

## Payment Guideline: Specialty Drug Reimbursement

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**Read First****IMPORTANT INFORMATION CONCERNING  
WELLFLEET PAYMENT GUIDELINES**

This Payment Guideline serves as notice to health care providers of Wellfleet's payment practices. Health providers are advised to consult their own network provider agreement for determining specific payment policies.

Wellfleet may use reasonable discretion in applying these Payment Guidelines to health care services provided to its enrollees. This Payment Guideline does not address all the issues related to reimbursement for health care services. Other factors impacting reimbursement may supplement, modify or, in some cases, supersede this Payment Guideline. These factors may include, but are not limited to, legislative mandates, the type of provider arrangement and the terms of that agreement, and/or the member's benefit coverage document.

Wellfleet may modify this Payment Guideline at any time to comply with changes in national standards, changes in best practices, or other factors that may impact this payment Guideline. Should this Payment Guideline be revised, Wellfleet shall publish a new version of this Payment Guideline. Wellfleet encourages providers to keep current with any CPT or HCPCS updates as well as industry standards related to the services described in this Payment Guideline.

Providers are responsible for submission of accurate claims. Wellfleet reserves the right to request supporting documentation for claims submitted, including provider records.

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**Applicable  
Plans**

- Student Health Insurance (for policies issued or renewing after May 2019)
  - Fully Insured
    - Excluding policies issued in the following states: N/A
    - Excluding ISO
  - Self-Funded
    - Excluding policies issued by the following schools: N/A
- Student Sports
  - Fully Insured; for policies issued by the following carriers:
    - AIG
    - Axis

- Commercial Casualty Insurance Company/Wellfleet Insurance
- Self-Funded
  - Excluding policies issued by the following schools: N/A
- Fully Insured Student Accident; for policies issued by the following carriers:
  - AIG
  - Axis
  - Commercial Casualty Insurance Company/Wellfleet Insurance
- Self-Funded Employer Insurance
  - Excluding policies issued by the following employers: N/A

**Purpose** To define how Wellfleet will reimburse providers for Specialty Drugs submitted for reimbursement through a member’s medical benefit

**Scope** All provider claims containing a Specialty Drug covered by the member’s medical benefit as one or more line items, where payment methodology dictates that the Specialty Drug(s) be reimbursed separately from the other line items.

**Definitions**

- Specialty Drug: high cost prescription medications that require special handling, administration or monitoring, are covered under both medical and pharmacy benefits, and usually treat complex and/or chronic conditions.

**Guidelines**

1. Wellfleet will reimburse up to two times the listed Average Wholesale Price (AWP) for Specialty Drugs listed on claims under a member’s Medical Benefit, when ALL the following are met:
  - The Specialty Drug(s) is/are a covered Medical Benefit under an eligible member’s Plan
  - The Specialty Drug(s) is/are individual line item(s) on a medical claim
  - The Specialty Drug(s) is/are appropriately coded, as specifically as possible at the time of billing
  - The claim payment methodology dictates that the Specialty Drug(s) be reimbursed separately from the other line items (i.e. percent of charges methodology, Reasonable, Customary & Usual)

methodology, other methodologies with an appropriate Revenue Code carve out payment)

- The Specialty Drug has undergone any required Precertification Review and Approval as per the member's Plan
2. Medical Records may be requested to support billed dosing amounts
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**Change  
History**

<b>Version</b>	<b>Effective Date</b>	<b>Next Review Date</b>
1.0	04/01/2021	04/01/2022
1.1	10/1/2021	04/01/2022

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(INTERNAL USE ONLY)

Authorization  
Log

	NAME	TITLE	SIGNATURE	DATE
Prepared by:	Barrie Baker, MD	Chief Medical Officer		3/29/21
Authorized by:	Brad Newell	Chief Financial Officer	[Signature]	[Date]
Authorized by:				
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Original  
Effective Date

4/1/2021

Review Log

VERSION	DATE REVIEWED	REVIEWER NAME/TITLE	SIGNATURE	NEXT REVIEW DATE
1.0	3/29/2021	Barrie Baker, MD		4/1/2022
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