



Provider Portal

MADDY PORTAL

Maddy is your go to for all of your provider health insurance needs. She's our online health portal that gives you access to information about WEA Trust benefits.

WITH MADDY YOU CAN:

- ▶ Access member eligibility, benefits, claims and authorizations
- ▶ Submit authorization requests
- ▶ Contact customer service
- ▶ and more!

TO SIGN UP:

- ▶ Visit www.MaddyPortal.com
- ▶ Select "Providers"
- ▶ Create an account username and password

QUESTIONS?

Contact our customer service team at 800.279.4090.



Sign up for the Provider Portal

Visit MaddyPortal.com. (You will need your employer-based email and provider TIN.)



Medical Management

Intensity Modulated Radiation Therapy (IMRT)

Effective April 1, 2019, Intensity Modulated Radiation Therapy (IMRT) will require preauthorization.

Outpatient Hysterectomy

Effective April 1, 2019, all outpatient hysterectomy procedures will require preauthorization.

Proton Beam Therapy

Effective April 1, 2019, Proton Beam Therapy will require preauthorization.

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WEA trust **ARCHIMEDES™**

MEDICATION PREAUTHORIZATION REQUEST PHYSICIAN FAX FORM
Only the prescriber may complete this form. This form is for prospective, concurrent, and retrospective reviews.

PLEASE INCLUDE APPLICABLE CHART NOTES, LABORATORY RESULTS and RADIOLOGY FINDINGS
Incomplete forms will be returned for additional information. The following documentation is required for preauthorization consideration.

Does this member have a cancer diagnosis? Yes No

PATIENT INFORMATION Today's Date: _____

Patient Name (First): _____ LAST: _____ M: _____ DOB (mm/dd/yyyy): _____

Patient Address: _____ City, State, Zip: _____ Patient Telephone: _____

INSURANCE INFORMATION

Member ID Number: _____ Group Number: _____

PHYSICIAN/CLINIC INFORMATION

Prescriber Name: _____ Physician NPI#: _____ Specialty: _____ Contact Name: _____

Pharmacy

Preauthorization Update

We are pleased to announce a new partnership with Archimedes. Effective April 1, 2019, Archimedes will be managing the preauthorization of medically administered specialty drugs on behalf of WEA Trust. The preauthorization form will be co-branded to reflect this partnership. A representative from Archimedes and/or WEA Trust may be reaching out to you regarding an approval or denial of a preauthorization request, we ask you to please honor these requests when asking for clinical information to support the use of such therapies. The preauthorization process will remain the same.

General Exclusion

ALL new FDA approved medically administered specialty drugs will be excluded from coverage for six months post market availability. This may not affect the current operations since WEA Trust staff usually have medical coverage policy determinations well in advance of a product launch, but this will exist for the rare case in which a drug that is on the market is without a policy. Thus, all medical specialty drugs do require review by Archimedes for medical necessity and appropriateness based on best evidence available at that time.

The list of specialty drugs will be available to view on the WEA Trust website at <https://www.weatrust.com/members/drug-plan-information/specialty-drug-list>.

Infliximab Biosimilar Exclusivity

Effective July 1, 2019, all users of Infliximab will be authorized for Renflexis only. We previously

“grandfathered” Remicade users, but those members will have coverage for Renflexis only. Letters will be sent to members and providers whose patients are on Remicade. For additional information please contact Alan Lukazewski, Director of Clinical Pharmacy at 608.661.6676.

Provider IVR

In March 2019 we added a new feature to the provider IVR! You will be able to obtain a fax that will give you authorization status for a specific member as well as a fax listing of services that require preauthorization. Remember you are also able to obtain Eligibility, Benefits and Claim Status information on our provider IVR; that is available 24 hours a day, 7 days a week. This information is also accessible through the Maddy Provider Portal, or you may contact our Customer Service department at 800.279.4090.



Reminder

Therapy Devices

WEA Trust does not cover occupational or physical therapy with an assistive device. Example: CPT Code 97016 – Vasopneumatic Compressive Therapy device.

Credentialing

Credentialing

Contracted providers must complete the credentialing process and receive approval for network participation prior to rendering services to WEA Trust members. Services provided before the successful completion of the credentialing process will be denied and may not be billed to the member.

Provider Changes

Network providers are responsible for notifying WEA Trust of any updates to their provider organization, business practice, or practitioners. Please use our Provider Update Form, found on our website at

[WEAtrust.com/provider/update provider info](https://weatrust.com/provider/update-provider-info). Provide a minimum of 30 days prior notice for any such changes, including but not limited to:

- ▶ Change in ownership, operations, or incorporation status
- ▶ Change in Tax ID number or legal business name
- ▶ Acquisition of other medical practice or entity
- ▶ Change in accreditation, licensure or eligibility status
- ▶ Change in billing or other contact information
- ▶ Change in service location
- ▶ Practitioner joining or leaving your organization
- ▶ Change in practitioner name, credentials, or specialty

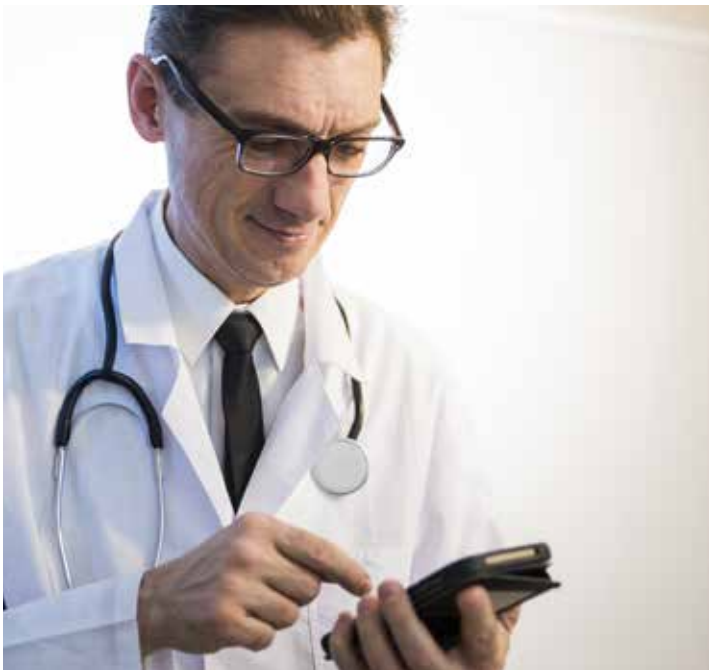


Code Coverage

When Modifiers GP, GO, & GN are Required on Therapy Service Codes

WEA Trust requires the use of modifiers GN, GO, or GP on claim lines for Medicare designated “always therapy” code(s). When any code on this list of therapy codes is submitted by a Physical Therapist, Occupational Therapist, or Speech-Language Pathologist, they always represent therapy services performed by that specific therapist. The appropriate therapy modifier for that specialty should be appended to the line per Medicare billing guidelines. Please note, there are some “always therapy” codes that are discipline specific therapy services and must be billed with the appropriate discipline therapy modifier.

In addition, Medicare “sometimes therapy” codes require a therapy modifier unless performed by a physician or non-physician and are not therapy services. If these codes are performed by a Physical Therapist, Occupational Therapist, or Speech-Language Pathologist, then the appropriate therapy modifiers (GN, GO, GP) must also be utilized on the claim line with the “sometimes therapy” code. For a 2019 list of Medicare “always therapy” and “sometimes therapy” see <https://www.cms.gov/Medicare/Billing/TherapyServices/AnnualTherapyUpdate.html>



Let's Keep in Touch

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IMPORTANT UPDATES ENCLOSED



WEA trust
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 800.279.4090

TO SIGN UP TO RECEIVE THIS VIA EMAIL

◀ Go to weatrust.com/providers