric cases seen in the primary care setting involve mental health concerns each day
- Two-thirds of pediatric behavioral health needs can be addressed in an integrated pediatric primary care setting

#### What does CPAN offer?

- A network of access centers that provide child and adolescent behavioral health consultation services and training opportunities for pediatricians and primary care providers
- CPAN is a FREE service for primary care physicians and providers (MD/DO, NP, PA)
- PCPs can call the CPAN hotline for a consultation with a pediatric psychiatrist or behavioral health specialist (response within 30 minutes)
- PCPs may ask about mental health assessment, symptoms, and psychiatric medicines
- PCPs can receive referrals to mental health providers in the patient's community
- PCPs can learn about relevant CME opportunities

#### How to enroll in CPAN

- Enrollment is quick and easy
- Call Provider Enrollment: 1-888-901-CPAN or 1-888-901-2726



## Special Investigation Unit (SIU)

One of the challenges that providers face in the treatment of sick children is determining how to best treat them. In recent years Polymerase Chain Reaction (PCR) testing has become more widely used to detect viruses. The use of PCR testing in the clinical setting is to be limited to three to five targets. For suspected respiratory viruses, only procedure code 87631 is payable after common ailments have been ruled out.

Aetna Clinical Policy Bulletin 0650 Polymerase Chain Reaction Testing: Selected Indications states the following criteria must be met to use respiratory virus and/or bacteria panels (e.g., BioFire FilmArray Respiratory Panel (EZ, RP, or RP2), ePlex RP panel):

- · Member has signs and symptoms of a respiratory infection, and
- Member is immunocompromised and/or considered high-risk for complications (e.g., receiving cancer treatment, organ transplant recipient); and
- Test will be used to guide therapy

All three criteria are required prior to testing. Generally, the average member is not at high risk for complications. Additionally, it must be clear the test is necessary to guide treatment course.

In the clinical setting, respiratory panels billed through CPT codes 87632 and 87633 are not payable. The member must be in an emergency room, in-patient hospitalization, or an urgent care facility for these codes to be paid. There are further requirements that must be adhered to for those codes to be paid. The Special Investigations Unit identified multiple cases of primary care providers using procedure code 87633 on a routine basis. The review of medical records revealed the three above listed conditions are not met and medically necessity is not established. This resulted in providers being required to repay overpaid funds due to this error. This situation creates a hardship for providers which can be avoided by correctly identifying members who require this testing, rather than performing the tests on a routine basis.



## Changes to the Texas Medicaid Preferred Drug List

Texas Medicaid published the semi-annual update of the Medicaid Preferred drug list on July 30. The update is based on the changes presented and recommended at the January and April 2020 Texas Drug Utilization Review Board meetings. The tables below summarize noteworthy changes for the July 2020 update.

Drugs on the Texas Medicaid formulary are designated as preferred, non-preferred, or

have neither designation. The preferred drug list includes only drugs identified as either preferred or non-preferred. Drugs on the preferred drug listed as "preferred" are available to members without prior authorization; however, some could require a clinical prior authorization. Drugs on the preferred drug list that are identified as "non-preferred" will require prior authorization. There are certain clinical prior authorizations that all Medicaid managed care organizations (MCO) are required to perform.

## Changes to the Texas Medicaid Preferred Drug List (continued from previous page)

Drug Name	Preferred Status
peroxide/clindaymycin	Preferred
(tampza ER (oxycodone)	Preferred
/enlafaxine IR	Preferred
movig (erenumab)	Preferred
alcyte Solution (valganciclovir)	Preferred
ransep ( darbepoetin)	Preferred
ovolin Insulin Vials	Preferred
snera Pens (benralizumab)	Preferred
grezza (valbenazine)	Preferred
egabalin capsule	Preferred
nphetamine salt combination	Preferred
ug Name	Non-Preferred
urianz (istradefyline)	Non-Preferred
cuado (asenspine)	Non-Preferred
niflu (oseltamivir)	Non-Preferred
Air Digihaler (albuterol)	Non-Preferred
xentzo (peg-filgrastim)	Non-Preferred
aklir Pressair (aclidumium/formoterol)	Non-Preferred
ocrit (rhuEPO)	Non-Preferred
lderral XR (amphetamine salts)	Non-Preferred
rnay PM (methylphenidate)	Non-Preferred
manex HFA (mometasone)	Non-Preferred
belsus (semaglutide)	Non-Preferred
ovolin Insulin Pens	Non-Preferred
ceniv (immune globulin)	Non-Preferred
nbify (immune globulin)	Non-Preferred
icala (mepolizmab)	Non-Preferred
rica (pregabalin	Non-Preferred
izalma (duloxetine)	Non-Preferred
bacaine Kit (gabapentin/lidocai	Non-Preferred

www.txvendordrug.com/formulary/prior-authorization/preferred-drugs

# Reinforce Infection Control in Light of Coronavirus

The COVID-19 coronavirus outbreak will put the spotlight on ways to limit the spread of respiratory infections. This coronavirus is thought to be transmitted by respiratory secretions, similar to other coronaviruses, such as SARS and MERS.

Put the current risk in perspective to help calm worried patients, since it does not yet come close to the overall impact of seasonal influenza.

Even in a relatively mild season, the flu results in numerous hospitalizations, emergency, and office visits, and missed school and work. Over the past 35 years, annual flu-related deaths have reached as high as 50,000 in a single season. Healthy kids and adults may be far less likely to suffer the more catastrophic consequences of the flu. However, it poses a risk to the very young, old, and chronically ill in our households, schools, and workplaces.

As health care professionals, we play a pivotal role in lessening the burden of flu-related suffering. With flu season rapidly approaching, it's time to think about the three P's: **prepare**, **protect and prevent**.

#### **Prepare:**

- Become knowledgeable about current ACIP recommendations for this winter: www.cdc.gov/ flu/professionals/acip
- Order your vaccine stock early.
- If possible, create a separate nurse appointment
- Also, if possible, create a separate nurse appointment list for patients only seeking flu and Pneumonia vaccines. Allow nurses to administer these vaccines without a doctor visit.
- Create a list of alternative sites where flu and pneumonia vaccines are available for your patients (i.e., retail clinics in drug stores, supermarkets,

and other local options). Children over age 7 can receive the flu vaccine at a pharmacy.

- Review current testing and treatment recommendations:
  - www.cdc.gov/flu/professionals/diagnosis
  - www.cdc.gov/flu/professionals/antivirals/ summary-clinicians.htm

#### Protect:

- Include a flu prevention statement in every patient contact. You can suggest your office staff end every phone conversation with, "Just a reminder, we have flu shots available and strongly encourage that you protect yourself and your family."
- Display flu prevention material prominently in your office and waiting area.
- Set an example by being the first in your office to be vaccinated. See that your office/practice achieves 100 percent immunization of staff and family members as soon as possible.
- Identify and actively reach out to high-risk patients.

#### Prevent:

- Use every patient encounter as an opportunity to immunize (i.e., wellness exams, sports physicals, acute and chronic illness follow-up visits).
- Emphasize to patients the importance of basic infection-control measures (thorough and frequent handwashing).
- Check to be sure children under 5 years old and eligible adults have received the pneumonia shots (pneumonia is the leading cause of flu-related deaths).

**Remember:** There is no charge for the flu vaccine for Medicaid members. Those members over 7 years of age can receive the flu vaccine at pharmacies at no charge.

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## COVID-19 News and Updates

Please visit our website at AetnaBetterHealth.com/Texas/providers/covid-19 for the latest news and updates regarding COVID-19 news, updates and webinars.