



March 6, 2024

Prescribing update: Change Healthcare cybersecurity issue

As you are likely aware, Change Healthcare recently experienced a cybersecurity issue that is currently impacting the healthcare industry, including some of our partners. To protect OhioHealthy's information, our plan administrator is not currently sending or receiving medical claims files with the impacted vendors until the issue is resolved. Our pharmacy benefit partner has not been affected by this issue however pharmacies across the country are experiencing delays in processing prescriptions. While this is a developing national situation, we care deeply about the privacy of our member's data and we are working diligently to secure updates and information on the issue as it becomes available. Providers who are impacted can call the number on the ID card, check eligibility on the portal, or submit paper claims to the processor. For the latest updates on this situation, please refer to our [website](#).

Wrap network added for ACA members

OhioHealthy is pleased to announce that our health plan will be adding a new small group option for ACA (fully insured) plans effective May 1, 2024. This change will provide a PHCS WRAP network outside of our primary service area, and aims to provide more flexibility and choice in healthcare coverage to meet the diverse needs of our population.

- Unless your OhioHealthy network agreement contains specific product exclusions, all participating providers are in network for the small group ACA (fully insured) plan and claims will pay per the terms of your agreement
- Sample ID cards will be available via the provider portal on the OhioHealthyPlans.com website by mid-April

If you have any further inquiries, please visit [OhioHealthyPlans.com](https://www.ohiohealthyplans.com). If you require assistance, please contact providerrelations@ohiohealthyplans.com.

Pharmacy benefit drug formulary updates

The formulary and prior authorization (PA) lists for both medical specialty drugs and pharmacy benefit drugs are posted on <https://www.ohiohealthyplans.com/providers/pharmacy/> under Medical Drug Formularies for medical benefit drugs or in the [Navitus Prescriber Portal](#) for the pharmacy benefit drugs.

- Grandfather timeline
 - **Please note, as of March 31, 2024, the grandfather provisions provided to OhioHealthy members on the pharmacy benefit will start to term. Members may need a new prior authorization to continue their therapy**
 - Members with expiring prior authorizations have been notified
 - Please visit the Navitus provider portal for PA criteria. <https://prescribers.navitus.com/>

- CGM/Insulin info/Insulin Changes
 - Please note as of 1/1/2024, OhioHealthy's pharmacy benefit transitioned to Navitus. With this transition, the preferred brand insulins have changed. **Preferred agents include: Insulin Lispro Vials, Humalog KwikPens and Semglee (insulin glargine-YFGN).** OhioHealthy no longer covers Lantus or Novolog insulins
 - Toujeo (insulin glargine 300 units/mL) will be moved to not covered as of 4/1/2024 following the addition of an **authorized generic that will be covered**
 - Continuous Glucose Monitors require a prior authorization if the member is not on insulin. This includes Dexcom and Freestyle Libre. Please visit the Navitus provider portal for PA criteria. <https://prescribers.navitus.com/>

- Navitus formulary change to be aware of: Mounjaro, Zepbound
 - Pharmacy benefit will include Mounjaro and Zepbound as of March 2024
 - Our PBM does require a diagnosis code on all GLP-1 prescriptions. Please include for the pharmacy dispensing
 - Additional information will be needed for GLP-1 medications that require a prior authorization. Please visit the Navitus provider portal for PA criteria. <https://prescribers.navitus.com/>

- ADHD Schedule II Stimulants Max Days Supply:
 - OhioHealthy's Pharmacy Benefit will only authorize 30-day supplies of ADHD Schedule II Stimulants. This includes but is not limited to: amphetamine (Dexedrine[®], Adderall[®]), methamphetamine (Desoxyn[®]), and methylphenidate (Ritalin[®])

- Humira Biosimilars
 - OhioHealthy will move Humira to a non-covered Tier as of 7/1/2024 following the **addition of multiple biosimilar medications that will be covered.** Impacted members will be notified by mail in April
 - **Covered biosimilars include Hadlima (adalimumab-bwwd), generic adalimumab-fkjp, and generic adalimumab-adaz**
 - For more information on biosimilar medications go to [Biosimilars | FDA](#)

A full list of formulary changes for the pharmacy benefit can be found on the [Navitus portal](#).

Medical benefit drug formulary updates

Below are the medical benefit drug formulary updates for Q1. **Please note that there are no impacted members for the excluded drugs listed below on the medical benefit.** The full list of medical benefit

drugs is posted on <https://www.ohiohealthyplans.com/providers/pharmacy/> under Medical Drug Formularies

Brand Name	Generic Name	Formulary
Eylea HD	aflibercept	Excluded
Izervay	avacincaptad pegol	Excluded
Elevidys	Delandistrogene Moxeparovec-rokl	Excluded
Veopoz	pozelimab-bbfq	Excluded
Zynyz	Retifanlimab-dlwr	Submit PA to Archimedes
Rystiggo	Rozanolixizumab-noli	Submit PA to Archimedes
Roctavian	Valoctocogene Roxaparovec-rvox	Excluded

Submission reminder for 2024 dates of service claims

We are aware that there have been a number of incorrect claim submissions for 2024 services in January.

As a reminder, OhioHealthy transitioned to a new claims administrator effective January 1, 2024.

All 2024 claims need to be submitted with the new EDI number, payer ID and mailing address:

1. **2024 Claims EDI Number - 48116**
2. **Payer ID - CRSMD**
3. **2024 Claims Mailing Address – OhioHealthy, PO Box 4278, Clinton, IA 52733-4278**

Please be sure to collect members **NEW** OhioHealthy ID cards at the time of service in 2024.



***Huntington Colleagues will continue to use Express Scripts as their PBM for 2024**

2024 claims submitted incorrectly could result in rejections and delays. If you have any questions about submitting 2024 claims you can log into the provider portal at [OhioHealthyPlans.com](https://www.ohiohealthyplans.com) or contact Provider Services at the number on the member’s ID card, Monday-Friday, 8 a.m. to 5 p.m.

Prior authorization requests

What you need to know about Medical Prior Authorizations (PA) in 2024

(OhioHealth Corporation and Huntington Bank Members)

- This process will include all Prior Authorization (PA) requests through December 31, 2023 (including services requiring PA for early 2024 dates of service that need to be completed prior to January 1, 2024)
- These authorizations will be processed to completion, and be based on the 2023 PA list and individual benefit plan design. Open authorizations approved in 2023 will remain in effect until the PA expiration date
- Claims for dates of service in 2024 resulting from the open authorizations noted above, should be submitted to, and will be processed under the new claim vendor/platform for 2024
- Effective January 1, 2024, prior authorizations will be reviewed and processed by the new claim vendor/platform. Information pertaining to where to call/obtain PAs will be on the 2024 member ID cards

Visit our new provider portal

- Visit OhioHealthyPlans.com to register for the new provider portal
- Here you can connect with provider services and access self-service information to review claims, access patient coverage and check patient eligibility
- Register for the portal by selecting the appropriate option under the login box
- For more information on how to register for the provider portal click [here](#)

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