

# **Section 7 Services**

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# Section 7

## Emergency Care and Urgent Care

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### CDPHP Defines a Medical Emergency as:

A medical or behavioral condition that manifests itself by symptoms of sufficient severity including severe pain, that a prudent layperson, possessing an average knowledge of medicine and health, could reasonably expect the absence of immediate attention to result in:

- Placing the health of the person afflicted with such condition in serious jeopardy, or in the case of a pregnant woman, the health of the woman or her unborn child, or in the case of a behavioral condition placing the health of such person or others in serious jeopardy;
- Serious impairment to such person's bodily functions;
- Serious dysfunction of any bodily organ or part of such person;
- Serious disfigurement of such person.

Direct the member to go directly to the emergency room or to call 911 (or the appropriate local emergency response number) if the situation is a medical emergency as defined above.

### Emergencies in the CDPHP Service Area

Emergency services, and (for members of Medicaid–Select Plan and Medicaid–HARP) behavioral health, crisis intervention, and comprehensive psychiatric emergency program (CPEP) services, do not require prior authorizations. Members are requested, whenever possible, to contact CDPHP and their PCP within 48 hours of receiving emergency room treatment.

### Emergencies Outside the CDPHP Service Area

Members should go to the nearest hospital emergency room. An authorization is not necessary for treatment of the emergency situation. CDPHP will cover the hospital emergency room bill in full (minus the member's copayment) as long as the situation was a medical emergency as defined above. If the member is required to pay for services at the time of treatment, please inform the member to request an itemized bill. Then the member should send the bill, along with his or her name and member ID number (including suffix), to the CDPHP member services department at 6 Wellness Way, Latham, NY 12110.

After the member receives emergency medical care, CDPHP requests that, whenever possible, the member contact his or her primary care physician within 48 hours so that the appropriate follow-up care can be scheduled within the network.

### Follow-Up Care

The member may also seek one follow-up visit related to the out-of-service-area ER visit without a PCP authorization. The claim form submitted to CDPHP should include the "ER" modifier for the follow-up care. The member is requested to contact his or her PCP as soon as possible (within 48 hours of emergency treatment).

*\*Refer to the Emergency Room Follow-up Care Payment Policy, 1550/20.000163 in Volume II of the provider manual.*

*\*The follow-up visit must occur within 10 business days.*

### Urgent Care Facilities

A member may sustain an injury or illness that requires immediate attention, yet does not warrant a trip to the emergency room. In this case, a member of CDPHP may utilize local urgent care facilities. These facilities provide medical assistance for minor and non-life-threatening emergencies in conveniently located settings.

Urgent care facilities have extended office hours. When a member encounters a minor emergency they may use the services of any of the contracted and credentialed urgent care facilities listed on Find-A-Doc at [www.cdphp.com](http://www.cdphp.com). The urgent care facility will follow up with the member's PCP after the services are rendered.

If you have any questions regarding these facilities, please contact the provider services department at (518) 641-3500 or 1-800-926-7526.

## Laboratory Services

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Throughout our service territory CDPHP has entered into relationships with a diverse network of laboratory sites providing cost-effective, quality care. Laboratory services are available to our membership through a network of freestanding national, regional, hospital, and physician office labs. These sites provide testing in accordance with, and subject to, all applicable CDPHP policies and procedures as well as Clinical Laboratory Improvement Amendments (CLIA) certification.

For a complete listing of lab sites, refer to the *Directory of Participating Practitioners and Providers* or Find-A-Doc at [www.cdphp.com](http://www.cdphp.com). The listings include full-service labs, stat testing, cytology and Pap smear labs as well as drawing stations, and are subject to change from time to time.

**Important: You may not use other laboratories unless you receive prior approval from CDPHP.**

If you have a general concern regarding a specific case, and are unable to contact a representative at a particular laboratory, you or your staff may contact CDPHP's provider services department at (518) 641-3500 or 1-800-926-7526.

## Radiology Services

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CDPHP's preferred radiology network has been developed to address our members' health care needs when radiology services have been recommended by the practitioner/provider. These radiology centers have made a commitment to CDPHP and its members to consistently provide quality care at a reasonable cost.

At each center, a member will find highly skilled medical personnel to assist the member, including dedicated physicians who provide quality testing using state-of-the-art technology and equipment.

The radiology centers are conveniently located throughout our service area and appointments are easy to access simply through a telephone call. Many of the facilities have early morning or extended hours to accommodate a member's schedule.

CDPHP endorses the use of these radiology centers because of their willingness to provide quality, convenient, and customer-oriented care. When a member uses one of the preferred radiology centers for services defined in the 70000 series and G codes of the CPT manual, CDPHP will waive the copayment each time, unless otherwise required by the member's specific benefit coverage.

For a complete list of radiology centers, refer to the *Directory of Participating Practitioners and Providers* or Find-A-Doc at [www.cdphp.com](http://www.cdphp.com). This list is subject to change from time to time.

## Pharmacy Services

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The following pharmacy services information **does not** apply to CDPHP Medicare Advantage with Part D plans or the Medicaid/HARP plans. The term CDPHP Medicare Advantage with Part D plans refers to all Medicare Advantage products that offer prescription drug benefits. For information on these plans, please refer to the Government Programs section.

The CDPHP pharmacy services department manages prescription drugs for Plan enrollees. Prescriptions are filled through our pharmacy provider network and submitted for online adjudication with Capital Rx, our contracted pharmacy benefits management company. All globally adjudicated prescription claims are prospectively reviewed at the point of service for drug-to-drug interactions and proper drug utilization.

The pharmacy services department maintains clinical drug formularies for the Plan at the direction of the CDPHP pharmacy and therapeutics (P&T) committee. The committee includes a network cross-section of practicing physicians, advanced practitioners, and pharmacists whose primary purpose is to ensure that the most clinically appropriate and cost-effective drugs will be available for Plan enrollees. The P&T committee is responsible for reviewing new drugs, establishing drug formulary status, recommending programs for appropriate medication therapy management, and reviewing and revising pharmacy policies. The Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) or Federal Parity law requires that coverage for mental health or substance use disorder (MH/SUD) benefits be no more stringent or restrictive than coverage for medical/surgical benefits. This applies to any limitation, including prior authorization status, application of quantity limits or step therapy, and drug formulary design. CDPHP and the P&T committee will make recommendations for the application of any limitations, without regard to type of drug, when a defined factor triggers the application of said limitation. The members of the P&T committee are bound by a confidentiality and conflict of interest agreement, which is renewed at least annually.

The two formularies that may be available to CDPHP commercial enrollees are Formulary 1 and Formulary 2.

In each formulary, drugs are either covered or not covered.

The formularies have a three-tier benefit design. Drugs evaluated by the CDPHP P&T committee may receive a designation as:

1. **Tier 1 (lowest copay):** Generic prescription drugs which offer the most cost-effective alternative to available brand-name prescription drug products. It may also include those brand-name prescription drug products determined by the P&T committee to be included in quality initiative programs.

2. **Tier 2 (middle copay):** Preferred brand-name prescription drug products that offer overall clinical and/or financial value. Selected generic prescription drug products may also be included in this tier if they are not as cost-effective as a tier 1 generic drug.
3. **Tier 3 (biggest copay):** All other covered brand-name or generic prescription drugs which do not offer significant clinical and/or cost advantages over a tier 1 or tier 2 drug.
4. **Non-covered:** Non-covered drugs have been designated as such by the P&T committee because of lack of clinical and/or cost advantages. These drugs are not available for enrollees utilizing either formulary. Coverage of these drugs requires approval of a medical exception request.

Quantity limitations, prior authorizations, dose optimization and/or step therapy may apply to both formularies.

Injectable drugs are generally covered under the medical benefit. However, some injectables are covered under the pharmacy benefit (require a prescription drug benefit) if they are “usually self-administered” at home by an enrollee or a caregiver.

All new drugs are not covered on each formulary until reviewed by the P&T committee. CDPHP reserves the right to develop payment guidelines for new-to-market drugs not yet reviewed by the P&T committee. These guidelines will be developed by the CDPHP medical directors and pharmacists and will be based on (but not limited to) the approved FDA indications for the new drug. The CDPHP P&T committee developed the medical exception review process to ensure that practitioners may request an excluded drug or a new drug not yet reviewed by P&T for a specific patient when determined medically necessary.

## **Find Formulary Information, Prior Authorization Pharmacy Guidelines, and Pharmacy Policies Online**

Practitioners may find searchable formularies by going to the Providers tab at [www.cdphp.com](http://www.cdphp.com) and clicking on “Formulary” near the top of the page. Additionally, a summary of decisions made at each P&T committee meeting is posted in both this area (look for “Formulary Updates”) and in the secure provider portal. Because of variation in CDPHP benefit design, enrollees should access formulary and benefit information specific to them by logging into the Capital Rx website (link provided in Rx Corner on the Members tab) using their CDPHP ID number.

You may also refer to the “forms and documents” section of the Providers tab of [www.cdphp.com](http://www.cdphp.com) for the CDPHP Clinical Formularies. Medical exception request forms can also be found in this section. The general medical exception request form is found there. It can be used for any drug request, but it does have sections specific to highly requested drug classes. There is also a form specific to Hepatitis C treatment agents. Providers may also find prior authorization guideline lists specific to pharmacy by the line of business and the pharmacy policies by line of business by logging into the secure portion of the CDPHP web site.

Certain self-insured employers may have selected Formulary 5 for coverage of their participants. Please refer to the formulary section of the CDPHP provider website for information regarding this formulary.

## **ConnectRx**

ConnectRx is an in-network pharmacy that offers deep discounts on generic drugs via the CDPHP Rx for Less program, and no-cost home delivery in certain areas of the Capital Region. Prescriptions are delivered by mobile customer service representatives who are ConnectRx team members dedicated to specific neighborhoods. To learn more about ConnectRx, visit [pharmacyconnectrx.com](http://pharmacyconnectrx.com). To transfer your patients’ prescriptions to ConnectRx, call the pharmacy directly at (518) 273-1402.

## **Accessing Specialty Drugs**

Specialty pharmaceuticals are used in the management of complex chronic or genetic conditions and certain catastrophic diseases. They are often injectable medications, but they may also include oral agents. CDPHP has chosen ConnectRx Latham or CVS Caremark Specialty Pharmacy Services to dispense certain high-cost injectables and biotech drugs for its members.

Both offer the following:

- The ability to receive a 30-day supply of medications and additional supplies needed for the medications. Medications can be sent to a patient’s home, another address selected by the patient, a doctor’s office, or they can be picked up at the pharmacy.
- Help for side effects, educational materials about certain health issues, and refill reminder calls.
- ConnectRx offers free, personal delivery, convenience, a hassle-free transfer process, and deep discounts on generic drugs.
- CVS Caremark provides access to health care professionals for emergencies 24 hours a day, seven days a week, and Patient Resource Centers where CDPHP members can find the latest news, helpful tips and tools, drug information, safety alerts, support groups, community links, and other useful resources.

**Get Started with ConnectRx Latham**

Call (518) 313-1016 or visit <http://www.pharmacyconnectrx.com/latham/> ConnectRx Latham online.

**Get started with CVS Specialty Pharmacy Services**

Call 1-800-237-2767, fax 1-800-323-2445, or visit <https://www.cvscaremarksspecialtyrx.com> online.

**Mail Order Prescription Benefits**

Optum Home Delivery continues to be the contracted pharmacy that will provide CDPHP members with mail order prescription benefits. With Optum Home Delivery, members who have CDPHP pharmacy coverage will have access to:

- An easy online experience to manage prescriptions
- Free shipping
- 24/7 pharmacist support
- An automated refill process
- Much more!

Optum Home Delivery also accepts EPIC (Elderly Pharmaceutical Insurance Coverage). Providers may e-prescribe to Optum Home Delivery by selecting the Optum Home Delivery option or faxing to 1-800-491-7997.

**Prescription Price Transparency**

CDPHP collaborates with Levrx Technology Inc. to provide members with ConnectRx, On the Go – a mobile app for prescription price transparency. With the app, your patients who have CDPHP can shop and compare prescription drug prices at different pharmacies, get alerted to savings opportunities, have an up-to-date medication list on their mobile device, send a medication switch request to their doctor, and more.

Members can text RX to 237471 or visit their app store to download the app.