

Providers should verify specific Part B drug benefits for Medicare Advantage plan members

Step therapy initiated for Part B macular degeneration and anemia injections

Security Health Plan's Medicare Advantage plans, including eight HMO-POS plans and Ally Rx D-SNP, provide coverage for Part B drugs administered in an office or outpatient setting. Because benefits may differ based on the member's eligibility, please verify member-specific eligibility and benefits by logging into our online Provider Portal.

The following are examples of information that can be found using the Provider Portal:

- Member eligibility and termination dates
- Group numbers
- Type of policy (HMO, POS, indemnity, etc.)
- Coordination of benefits information
- Member deductible, coinsurance, copayments and out-of-pocket limits
- Amounts applied to the member's deductible and out-of-pocket costs
- Prior authorization submission and status

Please note:

- If a primary or specialty care office visit is billed, members may have an office visit copayment, depending on plan benefits.
- Administration fees for Part B drugs do not apply any member cost-share when billed by a contracted provider.
- Providers are required to buy the Part B drugs and bill Security Health Plan on a medical claim.

Using member information found on the Provider Portal, you can check if you are a contracted provider for our member on our Provider Directory at <https://www.securityhealth.org/#provider>. Most of Security Health Plan's Medicare Advantage plans allow for members to use a non-contracted provider, but this use may incur a higher out-of-pocket cost to the member.

Security Health Plan's Medicare Advantage plans renew on a calendar year basis. These plans:

- Are not COBRA plans
- Are fully funded
- Cannot exclude for pre-existing conditions
- Do not have lifetime maximums or annual benefit caps on Part B drugs administered in the office or in an outpatient setting

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Prior authorization required for some Part B drugs

Per Security Health Plan policy, we do not require a doctor's referral for Part B drugs. However, prior authorization may be required.

Please check the Security Health Plan authorization page, <https://www.securityhealth.org/rxpa>, to see if the Part B drug you are administering requires prior authorization.

Step therapy initiated for certain Part B injections

Effective for dates of service on or after **May 1, 2019**, Security Health Plan will implement step therapy requirements for '**NEW**' starts of the following injectable drugs used to treat macular degeneration and anemia:

- aflibercept (Eylea®), ranibizumab (Lucentis®) and pegaptanib (Macugen®) - with bevacizumab as the preferred drug
- epoetin alfa (Epogen®, Procrit®) - with epoetin alfa-epbx (Retacrit®) as the preferred drug

Implementation for 'new' starts means that members currently using step therapy drugs under Part B will be exempt. This new management program will only apply to those members beginning treatment after May 1, 2019. Step therapy prior authorization will be managed through Security Health Plan's specialty pharmacy medication partner, Magellan. Call 1-800-424-8243; website <https://spcustomer.magellanprovider.com>.

For future reference this information will be available at <https://www.securityhealth.org/providers/provider-manual>; select Medicare Advantage - Benefit Information - Macular Degeneration Eye Injections. Please share with any third party organization or drug company that may be calling for information on these injections.