

WPS HEALTH INSURANCE PROVIDER CONNECTION



In This Issue

[WPS Rebranding](#)

[ACP Coverage](#)

[Prior Auth List](#)

[Observation Stay](#)

[Follow-up](#)

[Medical Policy](#)

[Updates](#)

[ICD-10 Readiness](#)

[Claims Editing Update](#)

[Provider Portal](#)

[Navigation](#)

[iExchange Accounts](#)

[NEW EDI Website](#)

[Evidence Based](#)

[Medical Decision](#)

[Making Tools](#)

[Complex Case](#)

[Management](#)

Formulary

Check out our latest Formulary, accessible from our website:

www.wpsic.com or
[click here.](#)

[Join Our Mailing List!](#)

The Doctor's Note

September 2015

Dear Clinicians,

I am very pleased to announce that **as of Sept. 1, 2015, WPS covers doctor's office counseling for Advance Care Planning (ACP).**



These are 30-minute counseling sessions, typically performed by office staff that have been trained via the Wisconsin Medical Society "Honoring Choices" program to guide conversations between patients and their loved ones about end-of-life treatment choices.

Coverage details are included in the article inside this issue. WPS is very pleased to take this important step in fostering your work with your patients to help them have the peace of mind that their future health care choices are known and will be respected.

With this issue, we continue our new process of providing a link to the latest updates in our medical policies. Amy Dunlop, APNP Medical Policy Editor, puts together a very concise review of these policy changes with each quarterly newsletter so that you and your office staff can more easily track and understand these changes.

Anytime there is a change, WPS provides for a 60-day transition period to allow doctors and members to accommodate to this change. The article also provides the link to the full list of WPS Medical Policies. For questions regarding the medical policies, please contact Amy Dunlop at Amy.Dunlop@wpsic.com.

If you have any questions or would like more information about any article in this issue, feel free to reach out to me at the contact information below.

Kind regards,



Michael Ostrov MD MS

Medical Director Network and Quality

WPS Health Solutions

p: 608-221-5076 | m: 608-556-6331 | f: 608-226-4711

e: michael.ostrov@wpsic.com

WPS Rebranding

WPS Health Insurance undergoes strategic rebranding

This year, WPS Health Insurance is refreshing its image and its promise to customers. While we've always been committed to top-tier service, it's important for us to reaffirm that commitment to keep our customers, clients, and provider partners like you at the forefront of our efforts.

Over the next few months, you will see changes take place in our new look, logo, and messaging across various media channels, including our website, printed materials, and in our letters and emails to you.

We are getting more than just a facelift-this effort updates and refreshes our brand promise to YOU. You deserve our best effort, and we must keep the promises we make.

As we continue our tradition of Wisconsin-based service, we are looking to the future. Watch for our new look as it rolls out this year.

WPS Advance Care Planning

WPS now covers Advance Care Planning (ACP)

The time has come to value and promote Advance Care Planning (ACP) services. As of Sept. 1, WPS covers ACP services for fully-insured large groups, the WPS Employees group, and WPS insured ETF members. ACP is a well-regarded process for helping people engage in conversations that help them decide the kind and extent of medical care they would wish to have in the context of serious illness.

ACP is defined as the process of having a trained facilitator engage people and their loved ones in crucial conversations to help them set goals of care related to serious illness and end-of-life care.

The ACP process has been shown to improve health care satisfaction, improve outcomes and lower costs. In fact, there is a compelling body of literature demonstrating that following this

process not only fosters better outcomes, but decreases potential harms in the form of painful and futile treatment. By bringing in their values and preferences, these conversations help people make choices about the medical care they want to receive as they progress through stages of illness.

An important outcome of these conversations is to have an individual complete an Advance Directive and/or a Medical Orders for Life Sustaining Treatment (MOLST) form and to have these forms accessible within their medical record so that, when the time comes, their wishes can be carried out.

These sensitive conversations are now receiving a great deal of positive media focus across the country. This is particularly true in Wisconsin as a result of La Crosse's nationally known "Respecting Choices" program. The Wisconsin Medical Society has adopted a similar approach called "Honoring Choices." The program has been in place for three years, resulting in facilitator training across the State. ACP is coming into mainstream media as evidenced by the May 28, 2015 issue of Vox, an online newspaper. They published an article entitled, "Wisconsin is learning how to die," which highlighted how Wisconsin is becoming a model for the nation in this area.

WPS will build upon the Wisconsin ACP leadership tradition by recognizing your effort and those of your support staff in counseling your patients. The applicable billing codes are 99497 (initial 30-minute counseling session) and 99498 (subsequent 30-minute counseling sessions).

These are the recommended documentation elements to include ACP discussions:

1. A person designated to make decisions for the patient if the patient cannot speak for him or herself
2. The types of medical care preferred
3. The comfort level that is preferred
4. How the patient prefers to be treated by others
5. What the patient wishes others to know
6. Indication of whether or not an advance directive and/or MOLST document has been completed.

WPS is very pleased to take this important step in fostering your work with your patients to help them have the peace of mind that their future health care choices are known and will be respected.

WPS Prior Authorization List

Revised WPS Prior Authorization List

Effective Oct. 1, 2015, WPS Health Insurance will move to one Prior Authorization (PA) list, rather than separate recommended

and required lists. To view the revised list of services requiring prior authorization, [please click here](#). We are now accepting PA requests for services scheduled on or after Oct. 1 based on the newly revised list.

As always, keep in mind that member benefits vary and may include different PA requirements.

Please contact WPS to confirm PA requirements for your patient. Also, please continue to reference the "Non-Covered Procedures and Services Medical Policy" to determine coverage before you provide services. This document can be found at [Medical Policies](#).

Click the link above or copy and paste the following URL into your browser: <https://www.wpsic.com/providers/medical-policies/index.shtml>

If you have any questions related to the revised list, please contact Amy Dunlop, APNP Medical Policy Editor, at Amy.Dunlop@wpsic.com.

WPS Observation Stay Follow-up

WPS observation stay follow-up

Last quarter, we notified you that WPS would be reviewing **Observation Stays effective July 1, 2015**. Provided below is an update based on questions and comments we have been receiving.

- No prior authorization is needed for an observation stay at this time, unless a procedure or service associated with the observation stay requires prior authorization.
- Notification for inpatient admission is required. So, if a patient transitions from an observation stay to an inpatient stay, timely notification of the transition is needed.
- If the patient admitted for a same-day surgical stay (typically less than 24 hours) transitions to inpatient stay, timely notification of the transition is needed. If the patient transitions from same day surgical stay to observation, no prior authorization is needed for observation at this time. Be reminded that the patient must meet standard observation stay criteria.
- If there is a service that requires prior authorization (example: pain injections, spinal surgery) and it is being planned outpatient / ambulatory versus inpatient, please notify us of the planned location at the time of the prior authorization request.
- We are currently auditing observation claims data.

There may be a future requirement for prior-authorization of observations stays. You will receive ample notice if prior authorization becomes a requirement.

Thank you for bringing your questions to our attention. We hope this review is helpful.

Medical Policy Updates

The Medical Policy Committee met this quarter and approved the medical policies due for annual review.

Click [here](#) to review the revisions to medical policies.

Please be sure all doctors, other clinical staff, and office staff are aware of these changes before submitting requests for coverage. Please also share these policy changes with providers who may be ordering or performing services and clinicians who may be referring patients for services.

The complete library of our medical policies can be found at: <https://www.wpsic.com/providers/medical-policies/index.shtml>.

No password required!

If you have specific questions or comments regarding development of policy content, contact the Medical Policy Editor by email medical.policies@wpsic.com or call 1-800-333-5003 ext. 64133.

ICD-10 Readiness

Ready for ICD-10 implementation

With the anticipated deadline for ICD-10 codes approaching, WPS Health Insurance wants to reassure you that we have thoroughly tested our systems through extensive end-to-end processing and are ready for implementation on Oct. 1, 2015.

To help answer any questions you may have, please refer to the [ICD-10 Frequently Asked Questions](#) document, click the link for more information.

Did you know?

Some of the ICD-10 codes coming out in October are more unusual than others. For example, codes include:

- Pecked by a chicken (W61.33)
- Hurt at the library (Y92.241)
- Accident while knitting or crocheting (Y63.D1)
- Burn due to water-skis on fire (V91.07)
- Bitten by parrot (W61.01)

For more unusual codes, [check out this article from Medical Economics](#).

WPS Claims Editing Update

WPS claims editing update

Facility edits will be incorporated into our claims processing system as of Sept. 15, 2015. These edits are based on the Centers for Medicare & Medicaid Services (CMS) Correct Coding Initiative (CCI) sourcing.

Providers can proactively determine how particular code combinations will process. In addition, you may view and print the supporting rationale upon which an edit was developed.

You may view this information from the [provider homepage](#). On the site, click on the green **Go to My Account** button and enter your user ID and password. Please click the tab entitled **Claim Center**. A drop-down box will appear. From here, click the box labeled **CES** (Claims Editing System).

Please share this information with others in your organization that will benefit from this online tool. Specific questions pertaining to CES editing tool should be directed to our Customer Service Department at 800-765-4977.

Thank you for continuing to partner with WPS Health Insurance as we work hard to serve our mutual customers.

WPS Provider Portal Navigation

Check it out: NEW Provider Portal Navigation Tipsheets

Three new tipsheets have been added to the [Provider Portal Overview page](#) of our website with step-by-step instructions for the following functionalities:

- **[WPS Patient Inquiry Functionality](#)**: this guide shows you how to retrieve member information using a member's unique ID number or name and birthdate.
- **[Claim Center Functionality](#)**: this guide walks you through your most frequently asked questions about how to download and submit claims from the provider claim center.
- **[Home Functionality](#)**: this guide explains how to send a secure email to WPS and access our reply.

We hope you enjoy these helpful guides. If you have suggestions for additional functionality guides, send us an email at member@wpsic.com.

WPS iExchange Accounts

Ease of iExchange

iExchange is a Web-based tool used to facilitate timely prior

authorization review. **Providers should use iExchange when submitting prior authorization requests to WPS.**

Using iExchange when submitting these requests results in quicker approvals, the ability to monitor requests, access to alerts when cases are updated and less administrative expense associated with phone calls and faxes. [Click here](#) to read our flyer for more information on the benefits of using iExchange!

If you are not currently using iExchange to submit prior authorization requests, please contact us to set up an account at ixchange@wpsic.com or contact Jim Samosky at (608) 226-4159 or james.samosky@wpsic.com.

On-site training is also available for your convenience.

NEW EDI Website

New EDI Website layout coming soon!

Our Electronic Data Services (EDI) department will be launching a brand new version of our EDI website in the last quarter of 2015.

We believe it will be a better online presentation of the company's EDI product/service offerings. You will see that the new site will include all of our new company brandings for each line of business. Other improvements include:

- Centralized location of all online EDI enrollment forms.
- Enhanced version of our Five Easy Steps to electronic claim filing.
- Rolling message board for improved awareness of current events and updates.
- Social media buttons so you can follow us on Facebook, Twitter, and Google+.
- Easy access to our "EDI Connection" which is a list of our current approved clearinghouses, billing services, and vendors.

For any questions, concerns please contact us at:
EDI Marketing (toll-free) 1-800-782-2680, Option 4, to learn more about electronic claims submission.

EDI Help Desk 1-800-782-2680, Option 2, between 7:55 a.m. - 4:30 p.m. Central Standard Time for questions about EDI enrollment for claims submission, electronic remittance, and electronic funds transfer.

Evidence-Based Medical-Decision Making Tools

WPS evidence-based medical-decision making tools

The WPS Medical Affairs Department uses both internally

developed Medical Policies and science evidence-based resource products, such as Millman Care Guidelines and the independent research organization, Hayes, to form the basis for clinical review.

Both our Medical Policies and use of resource products are approved by our Medical Policy Committee (MPC) and Quality Improvement Committee (QIC).

Our MPC is comprised of clinicians including practicing providers from the community. The committee meets quarterly to consider scientific evidence and current practice standards in review and approval of new medical policies and those policies due for annual review. Nationally published and internally developed guidelines are reviewed annually or more frequently, if significant changes in standards of care are identified.

Our QIC oversees the MPC. Members include clinicians and representatives from multiple departments at WPS, as well as practicing providers from the community.

Additional reference sources include but are not limited to:

- BlueCross BlueShield Technology Evaluation Center
- Clinical Guidelines posted through the National Guideline Clearinghouse (NGC), an initiative of the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services.
- Government agencies and regulatory bodies
- National Comprehensive Cancer Network (NCCN)
- National Institute for Health Care Excellence (NICE)
- Specialty society guidelines and standards
- The Cochrane Library
- UpToDate®
- Washington State Health Care Authority Health Technology Assessment

Internally developed Medical Policies are available on the WPS website. [Click here for more information.](#)

For specific-patient related criteria inquiries contact WPS Health Insurance Medical Affairs at 1-800-333-5003. If you have questions or comments regarding evidence development or general content of WPS medical policies, contact us at medical.policies@wpsic.com.

Complex Case Management

WPS Complex Case Management

WPS provides a Complex Case Management program designed for members dealing with a serious illness, injury or chronic health condition. This program is provided by case managers who are

Registered Nurses with specialized training in case management and is offered to members at no additional cost.

The Case Manager collaborates with members and health care providers to develop a plan that is tailored to each individual's health care needs. This process allows our members to take full advantage of their available benefits, resources and enhances their health care experience.

We encourage providers to refer WPS members for case management services. For additional information you can reach us by phone (800)333-5003, fax (608)226-4711, or email casemanagement@wpsic.com.

www.wpsic.com



Wisconsin Physicians Service®