



Directory Accuracy Attestation Update

This article contains important updates to information regarding the Directory Accuracy Attestation required by the Centers for Medicare & Medicaid Services (CMS) and, more recently, the No Surprises Act. Please carefully read and share the information needed for your office to be compliant [here](#)

Where to Look - Provider Website or Provider Portal?

One of the most common comments we receive in our annual Provider Satisfaction Surveys is, “I am not sure if I should look in the Provider Website or the Provider Portal for the information I need.” That’s a great observation. We hope you’ll find the following information useful.

The easiest starting point is to determine if the information contains PHI.

- » Yes? Go to the [Provider Portal](#).
- » No? Go to the [Provider Website](#).

Click [here](#) to see an overview of what you’ll find in each site

Have You Seen Me? Recognizing Our Members

Trying to discern member information when you have a busy front office can be frustrating. Since most health plans' member ID cards are fairly similar, click below for a quick look at a CO-OP ID card.

[Read More](#)

MRI Prior Authorizations

Please see our MRI prior authorization criteria to improve the success for approvals. Review the complete [guidelines here](#)

CO-OP Plus Plans

The CO-OP “Plus” plans are a two-tier provider network product offered only to our Montana membership. The two-tier provider option makes it unique from all other CO-OP plan offerings.

Tier 1 - Participating Community Health Centers

Montana Members may choose to utilize a provider at one of our 14 contracted community health centers across the state for lower office visit copays.

Tier 2 - All other **Connected Care Network Providers** and facilities.

Office visit copays will vary depending on which “plus” plan was elected by the member. **Please note: Only participating Community Health Center providers are eligible to be a Tier-1 provider.**

Identifying and Responding to Suicide Risks

According to the CDC state rankings, Idaho ranks 46th, Montana is 48th, and Wyoming is 50th in suicide deaths per thousand of the total population. Montana, Idaho & Wyoming rank in the top 5 for suicide mortality. * [Click here](#) to read about the signs of suicide and where to go for help.

Cultural Competency & Language Resources

Providers are trusted with rendering care to a diverse membership with different levels of health literacy and confidence in the healthcare system, as well as racial, ethnic, and religious backgrounds that inform behaviors and choices about healthcare. The Co-Op is committed to supporting providers in ensuring members receive culturally competent and linguistically appropriate care. Additionally, the Co-Op service territory is home to thirteen Native American Reservations across Montana, Idaho, and Wyoming, and twenty-two federally recognized tribes. Providers are encouraged to familiarize themselves with the resources linked below.

[Read More](#)

Pharmacy

Annual Notice of Pharmacy Resources for Members

The CO-OP provides prescription drug coverage.

[View general information about our pharmacy coverage](#), including the preferred drug list for each member’s plan, information on how to use the pharmaceutical procedures, an explanation of limits, the process for generic substitution, therapeutic interchange, and step therapy, and how prescribing practitioners must participate in an exception request. Preferred drug lists may change from time to time, but updates are posted on the website on or before the effective date of any change. We recommend that providers review the

Annual Notice of Pharmacy Resources for Prescribers

The **2023 list** of medical pharmacy medications that require prior authorization, along with our Preferred Drug List (PDL)/Formulary for retail/specialty pharmacy medications are available online. “Bookmark” the following sites in your internet favorites for convenient reference. Click [here](#) for those resources .

Formulary Updates

Dupixent[®] for Atopic Dermatitis change **effective January 1, 2023** for Commercial and Individual Exchange members: for new starts only, Adbry[™] or Rinvoq[®] must be tried and failed before Dupixent may be considered, unless documentation indicates a medical necessity.

Autoimmune change **effective January 1, 2023** for Commercial & Individual Exchange members:

- » Enbrel[®] has been added as a **preferred brand** to the following policies:
 - o Ankylosing Spondylitis (AS)
 - o Juvenile Idiopathic Arthritis (JIA)
 - o Psoriatic Arthritis (PsA)
 - o Psoriasis (PsO)
 - o Rheumatoid Arthritis (RA)
 - » Sotyktu[™] is excluded from the formulary (non-formulary).
 - » Rinvoq has been added to the non-radiographic axial spondyloarthritis (nrx-SpA) policy as a **preferred brand—effective February 1, 2023**—based on recent FDA approval.
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Medical and Reimbursement Policy Updates

The COOP uses coverage policies as guidelines for coverage determinations in accordance with the member’s benefits. All new and updated policies, including policies for services requiring prior authorization, are posted on our [Coverage Policies](#) website for 60 days prior to their effective date.

Quarterly notice of recently approved and revised coverage and reimbursement policies is provided in Provider Connection for your convenience. The information listed are summaries of the policies. Click on the hyperlinked policy number to view the coverage or reimbursement policy in its entirety.

The Medical and Reimbursement Policy Updates section of this newsletter does not guarantee coverage is provided for the procedures listed. Coverage policies are used to inform coverage determinations but do not guarantee the service is a covered service. For more information on our coverage policies, visit our [Coverage Policies](#) website or contact your Provider Relations consultant.

We also encourage you to visit our [Prior Authorization](#) site frequently to view all medical services that require prior authorization, links to our coverage policies, and information on submitting an authorization request. Services that do not yet have a policy are reviewed using Interqual[®] criteria.

Click below for Medical Policy Updates

[Read More](#)

