

PROVIDER UPDATE

April 2023

April is National Pickleball Month

In case you haven't heard, pickleball is all the rage! The game that uses paddle rackets and wiffle-type balls on a badminton-sized court, is one of the fastest growing sports, gaining several million players in the past few years alone. Nearly 20% of those who hit the court each week are over 65 years old.¹

To accommodate the growth, pickleball courts are popping up everywhere, and more seniors are taking part in this fun, highly sociable sport.

3 ways pickleball may benefit seniors:

- 1. Lowers the risk of heart disease. As a cardio workout, it can help to improve seniors' blood pressure and cholesterol.²
- 2. Reduces the risk of depression. Staying active may help boost their mood, and pickleball is no exception, plus it helps seniors stay socially connected³
- 3. Positively affects independent living. Moving about the court to swing the racket may help with hand-eye coordination, as well as balance, which is essential for avoiding falls.³

Your patients' SilverSneakers membership offers access to thousands of participating gyms and community locations, some with pools and/or pickleball courts.⁴

As always, SilverSneakers encourages seniors to consult with their provider before starting any exercise program, including pickleball. For more information, please go to the SilverSneakers blog at https://www.silversneakers.com/blog/3-best-exercises-to-improve-your-pickleball-game/.

- 1. usapickleball.org/about-us/organizational-docs/pickleball-fact-sheet
- 2. ijrep.org/the-acute-and-chronic-physiological-responses-to-pickleball-in-middle-aged-and-older-adults/
- 3. muschealth.org/medical-services/geriatrics-and-aging/healthy-aging/pickleball
- 4. Participating locations ("PL") are not owned or operated by Tivity Health, Inc. or its affiliates. Use of PL facilities and amenities is limited to terms and conditions of PL basic membership. Facilities and amenities vary by PL.

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Consider 90-day vs. 30-day prescriptions for your patients



Help your patients save time <u>and</u> trips to their retail pharmacy by writing **90-day instead of 30-day** fills for their maintenance medications.

Also, if your patients join our mail order pharmacy (CVS Caremark), it's more convenient, and they'll generally save money, having only two 30-day copays instead of three. With mail order, your patients' medications are also delivered directly to their home, with automatic refills and renewals provided.

Please consider these options for your patients' prescription needs. Contact Caremark at 1- 800-378-5697; fax 800-378-0323, for more information.

Morbid Obesity

Body Mass Index (BMI) is defined by the ratio of an individual's height to his or her weight. Normal BMI ranges from 20-25. An individual is considered morbidly obese if he or she is 100 pounds over his/her ideal body weight, has a BMI of 40 or more, or 35 or more and experiencing obesity-related health conditions, such as high blood pressure or diabetes.

Important Coding Information

- To code morbid obesity appropriately, providers must document morbid obesity in the assessment and/or plan to address the morbid obesity (weight loss, diet, exercise, referral to dietitian or bariatric surgeon)
- If morbid obesity is documented in the physical exam section without additional documentation supporting the clinical significance of this condition, it should not be captured. Providers must document the condition in the A/P and address the treatment plan such as weight reduction diet or counseling.
- If morbid obesity is documented and a BMI ≥ 40+ is documented, then it is appropriate to capture E66.01 (Morbid Obesity) and Z68.4X (BMI of 40 or greater).
- If BMI of 40 or greater is documented and there is no mention of a related diagnosis, such as overweight, obesity, morbid obesity etc., then it is NOT appropriate to code a BMI status code.

According to the ICD-10-CM Coding Guidelines, the BMI may be recorded by non-physician clinicians, such as nurses or dieticians; but it cannot be reported unless also documented by the physician and associated with a related condition, such as overweight or obesity. Therefore, unless the physician makes a comment on the significance of the BMI, it cannot be coded.





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Morbid Obesity - continued

Correct Coding

Vitals: BMI 41

A/P: Morbid Obesity - working on a controlled diet with exercise

Coded: Morbid Obesity (E66.01)

Incorrect Coding

Vitals: BMI 41

A/P: Diabetes Mellitus – encouraged controlled diet and exercise

(No other conditions are listed under the A/P for this visit)

Coded: Body mass index (BMI) 40.0-44.9, adult

(Cannot capture BMI without documenting a secondary diagnosis to support the BMI)

National Prescription Drug Take Back Day – April 22

Don't forget that Saturday, April 22 is National Prescription Drug Take Back Day.

Encourage your patients to go through their medicine cabinets to check for expired and no longer needed prescription and over-the-counter (OTC) medicines. They should be safely and securely disposed of, and National Prescription Drug Take Back Day is one way to do so.

For more information on National Prescription Drug Take Back Day, please visit takebackday.dea.gov – which also has a collection site locator tool to help your patients locate an authorized collector in their area.

If your patients are unable to visit a local collection site, please remind them that many retail pharmacies also have year-round drop off boxes for drug disposal.







Medicare Prescription Drug Inflation Rebate Program

As mentioned in the March Provider Update, President Biden's historic Inflation Reduction Act requires drug companies to pay rebates to Medicare when prescription drug prices increase faster than the rate of inflation for certain drugs furnished to people with Medicare. This new inflation rebate applies to Medicare Part B rebatable drugs, which are single source drugs and biological products, including certain biosimilar biological products, beginning January 1, 2023.

The federal government intends to invoice drug manufacturers for 2023 and 2024 Part B inflation rebates no later than fall 2025. The rebates will be deposited into the Medicare Trust Fund. In addition, beginning April 1, 2023, people with Medicare may see lower out-of-pocket costs for certain Part B drugs and biologicals with prices that have increased faster than the rate of inflation. For these drugs and biologicals, the beneficiary coinsurance will be 20% of the inflation-adjusted payment amount, which will be less than what the beneficiary would pay in coinsurance otherwise.

CMS posts payment information each quarter for separately payable Part B drugs, including the Part B rebatable drugs subject to the coinsurance adjustments, in the **Medicare Part B Quarterly Sales Pricing** (**ASP**) file, which is publicly available on CMS.gov. For the first time, the April 2023 ASP public file will also include the coinsurance adjustments for certain Part B rebatable drugs as required by the Inflation Reduction Act. The Part B drugs impacted by a coinsurance adjustment may change quarterly.

For the time period of April 1 to June 30, 2023, 27 Part B rebatable drugs have an adjusted coinsurance rate based on the inflation-adjusted payment amount. Individuals with Traditional Medicare and Medicare Advantage who use these drugs may, depending on other health coverage they may have, pay a reduced amount for their coinsurance during this specific quarter. For the quarter April 1-June 30, 2023, people with Medicare may experience coinsurance amounts that are lower than what they would have paid before the new law passed by as much as \$2 to \$390 per average dose.

Below is the list of drugs with adjusted coinsurance amounts for the quarter April 1-June 30, 2023. Learn more about the <u>Medicare Prescription Drug Inflation Rebate Program</u> including a fact sheet on the Part B rebatable drug coinsurance reduction.

HCPCS Code	Short Description	Inflation-Adjusted Coinsurance Percentage (Normally 20.000%)
J0287	Abelcet	19.293%
J8655	Akynzeo	16.308%
J7504	Atgam	17.934%
J3145	Aveed	19.352%
J0558	Bicillin C-R	19.032%
J0561	Bicillin L-A	18.623%





Medicare Prescription Drug Inflation Rebate Program - continued

HCPCS Code	Short Description	Inflation-Adjusted Coinsurance Percentage (Normally 20.000%)
J1955	Carnitor	14.000%
J0850	Cytogam	19.094%
J1572	Flebogamma DIF	17.758%
J1645	Fragmin	14.077%
J0135	Humira	19.644%
J2820	Leukine	19.763%
J2265	Minocin	19.401%
J0888	Mircera	17.717%
J9268	Nipent	17.371%
J9177	Padcev	19.585%
J9061	Rybrevant	19.863%
J2502	Signifor LAR	18.514%
J2860	Sylvant	19.953%
J0775	Xiaflex	19.071%

For more information, please go to https://www.cms.gov/files/document/inflation-rebate-fact-sheet-february-2023.pdf

