

PROVIDER ADVISORY

NOTICE OF UPDATED MEMBER BENEFITS, CLAIMS, COVERAGE AND ADMINISTRATIVE CHANGES • OCTOBER 2009

The care our members receive is of the utmost importance. That's why AlohaCare wants to thank you for your commitment to your patients, especially during this year's flu season. The following information is to help you expedite your claims for the H1N1 vaccine. On the backside, we've also included an update about referrals for specialty care.

By working together, we can continue to provide quality health care and great service to our members and your patients.

H1N1 Vaccine

The Hawaii Department of Health (DOH) will be coordinating the distribution of H1N1 vaccine. Please register with the DOH. Information on the 2009 H1N1 vaccine campaign is available at DOH Web site: www.hawaii.gov/health.

H1N1 vaccine and associated supplies (needles, syringes, alcohol swabs, and sharps containers) are being provided free through the government. Providers are allowed to charge an administration fee.

Billing Guidelines

Program	Code & Description	Dx Code	Reimbursement
Medicare: AlohaCare Advantage & AlohaCare Advantage Plus	G9141: <i>Influenza A (H1N1) immunization administration</i>	V04.81 (influenza)	Per Fee Schedule
	G9142: <i>Influenza A (H1N1) vaccine, any route of administration</i>	V04.81 (influenza)	Bill with zero charge
QUEST: AlohaCare	90470: <i>H1N1 immunization administration (intramuscular, intranasal), including counseling when performed; Or, 90471: Immunization Administration</i>	V04.81 (influenza)	Per Fee Schedule
	90663: <i>Influenza virus vaccine, pandemic formulation, H1N1; Or, G9142: Influenza A (H1N1) vaccine, any route of administration</i>	V04.81 (influenza)	Bill with zero charge

Tamiflu & Relenza Coverage

For both Seasonal and H1N1 treatment, Tamiflu and Relenza are available to both children and adults.

QUEST-Net and QUEST-ACE Adult – Referrals for Specialty Care

Effective immediately, QUEST-Net and QUEST-ACE adult members (age 21 and over) no longer need referrals for specialty care. However, members still must be referred to an AlohaCare network provider. Coverage is limited to a maximum of twelve (12) medical outpatient visits per plan year, and can be a combination of any of the services below.

Services include:

- Health assessments/routine physical examinations (annual pap smear is included in an assessment visit for women of childbearing age)
- Visits to a PCP or specialist for diagnosis, treatment or second opinion
- Family planning services
- Alcohol and substance abuse visits
- Visits to confirm pregnancy
- Visits for diagnosis or treatment of conditions related to medically indicated termination of pregnancy

Claims will be processed based on receipt date up to the QUEST-Net or QUEST-ACE benefit limit.

Prior authorization will continue to be required for specific services based on the AlohaCare Prior Authorization List and the member's plan benefits. A prior authorization request should only be submitted for services that are covered plan benefits. For example, QUEST-Net and QUEST-ACE include limited benefits for surgery and inpatient care. A prior authorization is needed for a surgical procedure if it will be performed in an Ambulatory Surgical Center or inpatient

setting. However, these plans do not cover services such as durable medical equipment, or physical, occupational or speech therapy. Any requests received for non-covered services will be denied.

Facility notification of a member's inpatient admission, usually in the form of a facility admission face sheet faxed to AlohaCare within 24 hours of the member's admission to the facility, will also continue to be required.