DaVita Dialysis Transition

Questions and Answers

Q: What is the new relationship with DaVita about?

A: Members on dialysis are expected to receive dialysis and dialysis related care at a DaVita site. Members new to dialysis will be re-directed to DaVita whereas members already on dialysis will be transitioned to DaVita.

Q: When is the effective date for DaVita as the exclusive dialysis provider?

A: The new program takes effect September 1, 2015. Members will not move all at once. Rather, members will be gradually transitioned to DaVita site over a course of 6 to 9 months.

Q: What type of dialysis services is included in this exclusive program?

- A: Dialysis services covered by Davita include, but are not limited to:
 - Dialysis: hemodialysis, home hemodialysis, peritoneal dialysis, nocturnal dialysis (and training associated with each modality)
 - Dialysis laboratory services
 - Ultrafiltration
 - Specific pharmaceuticals (refer to the attachment *Medications Included in Davita Dialysis Treatment* for a complete list)

Q: Which Alliance members are expected to exclusively use a DaVita dialysis site?

A: All Alliance members are expected to receive dialysis through DaVita with the exception of those with dual Fee For Service Medicare Part B. Members assigned to a Children First Medical Group (CFMG) or Community Health Center Network (CHCN) is also included in the transition. Members receiving dialysis at a non-Davita site through an existing Continuity of Care authorization will be reviewed on a case by case basis.

Q: How does the change impact nephrologists and other providers involved in the members' care?

A: Providers need to refer members to DaVita site. The Alliance will require authorization for dialysis services for services rendered at non-DaVita sites. Requests for out of network dialysis facilities will continue to be reviewed on a case by case basis. Members who do not have a continuity of care restriction or medical emergency are expected to be referred to an in network DaVita site.

Q: Will all DaVita sites be included in the network or just some sites?

A: All DaVita sites in Alameda County are included in the program.

Q: What happens with dialysis patients currently under treatment at a non-DaVita site?

A: Dialysis patients currently under treatment at a non-DaVita site will be transitioned to a DaVita site through a targeted, member focused transition plan. The transition will occur over a 6 to 9 month period. Members will be assigned a Nurse Case Manager and Health Navigator to address the members' needs such as scheduling preferences, transportation needs, etc.

Q: How will this arrangement impact pharmaceutical authorization specifically as it pertains to AHS practitioners?

A: DaVita will provide the medications related to the dialysis care except for oral and topical medications. These medications are exempt from the Alliance's authorization rules when furnished by DaVita as part of the dialysis treatment. Please refer to the attachment *Medications Included in Davita Dialysis Treatment* for a complete list.

AHS providers should follow the Utilization Management policies for all other in-office injectables not related to the dialysis care. A complete list of in-office injectables requiring authorization is available at the following link:

In-Office Injectables Authorization Rules

Medications that are part of the retail pharmacy benefit are not included in the DaVita relationship. Providers should continue to follow the existing retail pharmacy formulary and prior authorization rules. The Alliance retail pharmacy formulary is available at the following link:

Pharmacy and Drug Benefits

- Q: If our physicians have a concern with DaVita timeliness to authorize or any denial who can we contact?
- A: Providers can contact the Case Management Department at 1-877-251-9612
- Q: If acceptance of a patient for outpatient dialysis is delayed by DaVita which results in an extended, non-authorized inpatient stay, how can this be addressed?
- A: Providers should follow the standard process for appeals submission stated on the denial Notice of Action letters.
- Q: Are members traveling outside of Alameda County expected to receive dialysis at DaVita?
- A: Yes, members are expected to continue their dialysis treatment at a DaVita site. DaVita has a member concierge services that will coordinate members' travel needs.
- Q: What is the expected time to wait for an appointment to be scheduled?
- A: DaVita will respond to the referral source within one hour with the schedule and availability. The DaVita admissions specialist will follow up with the referral source to obtain additional medical documentation (if needed). DaVita will confirm placement (start date and chair time) within 24 hours of receipt of medical records
- Q: What information needed for placement at a DaVita site?
- A: Four (4) documents are needed for placement:
 - 1. Dialysis/Treatment Order
 - 2. PPD or Chest X-Ray (within 90 days)
 - 3. History and Physical
 - 4. Hep Panel, to include:
 - a. Hep B Antigen (HBsAG) (drawn within 30 days)
 - b. Hep B Positive Surface Antibody (HBsAb) (drawn w/in 12 months)
 - c. Hep B Total Core Antibody (drawn w/in 12 months)
- Q: Are there medical conditions disqualifies a member from placement into a DaVita center?
- A: DaVita does not have any conditions for exclusion. Certain medical conditions may make for a more difficult placement but both DaVita and the Alliance are committed to placing every member.

Medications Included in DaVita Dialysis Treatment

DESCRIPTION	HCPCS	DESCRIPTION	HCPCS
Access Management	~~	Composite Rate Drugs & Biologicals	
Injection Argatroban	C9121	Dialysate solution, non-dextrose	A4728
**	X1 < 10	containing (Extraneal, Icodextrin)	
Heparin, 10 units	J1642	Protamine Sulfate	A4802
Heparin, 1,000 units	J1644	Atropine sulfate inj	J0461
Lepirudin (Refludan)	J1945	Adrenalin epinephrine inject	J0171
Reteplase injection	J2993	Injection Mepivacaine HCl /10 ml	J0670
Alteplase recombinant (Activase)	J2997	Diphenhydramine HCL injection	J1200
Urokinase 5,000 IU inj	J3364	Chlorothiazide sodium inj	J1205
Urokinase 250,000 IU inj	J3365	Dimenhydrinate injection	J1240
		Droperidol injection (Inapsine)	J1790
Anemia Management		Insulin	J1815
Darbepoetin alfa (Aranesp)	J0882	Furosemide injection	J1940
Epoetin alfa, 1,000 units (Epogen)	J0886	Lidocaine injection	J2001
Peginesatide	J0890	Mannitol injection	J2150
Iron dextran injection, 50 mg (Infed,	J1750	Inj naloxone hydrochloride (Narcan)	J2310
Dexferrum)			
Iron sucrose injection (Venofer)	J1756	Ondansetron HCl injection (Zofran)	J2405
Na Ferric gluconate (Ferrlecit)	J2916	Promethazine HCl inj (Phenergan)	J2550
Vitamin B-12	J3420	Inj protamine sulfate/10 MG	J2720
Ferumoxytol, ESRD use	Q0139	Metoclopramide HCl injection (Reglan)	J2765
Epoetin alfa, 100 units (Epogen)	Q4081	Ropivacaine HCl injection	J2795
		Methylprednisolone injection, 40 mg	J2920
Bone & Mineral Metabolism		Methylprednisolone injection, 125 mg	J2930
Calcium gluconate injection	J0610	Hydroxyzine HCl injection	J3410
Calcitonin salmon injection	J0630	Vitamin K phytonadione inj	J3430
Inj calcitriol, 0.1 mcg (Calcijex)	J0636	Injection magnesium sulfate	J3475
Deferoxamine mesylate inj	J0895	Injection potassium chloride	J3480
Inj doxercalciferol (Hectorol)	J1270	Diphenhydramine HCl 50mg	Q0163
Ibandronate Sodium injection	J1740		
Pamidronate Disodium /30 MG	J2430		
Paricalcitol (Zemplar)	J2501		
Zoledronic Acid	J3487		
Cellular Management			
Inj levocarnitine, 1 gm (Carnitor)	J1955		
Anti-infectives			
Daptomycin injection	J0878		
Vancomycin HCL injection	J3370		
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