

Provider Newsbrief

August 26, 2022

Prior Authorization and Concurrent Review Updates

During the Public Health Emergency (PHE), Banner – University Family Care (B – UFC) and Banner Medicare Advantage (BMA) have implemented a variety of process changes to alleviate burden on health plans and providers. Although the PHE continues, AHCCCS has made the decision to Return to Normal related to several processes. Following AHCCCS' lead, B-UFC/ACC and ALTCS plans will be returning to normal processing for many services including those listed below:

Observation/Inpatient Hospital Services

- Acute care facilities are required to notify the B – UHP Utilization Review (UR) department within 24 hours of an acute hospital admission.
 - Please fax hospital face sheet to 520-874-3420
 - The BUHP UR department will review documentation for concurrent review and discharge planning.
 - Exception: Health Plans are not permitted to prior authorize COVID-19 suspected, confirmed, or related admissions. Notification of the admission to the BUHP UR department is still required.
- Observation and ED admissions do not require prior authorization or notification (only acute inpatient level of care).

Post-Acute Services

- Prior authorization is required for admission to Post-Acute facilities (Skilled Nursing Facility, Inpatient Rehabilitation Facility, Long Term Acute Care Hospital {LTAC}).
 - Please fax admission request and clinicals to 520-874-3420 or email UMPHSOTRANSFERREQUEST@BannerHealth.com or call Customer Care 800-582-8686
- The B – UHP UR department will perform concurrent review of clinical documentation for authorization of continued stay and discharge planning.

Exception: Health Plans are not permitted to prior authorize COVID-19 suspected, confirmed, or related admissions. Notification of the admission to the B – UHP UR department is still required. Inpatient admissions will be reviewed retrospectively and medical necessity will need to be met for approval.

These changes are being made based on changes to AHCCCS requirements posted on its Frequently Asked Questions (<https://www.azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html>). If you have any questions, please reach out to your Care Transformation Specialist or call our Provider Experience Center. You may also visit our website at <https://www.banneruhp.com/materials-and-services/prior-authorizations-and-referrals#>.

Monkeypox resource available to providers

Banner Poison & Drug Information Center serving as provider resource at 602-253-3334

The Banner Poison & Drug Information Center (PCC) is available 24/7/365 for any questions related to Monkeypox, including the initiation of treatment with tecovirimat (TPOXX). TPOXX is currently available as treatment for Monkeypox as an Expanded Access Investigational New Drug (EA-IND) that requires specific paperwork and patient follow-ups.

Patients and family members can also be referred to the PCC for questions related to Monkeypox.

Information about Monkeypox and related treatment guidelines is evolving, the PCC is coordinating efforts with local and state health departments. Guideline is to assist healthcare providers with decision to initiation TPOXX treatment and is based on the available data, changes are anticipated.

Plans for outpatient evaluations of suspected case, as well as follow-up visits for known cases are being developed and will be shared when established.

Additional Resources:

CDC Monkeypox Website: <https://www.cdc.gov/poxvirus/monkeypox/index.html>

CDC Treatment Guidelines:

<https://www.cdc.gov/poxvirus/monkeypox/clinicians/treatment.html>

TPOXX EA-IND: <https://www.cdc.gov/poxvirus/monkeypox/pdf/Tecovirimat-IND-Protocol-CDC-IRB.pdf>

CKD therapy added to formulary

First and only new FDA approved therapy for moderate to severe pruritis associated with hemodialysis

Difelikefalin (Korsuva™) injection is a new medication approved for the treatment of moderate to severe pruritis associated with chronic kidney disease for adults undergoing hemodialysis. The injection is given at the end of each dialysis session. Korsuva will be added to the Banner Medicare and Banner – University Family Care/ACC and ALTCS formulary with a PA requirement effective Sept. 1, 2022. Criteria for approval includes members with an indication of chronic kidney disease associated with pruritis, moderate to severe, in adults undergoing hemodialysis. It is not approved for peritoneal dialysis. Additionally, documentation submitted for PA approval should show the moderate to severe pruritis is impacting quality of life (sleep disturbances, fatigue, or depression).