

# <u>CPESN Implementation Guide</u>: UHC Pharmacy Care Hub Program

**Updated 10.17.24** 

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	Determine	service foc	us area for	the program.
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- ☐ Provide services to eligible Medicaid patients that address acute or chronic conditions in 2 potential workflow models:
  - o 1) Pharmacy led services that fall within pharmacist scope and address patient need.
  - o 2) Pharmacy provided services + telehealth via Dr. Chat.
- ☐ Utilize the eCare plan to document services provided in either model to successfully bill UHC.

### **STEP ONE**: Prepare pharmacy staff and ensure staff involved review implementation guide.

	Identify a	Pharmacy	Champion	for the	program.
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- ☐ Ensure pharmacy staff members participating are trained and aware of the service offering.
- ☐ Review eCare Plan Required Elements.
- ☐ Receive and review patient list. Identify the opportunities.
- ☐ Research CLIA Waived test suppliers.
- ☐ View CPESN Launch and Implementation Webinars
- ☐ UHC Doctor Chat Overview: more coming soon.
  - Required private space (no size limitations)

#### **Identify Pharmacy Champion**

■ The Pharmacy Champion is likely the pharmacy manager/owner or the clinical coordinator. They ensure the program requirements are met at the pharmacy and the service is provided. Aspects of the program can be delegated to others on the pharmacy team, but they are the team leader.

#### eCare Plan for Billing

- An eCare Plan is required for each encounter for documentation and billing of services.
- Click <u>HERE</u>: Go to "Advanced eCare Plan" section and choose your technology provider for a eCare Plan recording demo.
- Requirements of the eCare plans are outlined in Page 7.

#### **UHC Medicaid Patient Eligibility for the Program**

1. Medicaid Patients with UHC coverage who are <u>filling prescriptions at the pharmacy AND on the patient list</u> received by CPESN Program Champion.

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- 2. Any Patient with Medicaid UHC coverage that presents and is identified as an eligible patient on the Patient Look Up Tool in the most recent excel spreadsheet.
  - Receive in the same email each month.
  - If the Medicaid ID is entered and shown as Member Not Eligible, patient is not eligible for paid services by UHC.
  - o **Tip**: Each month, save the excel file on a secure work computer and have at workstation.

# **UHC Pharmacy Care Hub Program: Billing Guidance: Click here.**

- Review to understand billing rates and frequency eligible to document services.
- SNOMED CT Codes have been mapped to CPT codes by UHC, which are not displayed in this guidance.

# **Understanding Service Models**

### Workflow Model 1: Pharmacy led services that fall within pharmacist scope and address patient need

■ For Model 1, within each encounter, pharmacist should determine if MTM Services or Evaluation and Management (E&M) Services. Only one of the options should be submitted for the patient during an encounter.

Example Ideas	Service	SNOMED CT Code
MTM Services  Must be within State's	MTM – New Patient for first 15 minutes	Coordination of medication regime: 1156697002
Pharmacist Scope: Chronic condition management*, medication reconciliation,	MTM – Established Patient for first 15 minutes	Medication reconciliation: 430193006
administration of injectable medications (i.e., LAI or B12 only; vaccine admin fee covered by prescription insurance)	MTM – For each additional 15 minutes up to 1 hour for new or established patients	Optimization of medication: 713838004
	E&M - First Time Visit (15-19 min)	Moderate intensity: 4901000175103
Evaluation and Management (E&M) Services	E&M - First Time Visit (30-34 min)	High intensity: 450511000124101
Reference ideas from below for	E&M - Established Patient Visit (5-9 min)	Light intensity: 450501000124104
each state. listed within scope of practice for assessing and/or prescribing	E&M - Established Patient Visit (10-19 min)	Moderate intensity: 4901000175103
prescribing	E&M 20-29 min (established)	High intensity: 450511000124101

E&M Pharmacy-Led Services within Scope of Practice Ideas			
EI	Assessment/Prescribing for Acute conditions, chronic skin conditions, LAIs		
FL	(special requirements by Board of Pharmacy).		
NC	Assessment/Prescribing for hormonal contraception, nicotine replacement		
NC	therapy, glucagon, naloxone, LAI.		
	Assessment/Prescribing for tobacco cessation, hormonal contraception,		
VA	naloxone Visit the Virginia Board of Pharmacy Website for a complete list:		
	Click here.		

### **MTM Services: Chronic Condition Management\* Examples**

- Diabetes: Encounter Resource Click here. (disregard additional snomed codes listed)
  - Educating patients on proper insulin usage/administration.
  - Education about proper use of blood glucose monitoring device.
  - Educating and addressing care gaps with patients (i.e., statins, ACEi/ARBs).
  - Addressing care gaps.
  - Education about non-pharmacological approaches to diabetes care.
  - Immunization screening.
- Asthma Encounter Resource Click here. (disregard additional snomed codes listed)
  - Creating / discussing asthma action plan
  - Educating on correct use of short-acting and maintenance inhalers, including correct inhaler technique.
  - Performing Asthma Control Test on patient and educating / providing interventions.

For any findings that are out of range or anything that should be referred to another provider, connect patient with DrChat Provider or existing Primary Care Provider

#### Workflow Model 2: Pharmacy Provided Services + Telehealth via DrChat

- **Goal**: establish care for eligible UHC Medicaid patients without a provider with the goal of decreasing use of emergency department.
- Pharmacist Roles in Telehealth Model (billable via the eCare Plan)
  - Work-up patient and help connect the patient with DrChat on the iPad.
  - Provide any point of care testing that may be relevant for patients as ordered by the DrChat provider.
- Common scenarios for a patient seeking out these services:
  - Needing prescriptions prescribed to be written by a provider as a follow-up to a ED visit or issues connecting with existing primary care options.
  - Acute condition diagnosis and treatment.
  - o Chronic condition management that can only be done by a MD, PA, NP.
  - o Order labs or tests to help with diagnosis.
  - A more comprehensive list is provided in the chart below.

E	Example Telehealth Services via UHC DrChat		
Acute Conditions	upper respiratory infections, GI Illness, Viral illness, musculoskeletal		
	complaints, allergies, skin conditions (cellulitis, rash), UTI, ear pain,		
	reassurance (second opinion)		
Routine Health Maintenance	Review labs		
Wellness Coaching	Weight loss, tobacco cessation, stress management, exercise		
	management		
Women's Health	Menopause, birth control options, wellness, UTI, pregnancy related		
	complaints, vaginitis		
Adult Chronic Diseases	Hypertension, diabetes, hyperlipidemia, asthma, COPD		
Chronic Skin Conditions Acne, eczema, psoriasis			
Behavioral Health Anxiety, depression, stress, insomnia			
<b>Specific Pediatric Conditions</b>	Growth and development, feeding problems, behavioral concerns		

# **Workflow: UHC Pharmacy Provided Services + Telehealth via DrChat**

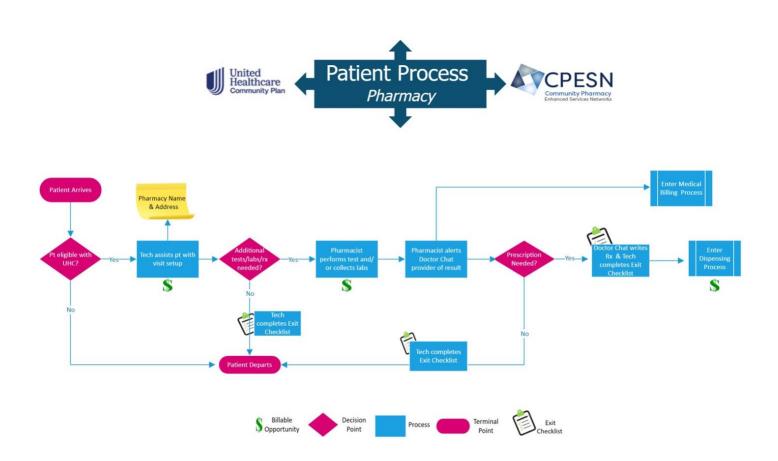
Green boxes indicate billable opportunities. See **Appendix A** for encounter examples or ideas.

	Patient arrives: Is the patient eligible with UHC Medicaid?
	Existing Patient at Pharmacy: Check Patient List
	New Patient at Pharmacy: Check Eligibility Lookup Tool
Chan 1	Yes: go to step 2
Step 1	<ul> <li>Pharmacy Staff begins encounter form for patient, which allows for</li> </ul>
	tracking services.
	<ul> <li>Patient Encounter Form: Click <u>here</u>.</li> </ul>
	• <b>No</b> : Inform patient to utilize existing healthcare resources (i.e., primary care)
	Technician or pharmacist assists patient with virtual set up in private area and patient
Step 2	proceeds with appointment.
Step 2	Billable opportunity: Site of service
	• Go to step 3
	Does the patient need additional test(s) / lab(s) / prescription(s)?
Step 3	• Yes: go to step 4
	No: Technician completes exit checklist (see below), patient departs
	Pharmacist performs test and/or collects labs.
Step 4	Billable opportunity: Evaluation & Management via E&M mapped SNOMED codes
эсср т	– Time, Performing Tests.
	Go to step 5
a. =	Pharmacist alerts Dr. Chat provider of result.
Step 5	Enter medical billing process
	• Go to step 6
	Is a prescription needed?
Step 6	• Yes: go to step 7
	No: Technician completes exit survey, patient departs
	Prescription Needed:
Step 7	Dr. Chat writes Rx and technician completes exit checklist (see below)
	Enter dispensing process if patient chooses to fill at your pharmacy

	Exit Checklist
Uploa	d any images pertinent to visit
Remo	ve images from download history
Clear	all entered PHI from iPad
Print '	Visit Summary
Log o	ut of email if accessed on device

# Patient Process Pharmacy (another view of the process listed on the previous page)

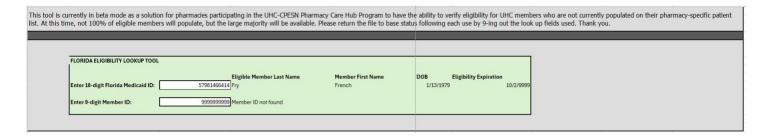
UHC Pharmacy Provided Services + Telehealth via DrChat



## **Eligible Patients**

- Medicaid Patients with UHC coverage who are filling prescriptions at the pharmacy AND on the patient list received by CPESN Program Champion
  - After the pharmacy enrolls, a patient eligibility list can be expected in the email inbox of the pharmacy champion that was provided during program enrollment. Takes up to 5 business days.
  - Patient list will be sent via secure email by CPESN staff member. T
    - o Example email subject line ENCRYPT: CPESN Patient List for United Healthcare
    - If needed, instructions for accessing the secure email: Click HERE.
- Any Patient with Medicaid UHC coverage that presents and is identified as an eligible patient on the Patient Look Up Tool.
  - Eligibility Lookup Tool is in an excel spreadsheet and is included in your pharmacy's patient list.
    - Eligibility File may change from month to month so utilize the most up to date list that is received from the program champion.
  - How to Use
    - o Enter Patient's Medicaid ID or Member ID in the white box and press ENTER.
      - If Member Name and DOB populates in the spreadsheet, along with eligibility expiration date, patient is eligible.
      - If ID is shown as Member Not Eligible, patient is not eligible for paid services by UHC.
  - Tip:
    - o Each month, save the excel files on a secure work computer and have at workstation.

#### **Eligibility Lookup Tool: Eligible Member Example**



#### **Eligibility Lookup Tool: NOT Eligible Member Example**

rrently in beta mode as a solution for pharmacies participating in the UHC-CPESN Pharmacy Care Hub Program to have t ie, not 100% of eligible members will populate, but the large majority will be available. Please return the file to base stat		
FLORIDA ELIGIBILITY LOOKUP TOOL		1
Eligible Member Last Name Member First Name  Enter 10-digit Florida Medicaid ID: 98765432100 Member ID not found  Enter 9-digit Member ID: 99999999999 Member ID not found	DOB Eligibility Expiration	

### **eCare Plan Documentation and Additional Resources**

- One eCare Plan should be submitted for the patient encounter.
- UHTEL is the <u>required payer code</u> that must be selected or entered into the payer code field for each eCare Plan submitted for United Healthcare Patients.
- eCare Plan must be submitted within the same month of services provided.
- Patient Encounter Form: click here to download PDF version to have at workstations.
  - o Includes 2 forms for Pharmacy Led Services (OR) Telehealth + Pharmacy Support Services.
  - Utilize for Patient Encounter to track billable opportunities.

	UHC Patient Encounter Sh	eet – Pharmacy Led Services	
Patient Name:		Date of Birth:	
	Payer Co	ode: UHTEL	
	MTM services (must choose M7	TM or E/M for encounter, not both)	
Select Services provided	Service	SNOMED	
	MTM first 15 min (new)	Coordination of medication regime: 1156697002	
	MTM first 15 min (established)	Medication reconciliation: 430193006	
	MTM each additional 15 min	Optimization of medication: 713838004	
	Evaluation and Management (E&M) services (	must choose MTM or E/M for encounter, not both)	
	E&M - First Time Visit (15-19 min)	Moderate intensity: 4901000175103	
	E&M - First Time Visit (30-34 min)	High intensity: 450511000124101	
	E&M - Established Patient Visit (5-9 min)	Light intensity: 450501000124104	
	E&M - Established Patient Visit (10-19 min)	Moderate intensity: 4901000175103	
	E&M - Established Patient Visit (20-29 min)	High intensity: 450511000124101	
	Choose any services performed	in addition to MTM or E/M services	
Select Services provided	Service	SNOMED	
	Medication Administration	Administration of Medicament (18629005)	
	Influenza	Serologic test for Influenza A <u>virus</u> 2731000 Serologic test for Influenza B virus: 88823001	
	COVID	Measurement of severe acute respiratory syndrome coronavirus 2 antigen: 1240471000000102	
	RSV	Respiratory syncytial virus swab: 313274005	
	Influenza/COVID	Nasopharyngeal swab for virology received: 441366006	
	Influenza/COVID/RSV	Nasopharyngeal and oropharyngeal swab: 433801000124107	
	Strep A	Microbial identification kit, rapid strep method: 89634005	
	Urinary Tract Infection	Suspected UTI: 314940005	
	Blood glucose	Glucose measurement, blood, test strip (procedure): 104686004	
	Hemoglobin A1c	Hemoglobin A1c measurement (intervention):43396009	
	Lipid Panel	Lipid panel (procedure): 16254007	
	Hepatitis C HIV	Hepatitis C screening (procedure): 413107006 Human immunodeficiency virus screening (procedure)	

		counter Sheet –		
	Telehealth + Pharmacy Services			
Patient Name:	ratient Name: Date of Birth:			
	Payer Coo			
	Model Type	SNOMED Code Required		
Telehealth + i	Pharmacy Services	Site of care (environment): 43741000 port Telehealth Encounter		
Sele		n evaluating / assessing patient prior to DrChat Visit		
Select Services provided	Service	SNOMED		
	E&M - First Time Visit (15-19 min)	Moderate intensity: 4901000175103		
	E&M - First Time Visit (30-34 min)	High intensity: 450511000124101		
	E&M - Established Patient Visit (5-9 min)	Light intensity: 450501000124104		
	E&M - Established Patient Visit (10-19 min)	Moderate intensity: 4901000175103		
	E&M - Established Patient Visit (20-29 min)	High intensity: 450511000124101		
	Choose any services performed i	in addition to telehealth support		
Select Services provided	Service	SNOMED		
	Medication Administration	Administration of Medicament (18629005)		
	Influenza	Serologic test for Influenza A <u>virus</u> : 2731000 Serologic te for Influenza B virus: 88823001		
	COVID	Measurement of severe acute respiratory syndrome coronavirus 2 antigen: 1240471000000102		
	RSV	Respiratory syncytial virus swab: 313274005		
	Influenza/COVID	Nasopharyngeal swab for virology received: 441366006		
	Influenza/COVID/RSV	Nasopharyngeal and oropharyngeal swab: 4338010001241		
	Strep A	Microbial identification kit, rapid strep method: 8963400		
	Urinary Tract Infection	Suspected UTI: 314940005		
	Blood glucose	Glucose measurement, blood, test strip (procedure): 104686004		
	Hemoglobin A1c	Hemoglobin A1c measurement (intervention):43396009		
	Lipid Panel	Lipid panel (procedure): 16254007		
	Hepatitis C	Hepatitis C screening (procedure): 413107006		
	HIV	Human immunodeficiency virus screening (procedure) :171121004		

# **Approved Marketing Flyers for UHC Doctor Chat at Pharmacy**

NC: English
 VA: English
 Spanish

#### Resources

Lab / Test Results Template that may be used to provide patients for their records: PDF | Word

Pharmacy may utilize their own file also.

### **CPESN POCT Resources: Click <u>here</u>.**

Order appropriate CLIA Waived testing supplies.

# **Appendix A**

### **Example Scenarios**

#### Birth Control Options – Pharmacist Led Workflow

A **new** patient that is eligible per the Eligibility Look Up Tool inquires about birth control prescribing at the pharmacy. Pharmacist evaluates and assesses the patient per protocol and determine appropriate hormonal contraceptive. The pharmacist writes the prescription per the protocol. Patient is provided the prescription and is told that they can have the prescription filled at the patient's pharmacy of choice. Chooses to fill at pharmacy.

Cton 1	Patient arrives: Is the patient eligible with UHC?
Step 1	Yes – go to Step 2
Cton 2	Pharmacist performs Evaluation and Assessment per scope of practice.
Step 2	• E&M 20-29 min (new): <b>Moderate intensity 4901000175103</b> ; \$93.46
Step 3 If appropriate, pharmacist provides patient with prescription.	

### Point of Care Testing - Strep -- Telehealth Workflow

A patient attributed to your pharmacy comes in complaining of a sore throat, white stuff on the back of their throat, and feeling "under the weather". After further conversation, they state that their primary care physician could not see them for an appointment for another week. You or your technician discuss with the Doctor Chat provider your patient encounter then the patient speaks with the provider 1:1. Doctor Chat provider recommends a POCT for strep. After testing and getting a positive result, you alert the provider of the results. The provider writes a prescription, and it is filled at the patient's pharmacy of choice.

writes a prescription, and it is filled at the patient's pharmacy of choice.		
Step 1	Patient arrives: Is the patient eligible with UHC?	
	Yes – go to Step 2	
Step 2	Technician assists patient with virtual set up. – Billable Opportunity	
	Telehealth originating site: Site of care (environment): 43741000; \$29.96	
Step 3	Does the patient need addition tests/ labs/ rx?	
	Yes – go to Step 4	
Step 4	Pharmacist performs test and/or collects labs.	
	Microbial identification kit - rapid strep method: 8963400; \$14. 28	
	• E&M 10-19 min (established): <b>Moderate intensity 4901000175103</b> ; \$57.72	
Step 5	Pharmacist alerts Dr. Chat provider of result.	
	Enter medical billing process (Dr. Chat)	
	Go to step 6	
Step 6	Is there a prescription needed?	
	Yes: go to step 7	
	No: Technician completes exit survey, patient departs	
	Prescription Needed:	
Step 7	Dr. Chat writes Rx and technician completes exit checklist	
	Enter dispensing process if patient chooses to fill at your pharmacy	

### Diabetes Management -- Telehealth Workflow

A patient attributed to your pharmacy comes in complaining of frequent urination and thirst. You know they used to be on Metformin but haven't been on it for several months. They said they did a finger stick at home but the glucometer keeps saying error. You recommend they see a Dr. Chat provider because they mentioned they lost their primary care and haven't found a new one. You or your technician connect the patient and help explain the situation. The provider wants to order a finger stick and an A1c. The finger stick comes back as 249 and their A1c 10%. The provider orders a basal/bolus insulin regimen that the patient wants filled at your pharmacy (medication to be filled at the patient's pharmacy of choice). The patient is very uncomfortable with injections, so you offer to give them their first ones during your counseling of the new medications.

Step 1	Patient arrives: Is the patient eligible with UHC?
	Yes – go to Step 2
Step 2	Technician assists patient with virtual set up. – Billable Opportunity
	• Telehealth originating site: <b>Site of care (environment): 43741000</b> ; \$29.96
Step 3	Does the patient need addition tests/ labs/ rx?
	Yes – go to Step 4
Step 4	Pharmacist performs test and/or collects labs – Billable Opportunity
	• E&M 10-19 min (established): <b>Moderate intensity 4901000175103</b> ; \$57.72
	• Glucose measurement, blood, test strip (procedure): 104686004; \$4.89
	Hemoglobin A1c measurement (intervention):43396009; \$12.09
Step 5	Pharmacist alerts Dr. Chat provider of result.
	Enter medical billing process (Dr. Chat)
	Go to step 6
Step 6	Is there a prescription needed or additional patient assistance?
	Yes: go to step 7
	No: Technician completes exit survey, patient departs
	Prescription Needed:
Step 7	Dr. Chat writes Rx and technician completes exit checklist
	Enter dispensing process if patient chooses to fill at your pharmacy

#### Suspected UTI -- Telehealth Workflow

A patient attributed to your pharmacy presents with complaint of UTI symptoms. After further discussion, you suggest they connect with a Doctor Chat provider and connect them. Pharmacy staff discusses encounter with provider then the patient speaks with the provider 1:1. Provider wants to test their urine, so patient is provided UTI test and pharmacist read the test results for DrChat. Patient has a positive test, and provider writes a prescription, and it is filled at the patient's pharmacy of choice.

	Patient arrives: Is the patient eligible with UHC?
Step 1	Yes – go to Step 2
Step 2	Technician assists patient with virtual set up. – Billable Opportunity
	Telehealth originating site: Site of care (environment): 43741000; \$29.96
Step 3	Does the patient need addition tests/ labs/ rx?
	Yes – go to Step 4
Step 4	Pharmacist performs test and/or collects labs – Billable Opportunity
	• Suspected UTI: 314940005 ; \$3.95
	• E&M 10-19 min (established): <b>Moderate intensity 4901000175103</b> ; \$57.72
Step 5	Pharmacist alerts Dr. Chat provider of result.
	Enter medical billing process (Dr. Chat)
	Go to step 6
Step 6	Is there a prescription needed?
	Yes: go to step 7
	No: Technician completes exit survey, patient departs
	Prescription Needed:
Step 7	Dr. Chat writes Rx and technician completes exit checklist
	Enter dispensing process if patient chooses to fill at your pharmacy