

CONNECTIONS

2022 | ISSUE 3



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Although National Influenza Vaccination Week is observed December 6 – 12, peak flu season (winter to early spring) is not too late to vaccinate.

2022 – 2023 flu vaccinations

Your strong recommendation is a critical factor in whether your patients get vaccinated. During the 2022 – 2023 flu season, while still facing COVID-19, we are asking you to encourage your AmeriHealth Caritas Pennsylvania (PA) and AmeriHealth Caritas PA Community HealthChoices (CHC) patients to get their flu shot.

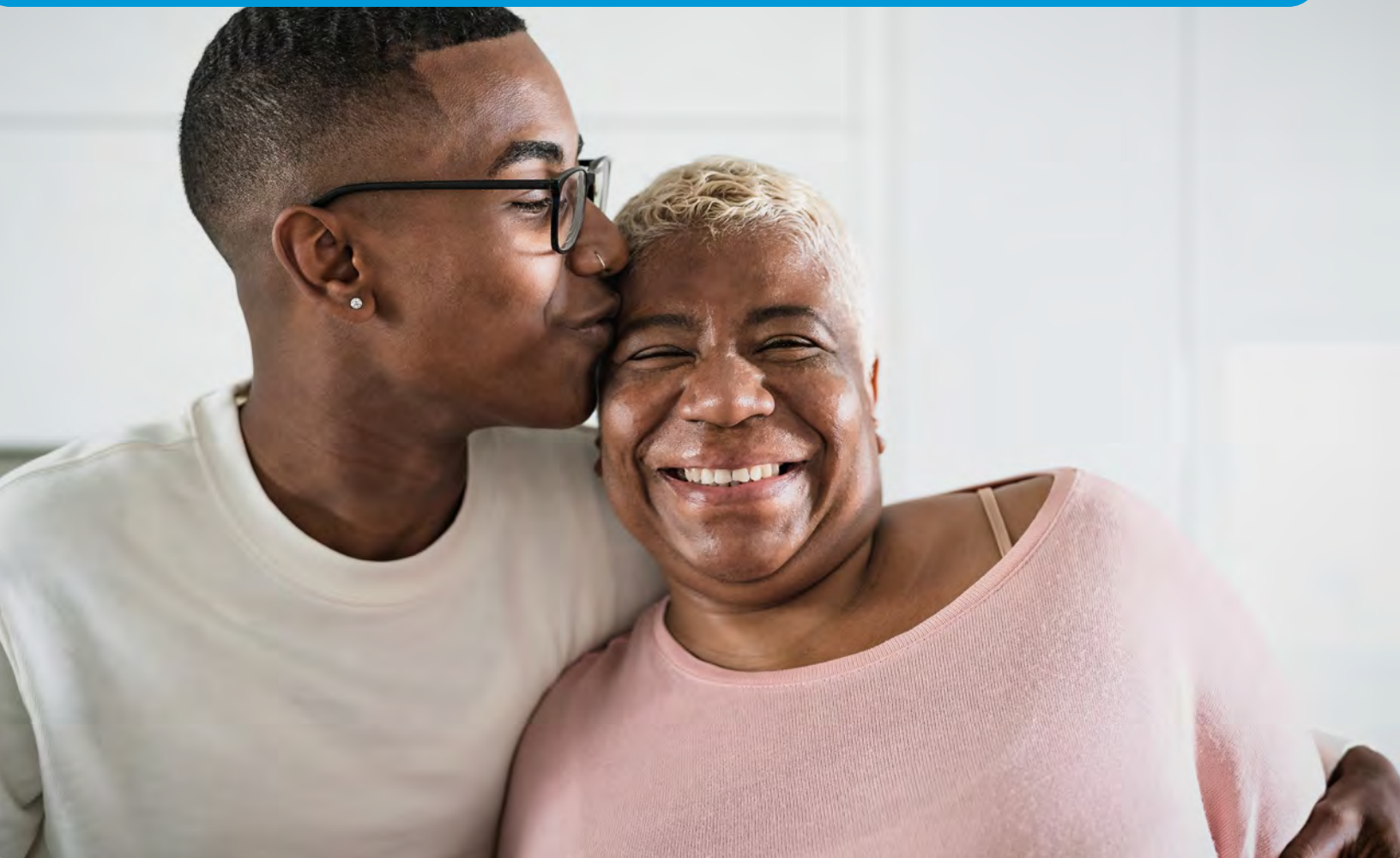
***Important reminder:** Our members and Participants (now age 3 and older) can also be referred to their local participating pharmacy for flu vaccination.

Participating providers will be reimbursed for the administration of the seasonal flu vaccine to children and adults for the following procedure codes:

- 90662 - Influenza, split virus, 65 years and older, enhanced immunogenicity via increased antigen content, intramuscular use, preservative free
- 90672 - Influenza, quadrivalent, live, intranasal, 2-49 years
- 90674 - Influenza, quadrivalent (ccIV4), derived from cell cultures, subunit, preservative, and antibiotic free, intramuscular use
- 90686 - Influenza, quadrivalent, split virus, preservative free, 3 years and older, intramuscular
- 90687 - Influenza virus vaccine, quadrivalent, split virus, 6 – 35 months of age, intramuscular
- 90688 - Influenza virus vaccine, quadrivalent, split virus, 3 years and older, intramuscular
- 90756 - Influenza virus vaccine, quadrivalent (ccIV4), derived from cell cultures, subunit, antibiotic free, 0.5 ml dosage, for intramuscular use

Please note:

- ✓ Reimbursement for administration of seasonal flu vaccine to members or Participants older than age 18 includes the cost of the vaccine.
- ✓ Providers administering seasonal flu vaccine to members or Participants older than age 18 should obtain the vaccine and supplies from their regular vaccine supplier.
- ✓ Reimbursement for administration of seasonal flu vaccine to members younger than 18 is an administration fee only.
- ✓ Seasonal flu vaccines for children (up to age 18) are provided free through the Pennsylvania Department of Health's Vaccines for Children Program (VFC).



Evusheld COVID-19 treatment for high-risk groups

The Pennsylvania Department of Human Services (DHS) released Medical Assistance Bulletin (MAB) 01-21-59, approving the administration of tixagevimab/cilgavimab (Evusheld) to aid in COVID-19 prevention.

Evusheld is to be administered every six months for pre-exposure prophylaxis to supplement vaccine protection. Patients may start receiving Evusheld two weeks after their most recent COVID-19 vaccine or booster.

Eligibility requirements for Evusheld include:

- Moderately or severely immunocompromised individuals
- Certain adults and pediatric individuals 12 years of age and older weighing at least 40 kilograms with no known SARS-CoV-2 exposure
- Individuals in which vaccination with any available COVID-19 vaccine is not recommended due to a history of severe adverse reaction to a COVID-19 vaccine(s)

To review the complete MAB 01-21-59, visit:

www.amerihealthcaritaspa.com > Providers > Communications > DHS/Medical Assistance bulletins

www.amerihealthcaritaschc.com > For Providers > Resources > Department of Human Services (DHS) bulletins and news



New solution available on NaviNet for online prior authorization

AmeriHealth Caritas Pennsylvania, AmeriHealth Caritas PA CHC, and AmeriHealth Caritas VIP Care have worked with NantHealth/NaviNet to implement a new system for providers to submit prior authorization requests for medical and behavioral health services. **Medical Authorizations** is a streamlined, robust, and intuitive online authorization workflow.

In addition to submitting and inquiring about existing authorizations, medical providers can also:

- ✓ Verify if **No Authorization is Required**
- ✓ Receive **Auto Approvals**, in some circumstances
- ✓ Submit **Amended Authorization**
- ✓ **Attach supplemental documentation**
- ✓ Sign up for **in-app status change notifications** directly from the health plan
- ✓ Access a **multi-payer authorization log**
- ✓ **Submit inpatient concurrent reviews** online if you have Health Information Exchange (HIE) capabilities (fax is no longer required)
- ✓ Review **inpatient admission notifications** and provide supporting clinical documentation

Want to learn more about Medical Authorizations?

Video tutorials and **step-by-step** instructions will be available via the NaviNet Plan Central page and the NantHealth Help Center.

Will training be offered? Contact your Provider Network Management Account Executives for training at **1-800-521-6007**.

Notice of privacy practices

AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC are committed to protecting the privacy of our member and Participant health information, and to complying with applicable federal and state laws that protect the privacy and security of this information. Consistent with this commitment, we have established basic requirements for the use or disclosure of member and Participant protected health information (PHI). For a complete and detailed description of our routine uses and disclosures of PHI, as well as the organization's internal protection of oral, written, and electronic PHI, please visit:

www.amerihealthcaritaspa.com > **Providers > Resources > Communications > HIPAA**

www.amerihealthcaritaschc.com > **For Participants > Getting Care > Race, Ethnicity, and Language > Privacy protections for Participant race, ethnicity, and language data**



Medical record documentation

Complete and consistent documentation in patient medical records is an essential component of quality patient care. AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC adhere to medical record requirements that are consistent with national standards on documentation and applicable laws and regulations. We perform an annual medical record review on a random selection of practitioners. The medical records are audited using these standards.

A list of our medical record standards is available at:

www.amerihealthcaritaspa.com > **Providers > Resources > Medical Record Standards** and
www.amerihealthcaritaschc.com > **For Providers > Resources > Medical Record Standards**

Language and translation services

To help ensure our members and Participants continue to have access to the best possible health care and services in their preferred language, we are extending to our network providers the opportunity to contract with Language Services Associates (LSA) at our low, corporate telephonic rates.



Visit www.amerihealthcaritaspa.com > **Providers > Resources > Initiatives > Cultural competency** and www.amerihealthcaritaschc.com > **For Providers > Training > Get language services for your practice at discounted prices** to review a description of services and a letter of commitment for complete details and contact information. You may address any questions you have directly to LSA, since this relationship will be between your office and LSA. Feel free to call them at **1-800-305-9673, ext. 55321**.



HEDIS data collection and reporting

As we look forward to our next cycle of HEDIS data collection and reporting, we wanted to first thank you for your continued participation in this important quality initiative. We are also taking this opportunity to highlight some of the lessons we have learned through this process, and to remind you of your key role in helping us measure and report on the quality of care delivered to our members and Participants — your patients.

Every provider in our network is required by contract to cooperate with and participate in our Quality Management (QM) program and Quality Assessment and Performance Improvement (QAPI) program. We rely on your cooperation and participation to meet our own state and federal obligations as a Medicaid managed care organization.

Our access to the medical records maintained by our providers is a critical component of our data collection as we seek to ensure appropriate and continued access to care for our members and Participants. Our plans or our designees must receive medical records from you in a timely manner for purposes of HEDIS data collection, NCQA accreditation, medical records documentation audits, and other quality-related activities that our QAPI program comprises. We will reach out from time to time to request records for these purposes; it is essential that you provide requested records within the time frames set forth in those notices.

Our clinical reviewers fully investigate potential quality of care (QOC) concerns, in accordance with our policy. Providers are expected to comply with QOC review processes, beginning with the timely submission of records in response to requests from us. Your support of and participation in this critical review process help to ensure the provision of high-quality care and service to our members and Participants.

Fraud, waste, and abuse

If you or any entity with which you contract to provide health care services on behalf of AmeriHealth Caritas Pennsylvania or AmeriHealth Caritas PA CHC becomes concerned about or identifies potential fraud or abuse, please contact us by:

- Calling the toll-free Fraud, Waste, and Abuse hotline at **1-866-833-9718**
- Emailing **fraudtip@amerihealthcaritas.com**
- Mailing a written statement to:
Special Investigations Unit
AmeriHealth Caritas Pennsylvania and
AmeriHealth Caritas PA CHC
200 Stevens Drive
Philadelphia, PA 19113

For more information about Medical Assistance fraud and abuse, please visit the DHS website at **<https://www.dhs.pa.gov/about/Fraud-And-Abuse/Pages/MA-Fraud-and-Abuse---General-Information.aspx>**.

We are committed to detecting and preventing acts of fraud, waste, and abuse and have a webpage dedicated to addressing these issues and mandatory screening information. Visit:

www.amerihealthcaritaspa.com > Providers > Resources > Billing > Fraud, waste, and abuse information

www.amerihealthcaritaschc.com > For Providers > Claims and billing > Fraud, waste, and abuse information

Topics include:

- Information on screening employees for federal exclusion
- How to report fraud to AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC
- How to return improper payments or overpayments to us
- Information on provider mandatory fraud, waste, and abuse training



- **Note:** After you have completed the training, please complete the attestation.
- AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC **medical providers**, go to:
<https://www.surveymonkey.com/r/FWAAttest>
- AmeriHealth Caritas PA CHC **long-term services and supports (LTSS) providers**, go to:
https://www.surveymonkey.com/r/FWA_Attest

Access to Care Management

AmeriHealth Caritas Pennsylvania has multiple programs and resources available for providers caring for our members who may require complex care management services. These include:

- Integrated Health Care Management (complex care management)
- Let Us Know program
- Special Needs Unit
- Bright Start® program for pregnant members

For more information and contacts for these programs, please visit www.amerihealthcaritaspa.com > **Providers > Resources > Special needs resources.**



Third-party liability and coordination of benefits reminder

Third-party liability (TPL) is when the financial responsibility for all or part of a member's health care expenses rests with an individual entity or program (e.g., Medicare, commercial insurance) other than AmeriHealth Caritas Pennsylvania.

COB (coordination of benefits) is a process that establishes the order of payment when an individual is covered by more than one insurance carrier. AmeriHealth Caritas Pennsylvania is always the payer of last resort. This means that all other insurance carriers (the "primary insurers") must consider the health care provider's charges before a claim is submitted to AmeriHealth Caritas Pennsylvania. Therefore, before billing AmeriHealth Caritas Pennsylvania when there is a primary insurer, providers are required to bill the primary insurer first and obtain an Explanation of Benefits (EOB) statement from the primary insurer. Health care providers then may bill AmeriHealth Caritas Pennsylvania for the claim by submitting the claim along with a copy of the primary insurer's EOB.

Important note: Upon discovery of new TPL, or revisions to existing TPL information, providers should supply that information to AmeriHealth Caritas Pennsylvania. If you have specific questions regarding TPL and COB billing, please contact your Provider Account Executive or Provider Services at **1-800-521-6007**.

For more information regarding TPL or COB, visit the dedicated TPL webpage at www.amerihealthcaritaspa.com > **Providers > Billing > Third-party liability.**



Covered benefits and services

What is covered and what is not covered by AmeriHealth Caritas Pennsylvania?

Our members are entitled to all the benefits provided under the Pennsylvania Medical Assistance program.

Benefits include, but are not necessarily limited to, the following:

- Ambulance
- Behavioral health services*
- Chemotherapy and radiation therapy
- Dental care
- Durable medical equipment (DME) and medical supplies
- Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services
- Family planning
- Home health care
- Hospitalization
- Laboratory services
- Nursing facility services
- Obstetrical/gynecological services
- Other specialty care services**
- Pharmacy services
- Primary care services
- Physical, occupational, and speech therapy
- Rehabilitation services
- Renal dialysis
- Vision care

* Please note! Under the HealthChoices program, behavioral health services are coordinated through and provided by the member's county behavioral health managed care organization (BH-MCO). These services are not part of our benefit package, but are available to all AmeriHealth Caritas Pennsylvania members through the BH-MCOs. Call AmeriHealth Caritas Pennsylvania Provider Services at **1-800-521-6007**.

For members with a life-threatening, degenerative, or disabling disease or condition, or members with other special needs, a standing referral may be available. For more information on obtaining standing referrals, please contact the Provider Services department at **1-800-521-6007.



Be involved – join our Participant Advisory Committee

AmeriHealth Caritas PA CHC hosts a quarterly Participant Advisory Committee meeting, and we are asking for your help.

The Participant Advisory Committee is a forum where Participants, providers, caregivers, family members, and direct care workers come together to help us make a difference.

The purpose of the committee is to provide our Participants with an effective means to consult with each other and, when appropriate, coordinate efforts and resources for the benefit of the entire CHC population in the zone, including people with LTSS needs.

2023 Participant Advisory Committee meeting schedule (all meetings will be on Zoom until further notice)

| Zone | Time | Dates | | | |
|----------------|--------------------|----------|---------|--------------|-------------|
| Lehigh/Capital | 1:30 p.m. – 3 p.m. | March 14 | June 13 | September 12 | December 12 |
| Northeast | 3 p.m. – 4:30 p.m. | March 9 | June 8 | September 7 | December 7 |
| Northwest | 10:30 a.m. – noon | March 9 | June 8 | September 7 | December 7 |
| Southwest | 10:30 a.m. – noon | March 15 | June 14 | September 13 | December 13 |

We are excited to share that we are actively recruiting a diverse group of Participants and providers based on geographic and plan diversity!

- Do you know a Participant who likes to be involved in community meetings or organizations?
- Do you know a formal or informal caregiver who has expressed interest in advocating for others?

If so, we want to hear from them!

Please reach out to Community Relations Manager Nicole Ragab at nragab@amerihealthcaritas.com with the contact information of the potential committee member, and we will do the rest!

Access to Care Management

AmeriHealth Caritas PA CHC has multiple programs and resources available for providers caring for our Participants who may require complex care management services, such as:

- Disease management and education
- Discharge planner referral
- Participant or caregiver referral
- Practitioner referral

For more information and contacts for these programs, please visit www.amerihealthcaritaschc.com **> For Providers > Resources.**

The Pennsylvania Department of Human Services (DHS) will implement changes to the statewide preferred drug list (PDL) on January 9, 2023*

As a reminder, DHS requires all Medical Assistance MCOs in the physical health HealthChoices and CHC plans to adhere to any statewide PDL updates. As such:

- AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC continue to adhere to the preferred and non-preferred status and list of drugs included in the statewide PDL.
 - **Please see Appendix A for a list of drugs that will be changing formulary status for AmeriHealth Caritas Pennsylvania/AmeriHealth Caritas PA CHC effective January 9, 2023.**
- AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC will continue to use the same prior authorization guidelines as required by DHS for drugs included in the statewide PDL.

***Important note: Please keep in mind that up until January 9, 2023, the current version of the statewide PDL is still in effect.**

Reminder:

- AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC will maintain a list of preferred and non-preferred drugs in classes that are not included in the statewide PDL. This is called the Supplemental Formulary.
- Medication classes that are not included in the statewide PDL are reviewed and approved by the AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC Pharmacy and Therapeutics Committee.
- The process for obtaining prior authorization process remains the same. For more information about prior authorization go to:

| Prior authorization request by: | AmeriHealth Caritas Pennsylvania | AmeriHealth Caritas PA CHC |
|---------------------------------|----------------------------------|-------------------------------|
| Phone | 1-800-588-6767 | 1-888-674-8720 |
| Fax | 1-866-497-1387 | 1-855-851-4058 |
| Online | www.amerihealthcaritaspa.com | www.amerihealthcaritaschc.com |

Where can I see the changes?

The current PDL and 2023 PDL are available on DHS' pharmacy website and at: <https://papdl.com/>. Additional resources, including our plans' supplemental formularies, are available on the Formulary page via www.amerihealthcaritaspa.com > Pharmacy or www.amerihealthcaritaschc.com > For Providers > Pharmacy Services.

If you have any questions regarding this change, please contact AmeriHealth Caritas Pennsylvania Pharmacy Services at **1-866-610-2774** or AmeriHealth Caritas PA CHC Pharmacy Services at **1-888-674-8720**.

Appendix A: Statewide PDL drugs changing from preferred to non-preferred effective January 9, 2023*

| Drug | Preferred alternative options* |
|----------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| ANTIHEMOPHILIA | |
| Esperoct (Recombinant FVIII, Glycopegylated) | Adynovate (FVIII, pegylated), Jivi (FVIII, pegylated) |
| ANTIPSYCHOTICS | |
| Fluphenazine Elixir | Fluphenazine Oral Concentrate Solution, Haloperidol Lactate Oral Concentrate Solution, Risperidone Solution |
| GROWTH HORMONES | |
| Omnitrope Cartridge, Vial | Genotropin Cartridge, Genotropin Miniquick Syringe, Norditropin Flexpro |
| IMMUNOMODULATORS, ATOPIC DERMATITIS | |
| Eucrisa Ointment | Elidel Cream, Protopic Ointment, Tacrolimus Ointment |
| IMMUNOSUPPRESSIVES, ORAL | |
| Azathioprine 75 mg, 100 mg Tablet | Azathioprine 50 mg Tablet |
| INTRA-ARTICULAR HYALURONATES | |
| Trivisc Syringe | Durolane, Euflexxa, Visco-3 Syringe |
| MIGRAINE ACUTE TREATMENT AGENTS | |
| Zolmitriptan Nasal Spray | Sumatriptan Nasal Spray, Zolmitriptan ODT, Zolmitriptan Tablet |
| PITUITARY SUPPRESSIVE AGENTS | |
| Oriaahn Capsule | Myfembree Tablet |
| Synarel Nasal Spray | Leuprolide Acetate Kit, Lupron Depot Kit, Orilissa Tablet |

***Not an all-inclusive list, and some drugs may be subject to additional limits and/or specifications.**

For a complete list of preferred and non-preferred drugs to be included in the 2023 Statewide PDL, as well as any limits associated with these drugs, please visit <https://papdl.com>.

Pharmacy prior authorization

Pharmacy prior authorization — just a click away!

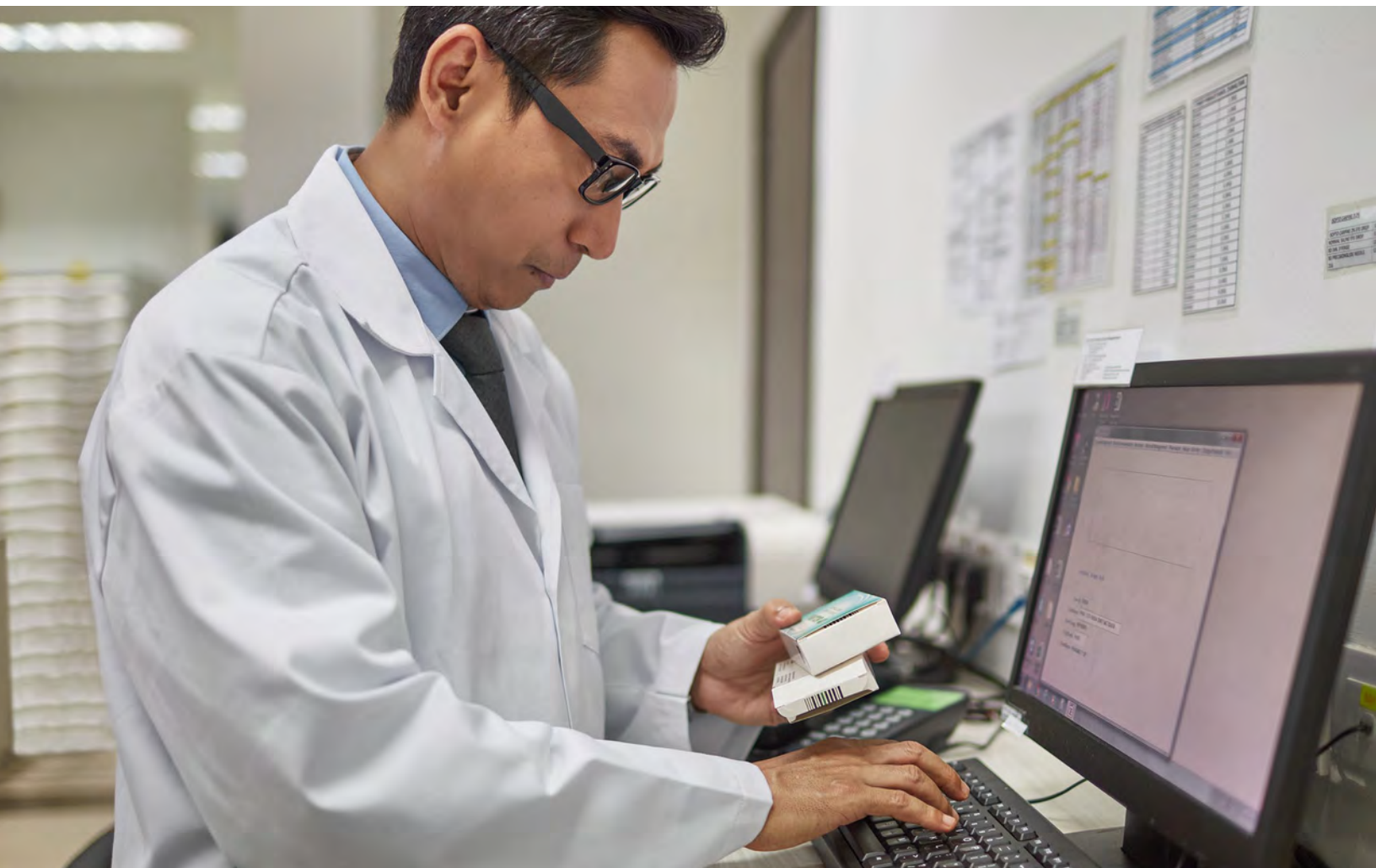
Use our online prior authorization request form to submit pharmacy prior authorization requests instantly.

To get started, go to go to

www.amerihealthcaritaspa.com > Providers > Pharmacy Services > Pharmacy Prior Authorization > Online Prior Authorization Request Form or **www.amerihealthcaritaschc.com > For Providers > Pharmacy Services > Pharmacy Prior Authorization.**

Please note the following are available on our AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC websites:

- A list of pharmaceuticals, including restrictions and preferences
- How to use the pharmaceutical management procedures
- An explanation of limits or quotas
- Drug recalls
- Prior authorization criteria and procedures for submitting prior authorization requests
- Changes approved by the Pharmacy and Therapeutics Committee



Formulary updates

| Addition | Effective date |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Paxlovid oral tablet therapy pack 10 x 150 mg and 10 x 100mg (t3) | 7/11/2022 |
| Fluad quad 2022-2023 (65yr up) (PF) 60 mcg (15 mcg x 4)/0.5ml IM syringe (AR - 65 years of age and older) | 8/1/2022 – 3/31/2023 |
| Fluzone high-dose quad 2022-2023 (PF) 240 mcg/0.7 ml IM syringe (AR - 65 years of age and older) | 8/1/2022 – 3/31/2023 |
| Flucelvax quad 2022-2023 60 mcg (15 mcg x 4)/0.5 ml IM suspension (AR - 6 months of age and older) | 8/1/2022 – 3/31/2023 |
| Flucelvax quad 2022-2023 60 mcg (15 mcg x 4)/0.5 ml IM suspension (AR - 6 months of age and older) | 8/1/2022 – 3/31/2023 |
| Afluria quad 2022-23 (3yr up) (PF) 60 mcg (15 mcg X 4)/0.5 ml IM syringe (AR - 3 years of age and older) | 8/1/2022 – 3/31/2023 |
| Flulaval quad 2022-2023 (PF) 60 mcg (15 mcg x 4)/0.5 ml IM syringe (AR - 6 months of age and older) | 8/1/2022 – 3/31/2023 |
| Fluarix quad 2022-2023 (PF) 60 mcg (15 mcg x 4)/0.5 ml IM syringe (AR - 6 months of age and older) | 8/1/2022 – 3/31/2023 |
| Fluzone quad 2022-2023 (PF) 60 mcg (15 mcg x 4)/0.5 ml IM syringe and suspension (AR - 6 months of age and older) | 8/1/2022 – 3/31/2023 |
| Afluria quad 2022-2023 (6mo up) 60 mcg (15 mcg x 4)/0.5 ml IM susp (AR - 6 months of age and older) | 8/1/2022 – 3/31/2023 |
| Flumist quad 2022-2023 10 EXP 6.5-7.5 FF unit/0.2 ml nasal spray syringe (AR - 2 years of age and older) | 8/1/2022 – 3/31/2023 |
| Removals | Effective date |
| Various non-rebatable OTC products to include vitamins/multivitamins, glucose tablets, nasal sprays, alcohol wipes. These products have Medicaid rebatable alternatives available. | 9/12/2022 |
| Aquadeks 100 mcg-700 mcg-10 mg capsule | 9/19/2022 |
| Aquadeks 100 mcg-350 mcg-5 mg chewable tablet | 9/19/2022 |
| Aquadeks pediatric 400 mcg/ml oral drops | 9/19/2022 |
| Cytra-2 oral solution 500-334 mg/5ml | 9/19/2022 |
| Guaifenesin DAC oral solution 30-10-100 mg/5ml | 9/19/2022 |
| Quantity limit updates | Effective date |
| Farydak 10 mg, 15 mg, 20 mg capsule (remove QL) | 8/29/2022 |
| Mayzent 0.25 mg tablet (decrease QL) | 8/29/2022 |
| Talzenna 0.25 mg capsule (decrease QL) | 8/29/2022 |

| Quantity limit updates | Effective date |
|-----------------------------------------------------------------|----------------|
| Ukoniq 200 mg tablet (remove QL) | 8/29/2022 |
| Uptravi 200 mcg-800 mcg titration pack (remove QL) | 8/29/2022 |
| Beovu 6 mg/0.05 ml syringe (add new QL) | 8/29/2022 |
| Camcevi 42 mg syringe (add new QL) | 8/29/2022 |
| Conjupri 5 mg tablet (add new QL) | 8/29/2022 |
| Descovy 120-15 mg tablet (add new QL) | 8/29/2022 |
| Enjaymo 1,100 mg/22 ml vial (add new QL) | 8/29/2022 |
| Ibsrela 50 mg tablet (add new QL) | 8/29/2022 |
| Lyvispah 5 mg, 10 mg, and 20 mg granule packet (add new QL) | 8/29/2022 |
| Loreev XR 1.5 mg capsule (add new QL) | 8/29/2022 |
| Mayzent 0.25 mg start-1 mg maint and 1 mg tablet (add new QL) | 8/29/2022 |
| Mounjaro pen (various strengths) (add new QL) | 8/29/2022 |
| Norliqva 1 mg/ml solution (add new QL) | 8/29/2022 |
| Ozempic 2 mg/dose (8 mg/3 ml) (add new QL) | 8/29/2022 |
| Radicava ORS 105 mg/5 ml susp and starter kit susp (add new QL) | 8/29/2022 |
| Triumeq PD 60-5-30 mg tab susp (add new QL) | 8/29/2022 |
| Valcyte 450 mg tablet and 50 mg/ml solution (add new QL) | 8/29/2022 |
| Vonjo 100 mg capsule (add new QL) | 8/29/2022 |
| Pneumovax-23 | 12/5/2022 |

For a complete list of all formulary statuses and quantity limits within our searchable formularies, please visit a link below.

| | |
|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| AmeriHealth Caritas Pennsylvania | https://www.amerihealthcaritaspa.com/pharmacy/formulary/index.aspx |
| AmeriHealth Caritas PA CHC | https://www.amerihealthcaritaschc.com/provider/pharmacy/index.aspx |



Tobacco cessation counseling — Pennsylvania certification required for reimbursement

Effective January 1, 2023, AmeriHealth Caritas Pennsylvania/AmeriHealth Caritas PA CHC will not reimburse a dental provider for tobacco counseling services (D1320) unless their name appears on the Pennsylvania registry of certified counselors. This certification allows us to provide reimbursement for this service.

Please refer to the dental tobacco flyer for instructions on how to become a Pennsylvania certified tobacco counselor. The flyer can be found at www.amerihealthcaritaspa.com or www.amerihealthcaritaschc.com > Resources > Dental program.

If your name does not appear on the Pennsylvania registry of certified counselors and you and/or your

staff do possess Pennsylvania tobacco counselor certification, please fax or e-mail the documentation to:

Fax: 267-298-2325

Email: Tiffany Kilpatrick:
tkilpatrick@amerihealthcaritas.com or
 Michelle Teeter:
mteeter@amerihealthcaritas.com

Thank you for your participation in our network and the continued dental care you provide to our members and Participants. If you have any questions about this important topic, please contact your Dental Provider Account Executive or Provider Services at 1-855-434-9241.



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