

HealthPro News

A monthly publication for participating HMSA health care providers, facilities, and their staff.

April 2018

ADMINISTRATION & NEWS



Hawaii Flu Prevention Campaign

The goal of the Hawaii Flu Prevention Campaign is to prevent flu patients from overwhelming Hawaii's hospitals. To help bring down the crest of the flu tsunami heading for Hawaii, we recommend that you promote flu prevention to your patients. For patients who are ill with the flu, urge them to get care from you in person or over the phone, from HMSA's Online Care[®], or from other providers such as urgent care clinics.

Working together, we can magnify the awareness of flu prevention through social media, employee communications, member/resident/patient communications, direct email, and basic signage. We're targeting the kupuna (65+) population and their caregivers, as well as those who are 50 to 65 (baby boomers and some of the older Gen Xers) because they're particularly vulnerable. Keiki and those with underlying health conditions are also vulnerable, but the older folks are emerging as a group that's particularly hard hit this year.

The state of Hawaii Department of Health's vaccine locator is at health.hawaii.gov/docd/vaccines-immunizations/vaccine-locators. Your patients can find more information on the flu at these sites:

- Centers for Disease Control and Prevention (CDC): cdc.gov/flu.
- Flu facts from the state Department of Health: health.hawaii.gov/docd/files/2017/01/Influenza_DIB-Factsheet.pdf.
- Department of Health flu page: health.hawaii.gov/docd/disease_listing/influenza-flu.
- American Hospital Association United Against the Flu page: aha.org/ahia/promoting-healthy-communities/united-against-flu.

AmericanWell[®] is an independent company providing hosting and software services for HMSA's Online Care platform on behalf of HMSA.

What's Inside

Contract Notification
3

Pharmacy
13

Policy News
16

Calendar
17



ADMINISTRATION & NEWS (CONTINUED)



Specialist Services on Neighbor Islands

Some specialty services aren't as readily available on the Neighbor Islands as they are on Oahu. HMSA's Online Care is an available option for some of those needs. HMSA is also fortunate to have specialists who are willing to fly to the Neighbor Islands on a regular basis to provide services to our members. If you'd like a visiting specialist to evaluate your patient or if you'd like to become one of our visiting specialists, call HMSA's travel unit at 948-5440 on Oahu or 1 (844) 357-0726 toll-free on the Neighbor Islands. Or email Traveling_Specialist@hmsa.com. Ask for a copy of the traveling specialist schedule for Kauai, Maui, and East and West Hawaii.

Travel from the Neighbor Islands to Oahu is a benefit for QUEST Integration and HMO members when necessary. We also have the Care Access Assistance Program (CAAP) to help with some of the travel cost for Medicare Advantage and PPO members who receive care on Oahu. HMSA's travel unit will also help with these travel needs.



Importance of Accurate Provider Network Data

Accurate information on your practice is critical to our members who rely on our directories. They need up-to-date information to make it easier to contact providers in our network. Also, the Centers for Medicare & Medicaid Services (CMS) requires us to have current information.

As a reminder, we need to be notified immediately in writing when you have changes such as your ability to accept new patients, your street address or appointment phone number, or anything else that may affect patient access to care. Please verify that we have your correct "Find a Doctor" information at hmsa.com/search/providers for each of your practice locations.

If you need to update your information, please fill out the applicable form from the list below and submit it to us:

- You're changing your PCP status or your status about accepting new patients:
hmsa.com/portal/provider/HMSA_Change_in_Provider_Panel_Form.pdf.
- You no longer practice at one of your locations:
hmsa.com/portal/provider/HMSA_Provider_Address_Change_Form.pdf.
- You closed one of your locations:
hmsa.com/portal/provider/HMSA_Provider_Closed_Location_Form.pdf.
- You added a location:
hmsa.com/portal/provider/HMSA_Provider_Additional_Location_Form.pdf.

Instructions for submitting the form are on the last page of each form.

If you have any questions, call us at 948-6820 on Oahu or 1 (877) 304-4672 toll-free on the Neighbor Islands.



Diabetes Prevention Program

We're pleased to announce a new benefit for HMSA Akamai Advantage® and Essential Advantage members who are at risk of developing diabetes. Starting April 1, 2018, your patients who meet the eligibility criteria below can enroll in the Diabetes Prevention Program. The program follows the CDC-approved curriculum proven to reduce the risk of developing diabetes through facilitated group learning and discussion sessions with a focus on weight loss and lifestyle-change coaching. Your patients can receive up to two years of support through the program at no cost.

To participate in the program, patients must have all of the following:

- A BMI ≥ 25 or ≥ 23 if self-identified as Asian.

ADMINISTRATION & NEWS (CONTINUED)

- No history of diabetes or ESRD; history of gestational diabetes is allowed.
- Blood test results within 12 months prior to enrollment with either:
 - o Hemoglobin A1c of 5.7-6.4 percent.
 - o Fasting plasma glucose of 110-125 mg/dL.
 - o Two hour plasma glucose of 140-199 mg/dL (oral glucose tolerance test).

More information on the program is available on the CMS website, innovation.cms.gov/initiatives/medicare-diabetes-prevention-program. For information on where to refer your patients, a list of CDC-accredited programs is available on the CDC website, nccd.cdc.gov/DDT_DPRP.



Beacon Health Begins Servicing Medicare Advantage Plans

HMSA's behavioral health partner, Beacon Health Options®, expanded its scope of behavioral health services to include HMSA's Medicare Advantage members and providers as of January 1, 2018.

On behalf of HMSA, Beacon will perform medical necessity reviews, case management, care coordination, and quality improvement activities for HMSA Akamai Advantage and Essential Advantage members. Beacon also supports HMSA participating providers and their patients with behavioral health referrals, psychiatric consultation, and resources and information on mental health and substance use conditions.

Providers and their patients may contact Beacon Customer Service Center at 695-7700 on Oahu or 1 (855) 856-0578 toll-free on the Neighbor Islands Monday through Friday, 7:45 a.m. to 4:45 p.m. Hawaii time. After-hours telephone service is also available for emergency calls.



Alpha Numeric Prefix Implementation

In the March edition of *HealthPro News*, the article, "Alpha Numeric Prefix Implementation," was listed as pertaining only to the commercial line of business. Please note that the article, which detailed the change in the three-character prefix on member ID cards that starts April 15, pertains to all lines of business.

We apologize for any inconvenience or confusion this may have caused.

CONTRACT NOTIFICATION



Significant Changes for Policies Requiring 90-day Notice

The following policy has undergone significant changes and goes into effect July 1, 2018:

- Preventive Health Guidelines - Newborns and Children. New categories of testing were added such as Newborn Bilirubin, Dyslipidemia, Newborn Blood, Newborn Screening for Metabolic Diseases, and Hemoglobinopathies. Ages were changed for HIV testing to 15–18 years of age and older. Bright Futures is used as a guide for frequency of testing. See policy and billing instructions and code information (link in administrative guidelines) for specific revisions: hmsa.com/portal/provider/zav_pel.ph.PRE.521.htm.

Beacon Health Options® is an independent company providing behavioral health utilization management and quality improvement services on behalf of HMSA.

CONTRACT NOTIFICATION (CONTINUED)



New Policies

The following policy goes into effect July 1, 2018:

- Yescarta (axicabtagene ciloleucel). Yescarta is a cell-based gene therapy used to treat certain types of large B-cell lymphoma.



Annual Review of Medical Specialty Drug Policies

The following policies have undergone review and go into effect July 1, 2018:

- Gattex.
- Gazyva.
- Probuphine.

Updated medical specialty drug policies are posted online for your review. Please visit info.caremark.com/hmsapolicies for updates to the policies that may affect your practice.



MAC Changes

The following maximum allowable charges (MACs) were increased effective February 1, 2018, for commercial plans:

Procedure	Description	New MAC
90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB-FHbp), 2 or 3 dose schedule, for intramuscular use	\$144.18
90675	Rabies vaccine, for intramuscular use	366.53
90682	Influenza virus vaccine, quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use	49.28
90691	Typhoid vaccine, Vi capsular polysaccharide (ViCPs), for intramuscular use	103.19
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, Haemophilus influenza type b, and inactivated poliovirus vaccine, (DTaP), when administered to individuals younger than 7 years, for intramuscular use	99.32
90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), when administered to individuals younger than 7 years, for intramuscular use	32.00
90713	Poliovirus vaccine, inactivated (IPV), for subcutaneous or intramuscular use	34.39
90734	Meningococcal conjugate vaccine, serogroups A, C, Y, W-135, quadrivalent (MCV4 or MenACWY), for intramuscular use	125.47

The following MAC was increased effective March 1, 2018, for commercial plans:

Procedure	Description	New MAC
90670	Pneumococcal conjugate vaccine, 13 valent (PCV13), for intramuscular use	\$194.32

CONTRACT NOTIFICATION (CONTINUED)

The HMSA commercial and QUEST Integration MAC fees for procedure code 0402T were loaded effective February 1, 2018:

Procedure	Description	HMSA PPO MAC	HMSA PPO Specialty MAC	HMO/FED MAC	HMO/FED Specialty MAC	QUEST Integration Non ABD	QUEST Integration ABD
0402T	Collagen cross linking of cornea (including removal of the corneal epithelium and intraoperative pachymetry when performed)	\$1,209.30	1,300.00	1,266.28	1,361.26	1,119.20	948.00

**Echocardiography Fee Alignment**

Effective June 1, 2018, fees will be realigned for the following cardiology and echocardiography CPT codes:

Procedure	Description	New MAC	New HMO MAC	New Specialist MAC	New Specialist HMO/Fed MAC	Outpatient Hospital
93015	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; with supervision, interpretation and report	\$120.11	\$125.77	\$123.11	\$128.91	
93016	Supervision only, without interpretation and report	35.52	37.19	36.41	38.13	
93017	Tracing only, without interpretation and report	60.82	63.69	60.82	63.69	
93018	Interpretation and report only	23.78	24.90	24.37	25.52	
93303	Transthoracic echocardiography for congenital cardiac anomalies; complete	419.11	438.86	421.67	441.54	
93303-26		102.20	107.02	104.76	109.70	
93303-TC		316.91	331.84	316.91	331.84	\$391.01
93304	Follow-up or limited study	280.13	293.33	281.60	294.87	
93304-26		58.67	61.43	60.14	62.97	
93304-TC		221.46	231.90	221.46	231.90	273.24
93306	Echocardiography, transthoracic, real-time with image documentation (2D), include M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	360.19	377.16	363.13	380.24	
93306-26		117.61	123.15	120.55	126.23	
93306-TC		242.58	254.01	242.58	254.01	299.29
93307	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	246.00	257.59	247.81	259.49	
93307-26		72.43	75.84	74.24	77.74	
93307-TC		173.57	181.75	173.57	181.75	214.15
93308	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study	183.89	192.55	184.92	193.63	
93308-26		41.18	43.12	42.21	44.20	
93308-TC		142.71	149.43	142.71	149.43	176.08

CONTRACT NOTIFICATION (CONTINUED)

Procedure	Description	New MAC	New HMO MAC	New Specialist MAC	New Specialist HMO/Fed MAC	Outpatient Hospital
93312	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	\$421.33	\$441.18	\$425.70	\$445.76	
93312-26		174.96	183.2	179.33	187.78	
93312-TC		246.37	257.98	246.37	257.98	\$303.96
93313	Placement of transesophageal probe only	18.13	18.98	18.58	19.46	
93314	Image acquisition, interpretation and report only	407.45	426.65	417.64	437.32	
93314-26		144.70	151.52	148.32	155.31	
93314-TC		262.75	275.13	262.75	275.13	324.18
93315	Transesophageal echocardiography for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report	574.91	602.00	580.07	607.40	
93315-26		206.54	216.27	211.70	221.68	
93315-TC		368.37	385.73	368.37	385.73	454.50
93316	Placement of transesophageal probe only	42.89	44.91	43.96	46.03	
93317	Image acquisition, interpretation and report only	381.36	399.33	385.04	403.18	
93317-26		147.31	154.25	150.99	158.10	
93317-TC		234.05	245.08	234.05	245.08	288.77
93318	Echocardiography, transesophageal (TEE) for monitoring purposes, including probe placement, real time 2-dimensional image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis	733.92	768.50	738.08	772.86	
93318-26		166.55	174.40	170.71	178.75	
93318-TC		567.37	594.10	567.37	594.10	700.02
+ 93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; complete	93.70	98.12	94.44	98.89	
+ 93320-26		29.44	30.83	30.18	31.60	
+ 93320-TC		64.26	67.29	64.26	67.29	79.28
+ 93321	Follow-up or limited study	47.66	49.91	47.95	50.21	
+ 93321-26		11.74	12.29	12.03	12.60	
+ 93321-TC		35.92	37.61	35.92	37.61	44.31
+ 93325	Doppler echocardiography color flow velocity mapping	45.43	47.57	45.56	47.71	
+ 93325-26		5.12	5.36	5.25	5.50	
+ 93325-TC		40.31	42.21	40.31	42.21	49.74
93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report;	357.38	374.22	360.23	377.20	
93350-26		114.16	119.54	117.01	122.52	
93350-TC		243.22	254.68	243.22	254.68	300.08

CONTRACT NOTIFICATION (CONTINUED)

Procedure	Description	New MAC	New HMO MAC	New Specialist MAC	New Specialist HMO/Fed MAC	Outpatient Hospital
93351	Including performance of continuous electrocardiographic monitoring, with supervision by a physician or other qualified health care professional	\$401.71	\$420.64	\$405.13	\$424.22	
93351-26		136.74	143.18	140.16	146.76	
93351-TC		264.97	277.46	264.97	277.46	\$326.91
+ 93352	Use of echocardiographic contrast agent during stress echocardiography	58.38	61.13	59.84	62.66	
93355	Echocardiography, transesophageal (TEE) for guidance of a transcatheter intracardiac or great vessel(s) structural intervention(s), real-time image acquisition and documentation, guidance with quantitative measurements, probe manipulation, interpretation, and report, including diagnostic transesophageal echocardiography and, when performed, administration of ultrasound contrast, Doppler, color flow, and 3D	362.65	379.74	371.72	389.24	

+ = Add-on code

**Reimbursement of Electrical Stimulator Leads**

Effective June 1, 2018, the following fees will be aligned with the 2018 Medicare DMEPOS fees.

Procedure	Modifier	Description	New Specialist MAC	New Specialist HMO/FED MAC	New Medicare MAC	New QUEST Integration ABD and Non-ABD MAC
A4595		Electrical stimulator supplies, 2 lead, per month	\$10.96	\$11.48	\$10.96	\$10.96
E0720		Transcutaneous electrical nerve stimulation (TENS) device, 2 lead, localized stimulation	71.36	74.72	71.36	71.36
E0720	NU		71.36	74.72	71.36	71.36
E0720	RR		7.14	7.47	7.14	7.14
E0720	UE		53.52	56.04	53.52	53.52
E0730		Transcutaneous electrical nerve stimulation (TENS) device, 4 or more leads, for multiple nerve stimulation	72.11	75.51	72.11	72.11
E0730	NU		72.11	75.51	72.11	72.11
E0730	RR		7.21	7.55	7.21	7.21
E0730	UE		54.08	56.63	54.08	54.08

**Reimbursement of Moderate Sedation**

The reimbursement of moderate (conscious) sedation codes took effect March 1, 2018, to align with CPT code changes made to surgical codes that no longer include conscious sedation and to align with CMS guidelines. Services for which moderate sedation was previously considered bundled will be reduced accordingly. Moderate sedation CPT codes 99151, 99152, 99153, 99155, 99156, and 99157 should be used when administering moderate

CONTRACT NOTIFICATION (CONTINUED)

(conscious) sedation with each procedure. Please refer to the updated Moderate (Conscious) Sedation page on the Provider Resource Center at hmsa.com/portal/provider/zav_pel.ph.CON.400.htm.

Procedure	Description	New MAC	New HMO/FED MAC	New Specialist MAC	New Specialist HMO/Fed MAC
99151	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient younger than 5 years of age	\$55.00	\$57.59	\$56.38	\$59.04
99152	Initial 15 minutes of intraservice time, patient age 5 years or older	\$55.00	\$57.59	\$56.38	\$59.04
+ 99153	Each additional 15 minutes intraservice time (list separately in addition to code for primary service)	\$17.61	\$18.44	\$18.05	\$18.90
99155	Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; initial 15 minutes of intraservice time, patient younger than 5 years of age	\$61.13	\$64.01	\$62.66	\$65.61
99156	Initial 15 minutes of intraservice time, patient age 5 years or older	\$58.98	\$61.76	\$60.45	\$63.30
+ 99157	Each additional 15 minutes intraservice time (list separately in addition to code for primary service)	\$33.45	\$35.03	\$34.29	\$35.90



Control Formulary Changes

The Pharmacy and Therapeutics Committee made the following formulary changes effective July 1, 2018. The Control Formulary is available in the HMSA Provider Resource Center at hmsa.com/portal/provider/HMSA_Control_Formulary.pdf.

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
amphetamine extended release susp 1.25 mg/ml	Adzenys ER Sus 1.25mg	Central Nervous System	NF	3	
dapagliflozin-metformin hcl tab er 24hr 2.5-1000 mg	Xigduo Xr Tab 2.5-1000 mg	Endocrine and Metabolic	NF	2	
dapagliflozin-saxagliptin tab 10-5 mg	Qtern Tab 10mg/5mg	Endocrine and Metabolic	NF	2	
delafloxacin meglumine tab 450 mg (base equiv)	Baxdela Tab 450mg	Anti-Infectives	NF	3	
estradiol vaginal	Estring Vag Ring 2mg	Endocrine and Metabolic	3	2	
fluorouracil (topical)	Tolak Cre 4%	Topical	NF	2	
fluticasone-umeclidinium-vilanterol	Trelegy Inh Ellipta	Respiratory	NF	2	
insulin aspart	Fiasp Inj 100/mL	Endocrine and Metabolic	NF	2	
insulin aspart	Fiasp Flex Inj Touch	Endocrine and Metabolic	NF	2	
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	Lamotrig Org Kit Start 49	Central Nervous System	NF	1	
oseltamivir phosphate	Tamiflu Cap 30mg	Anti-Infectives	2	3	Alternatives: oseltamivir, Relenza
oseltamivir phosphate	Tamiflu Cap 45mg	Anti-Infectives	2	3	Alternatives: oseltamivir, Relenza
oseltamivir phosphate	Tamiflu Cap 75mg	Anti-Infectives	2	3	Alternatives: oseltamivir, Relenza

CONTRACT NOTIFICATION (CONTINUED)

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
oseltamivir phosphate	Tamiflu Sus 6mg/mL	Anti-Infectives	2	3	Alternative: oseltamivir
paroxetine mesylate	Brisdelle Cap 7.5mg	Central Nervous System	2	3	Alternative: paroxetine mesylate
salicylic acid cream 10%	Salimez Forte Cream 10%	Topical	NF	3	
salmeterol xinafoate	Serevent Dis Inh 50mcg	Respiratory	2	NF	Alternative: Striverdi Respimat
sevelamer carbonate	Renvela Tab 800mg	Endocrine and Metabolic	2	3	Alternatives: calcium acetate, lanthanum carbonate, sevelamer carbonate, Phoslyra, Velphoro
sevelamer carbonate	Renvela Pak 0.8gm	Endocrine and Metabolic	2	3	Alternatives: calcium acetate, lanthanum carbonate, sevelamer carbonate, Phoslyra, Velphoro
sevelamer carbonate	Renvela Pak 2.4gm	Endocrine and Metabolic	2	3	Alternatives: calcium acetate, lanthanum carbonate, sevelamer carbonate, Phoslyra, Velphoro
tretinoin microsphere gel 0.06%	Retin-A Micro Gel 0.06%	Topical	NF	2	
wound dressings	Alevicyn Sol Dermal	Topical	3	NF	Alternatives: desonide, hydrocortisone

Specialty

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
bosentan tab for oral susp 32 mg	Tracleer Tab 32mg	Cardiovascular	NF	4	
cysteamine bitartrate	Cystagon Cap 50mg	Endocrine and Metabolic	5	4	
cysteamine bitartrate	Cystagon Cap 150mg	Endocrine and Metabolic	5	4	
cysteamine bitartrate	Procysbi Cap 25mg	Endocrine and Metabolic	5	NF	Alternative: Cystagon
cysteamine bitartrate	Procysbi Cap 75mg	Endocrine and Metabolic	5	NF	Alternative: Cystagon
deutetrabenazine	Austedo Tab 6mg	Central Nervous System	NF	4	
deutetrabenazine	Austedo Tab 9mg	Central Nervous System	NF	4	
deutetrabenazine	Austedo Tab 12mg	Central Nervous System	NF	4	
glycerol phenylbutyrate	Ravicti Liq 1.1gm/mL	Endocrine and Metabolic	5	NF	Alternative: sodium phenylbutyrate
lomitapide mesylate	Juxtapid Cap 5mg	Cardiovascular	4	5	
lomitapide mesylate	Juxtapid Cap 10mg	Cardiovascular	4	5	
lomitapide mesylate	Juxtapid Cap 20mg	Cardiovascular	4	5	
lomitapide mesylate	Juxtapid Cap 30mg	Cardiovascular	4	5	
lomitapide mesylate	Juxtapid Cap 40mg	Cardiovascular	4	5	
lomitapide mesylate	Juxtapid Cap 60mg	Cardiovascular	4	5	
sodium phenylbutyrate	Buphenyl Pow (Generic)	Endocrine and Metabolic	NF	4	
sodium phenylbutyrate	Buphenyl Tab 500mg	Endocrine and Metabolic	5	NF	Alternative: sodium phenylbutyrate

CONTRACT NOTIFICATION (CONTINUED)



Essential Prescription Formulary Changes

The Pharmacy and Therapeutics Committee made the following formulary changes effective July 1, 2018. The Essential Prescription Formulary is available in the HMSA Provider Resource Center at hmsa.com/portal/provider/HMSA_Essential_Prescription_Formulary.pdf.

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
clobetasol cream		Anti-Inflammatory	1	NF	Alternative: halobetasol cream
clobetasol ointment		Anti-Inflammatory	1	NF	Alternative: halobetasol ointment
dolutegravir/ rilpivirine	Juluca	Antiretroviral	NF	3	
fluticasone - umeclidinium-vilanterol	Trelegy Ellipta	LABA/LAMA/ ICS	NF	2, ST	Step therapy: must try Anoro Ellipta
halobetasol .05 % cream/ lactic acid cream 10%	Ultravate X kit	Anti-Inflammatory	3	NF	Alternative: halobetasol cream
halobetasol .05 % oint/ lactic acid cream 10%	Ultravate X kit	Anti-Inflammatory	3	NF	Alternative: halobetasol ointment
oseltamivir	Tamiflu	Antiviral	2	NF	Alternative: use generic
sevelamer	Renvela	Phosphate Binder	2	NF	Alternative: use generic
umeclidinium- vilanterol	Anoro Ellipta	LABA/ LAMA	3	2	

Specialty

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
abemaciclib	Verzenio	Oral Chemo	Oral Chemo, PA	Oral Chemo, PA	Prior authorization
			NF	5, PA	Fed87 only
acalabrutinib	Calquence	Oral Chemo	Oral Chemo, PA	Oral Chemo, PA	Prior authorization
			NF	5, PA	Fed87 only
bosentan	Tracleer ODT	PAH	NF	5, PA	Prior authorization



Metallic Formulary Changes

The Pharmacy and Therapeutics Committee made the following formulary changes effective July 1, 2018. The Metallic Formulary is available in the HMSA Provider Resource Center at hmsa.com/portal/provider/HMSA_Metallic_Prescription_Formulary.pdf.

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
clobetasol cream		Anti-Inflammatory	1	NF	Alternative: halobetasol cream
clobetasol ointment		Anti-Inflammatory	1	NF	Alternative: halobetasol ointment
dolutegravir/ rilpivirine	Juluca	Antiretroviral	NF	3	
fluticasone - umeclidinium- vilanterol	Trelegy Ellipta	LABA/LAMA/ ICS	3	2, ST	Step therapy: must try Anoro Ellipta
halobetasol .05 % cream/ lactic acid cream 10%	Ultravate X kit	Anti-Inflammatory	3	NF	Alternative: halobetasol cream
halobetasol .05 % oint/ lactic acid cream 10%	Ultravate X kit	Anti-Inflammatory	3	NF	Alternative: halobetasol ointment

CONTRACT NOTIFICATION (CONTINUED)

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
oseltamivir	Tamiflu	Antiviral	2	NF	Alternative: use generic
sevelamer	Renvela	Phosphate Binder	2	NF	Alternative: use generic
umeclidinium- vilanterol	Anoro Ellipta	LABA/ LAMA	3	2	

Specialty

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
bosentan	Tracleer ODT	PAH	NF	5 PA	Prior authorization

**Select Formulary Changes**

The Pharmacy and Therapeutics Committee made the following formulary changes effective July 1, 2018. The Select Formulary is available in the HMSA Provider Resource Center at hmsa.com/portal/provider/index.htm.

Generic Name	Brand Name	Drug Class	Current Tier	New Tier	Utilization Management Description/Notes
amphetamine extended-release	Adzenys ER	ADHD	3	3 QL	Quantity limit: 15ml per day
fluticasone - umeclidinium- vilanterol	Trelegy Ellipta	LABA/LAMA/ ICS	3	2, ST	Step therapy: must try Anoro Ellipta
fluticasone propionate	Xhance	Corticosteroid	3	3, PA	Prior authorization
oseltamivir	Tamiflu	Antiviral	2	3	Alternative: use generic
pregabalin extended-release	Lyrica CR	Anticonvulsant	3	3, QL	Quantity limit: 1 tablet per day
sevelamer	Renvela	Phosphate Binder	2	3	Alternative: use generic
umeclidinium- vilanterol	Anoro Ellipta	LABA/ LAMA	3	2	

**QUEST Integration Formulary Changes**

The Pharmacy and Therapeutics Committee made the following changes to the HMSA QUEST Integration formulary effective July 1, 2018. We encourage you to talk with your patients to determine if an alternative medication is appropriate for them. Patients who are currently taking a medication that will be removed from the formulary must switch to a formulary alternative that's a benefit of their plan.

If you believe your patient should continue taking their current medication, you can request a non-formulary exception. Please use the form at [hmsa.com/portal/provider/CVS_Formulary_Exception_\(BR\)_Prior_Auth_122812.pdf](https://hmsa.com/portal/provider/CVS_Formulary_Exception_(BR)_Prior_Auth_122812.pdf).

The HMSA QUEST Integration formulary is available in the HMSA Provider Resource Center at hmsa.com/portal/provider/index.htm.

Medication	Strength	Drug class	Utilization Management	Change/Criteria
betamethasone valerate lotion (base equivalent)	0.1%	Dermatology	QL	Quantity limit: 120 ml per 25 days
alclometasone dipropionate cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
alclometasone dipropionate ointment	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
betamethasone dipropionate aug gel	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
betamethasone dipropionate cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
betamethasone dipropionate lotion	0.05%	Dermatology	QL	Quantity limit: 120 ml per 25 days

CONTRACT NOTIFICATION (CONTINUED)

Medication	Strength	Drug class	Utilization Management	Change/Criteria
betamethasone dipropionate oint	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
betamethasone valerate cream (base equivalent)	0.1%	Dermatology	QL	Quantity limit: 120 grams per 25 days
betamethasone valerate oint 0.1% (base equivalent)	0.1%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Cutivate cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
desonide ointment	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Desowen cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Desowen lotion	0.05%	Dermatology	QL	Quantity limit: 120 ml per 25 days
diflorasone diacetate cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
diflorasone diacetate ointment	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Diprolene AF cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Diprolene lotion	0.05%	Dermatology	QL	Quantity limit: 120 ml per 25 days
Diprolene ointment	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Elocon cream	0.1%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Elocon ointment	0.1%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Fiasp Flex Inj	100 unit/ml	Antidiabetics		Formulary addition
Fiasp Inj	100 unit/ml	Antidiabetics		Formulary addition
fluocinonide cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
fluocinonide gel	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
fluocinonide ointment	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
fluticasone propionate ointment	0.005%	Dermatology	QL	Quantity limit: 120 grams per 25 days
hydrocortisone valerate cream	0.2%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Juxtapid capsule	5 mg 10 mg 20 mg 30 mg 40 mg 60 mg	Antilipemics		Non-formulary Alternative: Repatha
Locoid cream	0.1%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Locoid ointment	0.1%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Migranal spray	4mg/ ml	Migraine		Non-formulary Alternative: ergotamine/caffeine tablet OR sumatriptan nasal spray
Santyl ointment	250 unit/gm	Dermatology		Non-formulary
Symlinpen	600 MCG/ML 1000 MCG/ ML	Antidiabetics		Non-formulary Alternative: Insulin
Symlinpen 120 Inj	2700 MCG/2.7 ML	Antidiabetics		Non-formulary Alternative: Insulin
Symlinpen 60 Inj	1500 MCG/1.5 ML	Antidiabetics		Non-formulary Alternative: Insulin
Synalar cream	0.025%	Dermatology	QL	Quantity limit: 120 grams per 25 days

CONTRACT NOTIFICATION (CONTINUED)

Medication	Strength	Drug class	Utilization Management	Change/Criteria
Synalar ointment	0.025%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Temovate cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Temovate gel	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Temovate ointment	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Tolak cream	4%	Dermatology		Formulary addition
Topicort cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Topicort cream	0.25%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Topicort gel	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Topicort ointment	0.25%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Ultravate cream	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Ultravate ointment	0.05%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Westcort ointment	0.2%	Dermatology	QL	Quantity limit: 120 grams per 25 days
Zenpep capsule	20000-63000-84000 units 40000-126000-168000 units	Pancreatic Enzymes		Formulary addition

Specialty

Medication	Strength	Drug class	Utilization Management	Change/Criteria
Austedo tablet	6 mg 9 mg 12 mg	Movement Disorders	PA	Formulary addition
Buphenyl powder	3 gm/ teaspoonful	Urea Cycle Disorder Treatment Agent	PA	Formulary addition
Buphenyl tablet	500 mg	Urea Cycle Disorder Treatment Agent	PA	Formulary addition
Cystagon capsule	50 mg 150 mg	Anticystine Agent	PA	Formulary addition
Idhifa tablet	50 mg 100 mg	Antineoplastic Agent	PA	Formulary addition
Lynparza tablet	100 mg 150 mg	Antineoplastic Agent	PA	Formulary addition
Tracleer tablet	32 mg	Pulmonary Arterial Hypertension	PA	Formulary addition

Resource Center, hmsa.com/PORTAL/PROVIDER/zav_QI.02.THI.40.htm.

PHARMACY**Opioid Quantity Limits**

Effective July 1, 2018, HMSA will be placing quantity limits on all opioid products to ensure member safety and appropriate use. Quantity limits are based on product labeling, FDA guidance, standards of medical practice, evidence-based drug information, and published guidelines. Quantity limits won't be placed on drugs used for medication-assisted treatment.

The following quantity limits are new or are changing:

PHARMACY (CONTINUED)

Medication	Strength	Quantity Limit
ascomp/cod cap 30mg	50-325-40-30 mg	12 capsules per day
aspirin-caffeine-dihydrocodeine cap	356.4-30-16 mg	336 capsules per month
butalbital-acetaminophen tab	50-300 mg	12 tablets per day
butalbital-acetaminophen tab	50-325 mg	12 tablets per day
butalbital-acetaminophen-caffeine cap	50-300-40 mg	13 capsules per day
butalbital-acetaminophen-caffeine cap	50-325-40 mg	12 capsules per day
butalbital-acetaminophen-caffeine tab	50-325-40 mg	12 tablets per day
butalbital-acetaminophen-caffeine w/ codeine cap	50-300-40-30mg	13 capsules per day
butalbital-acetaminophen-caffeine w/ codeine cap	50-325-40-30 mg	12 capsules per day
butalbital-aspirin-caffeine cap	50-325-40 mg	12 capsules per day
butalbital-aspirin-caffeine w/ codeine	50-325-40-30 mg	12 capsules per day
butorphanol tartrate spray	10mg/ml (2.5ml)	2 bottles per month
codeine sulfate	15 mg	24 tablets per day
codeine sulfate	30 mg	12 tablets per day
codeine sulfate	60 mg	6 tablets per day
fentanyl td (Duragesic)	All strengths	1 patch every 3 days
hydrocodone- acetaminophen (Hycet Soln)	7.5-325 mg per 15ml	184 ml per day
hydrocodone- acetaminophen (Lortab Elixir)	10-300 mg per 15ml	67.5 ml per day
hydrocodone- acetaminophen (Norco)	10-325 mg	369 tablets per month
hydrocodone- acetaminophen (Norco)	5-325 mg	369 tablets per month
hydrocodone- acetaminophen (Norco)	7.5-325 mg	369 tablets per month
hydrocodone- acetaminophen (Xodol)	5-300mg	12 tablets per day
hydrocodone- acetaminophen (Xodol)	7.5-300 mg	6 tablets per day
hydrocodone- acetaminophen (Xodol)	10-300 mg	6 tablets per day
hydrocodone bitartrate Er (Zohydro ER)	10 mg	4 capsules per day
hydrocodone bitartrate Er (Zohydro ER)	15 mg	4 capsules per day
hydrocodone bitartrate Er (Zohydro ER)	20 mg	4 capsules per day
hydrocodone bitartrate Er (Zohydro ER)	30 mg	2 capsules per day
hydrocodone bitartrate Er (Zohydro ER)	40 mg	2 capsules per day
hydrocodone bitartrate Er (Zohydro ER)	50 mg	2 capsules per day
hydrocodone bitartrate ER (Hysingla ER)	All strengths	1 tablet per day
hydrocodone-ibuprofen	All strengths	6 tablets per day
hydromorphone ER	All strengths	1 tablet per day
hydromorphone hcl supp	3 mg	4 suppositories per day
hydromorphone hcl tabs	2 mg	12 tablets per day
hydromorphone hcl tabs	4 mg	6 tablets per day
hydromorphone hcl tabs	8 mg	6 tablets per day
levorphanol	2 mg	120 tablets per month
meperidine hcl	50mg	24 tablets per month
meperidine hcl	100 mg	12 tablets per month

PHARMACY (CONTINUED)

Medication	Strength	Quantity Limit
morphine sulfate beads cap ER	All strengths	1 capsule per day
morphine sulfate ER	All strengths	3 tablets per day
morphine sulfate soln	10 mg/5ml	1800 ml per month
morphine sulfate soln	2 0mg/5ml	900 ml per month
morphine sulfate soln	100 mg/5ml	180 ml per month
morphine sulfate tablet	15 mg	180 tablets per month
morphine sulfate tablet	30 mg	180 tablets per month
opium tincture deodorized	10mg/ml	120 ml per month
oxycodone hcl	5 mg	360 tablets per month
oxycodone hcl	10 mg	180 tablets per month
oxycodone hcl	15 mg	180 tablets per month
oxycodone hcl	20 mg	180 tablets per month
oxycodone hcl	30 mg	180 tablets per month
oxycodone hcl tab ER 12hr deter	All strengths	3 tablets per day
oxymorphone ER (Opana ER)	All strengths	4 tablets per day
oxymorphone hcl	5 mg	360 tablets per month
oxymorphone hcl	10 mg	360 tablets per month
oxymorphone hcl ER	All strengths	2 tablets per day
pentazocine/naloxone	50 mg/0.5mg	360 tablets per month
tapentadol (Nucynta)	50 mg	12 tablets per day
tapentadol (Nucynta)	75 mg	8 tablets per day
tapentadol (Nucynta)	100 mg	6 tablets per day
tapentadol ER (Nucynta ER)	50 mg	10 tablets per day
tapentadol ER (Nucynta ER)	100 mg	5 tablets day
tapentadol ER (Nucynta ER)	150 mg	3 tablets per day
tapentadol ER (Nucynta ER)	200 mg	2 tablets per day
tapentadol ER (Nucynta ER)	250 mg	2 tablets per day
tramadol hcl	50 mg	240 tablets per month
tramadol hcl ER cap	100 mg	3 tablets per day
tramadol hcl ER cap	150 mg	2 tablets per day
tramadol hcl ER cap	200 mg	2 tablets per day
tramadol hcl ER cap	300 mg	1 tablet per day
tramadol hcl ER tab	100 mg	3 tablets per day
tramadol hcl ER tab	200 mg	2 tablets per day
tramadol hcl ER tab	300 mg	1 tablet per day
tramadol/acetaminophen	37.5-325 mg	40 tablets per month

**Formulary Changes**

The latest formulary changes are listed in the Contract Notification section of this newsletter.

POLICY NEWS



Annual Review of Medical Policies

The following policies have been reviewed and updated in the Provider E-Library at hmsa.com/prc0006; printed copies are available on request.

Effective February 23, 2018:

- Panniculectomy/Abdominoplasty.
- Blepharoplasty and Repair of Blepharoptosis.
- Laser Therapy for Plaque Psoriasis.
- Home Health Care.
- Cardiovascular Risk Panels.
- Hematopoietic Cell Transplantation for Acute Lymphoblastic Leukemia.
- Allogeneic Hematopoietic SCT for Genetic Diseases and Acquired Anemias.
- Hematopoietic Cell Transplantation for CNS Embryonal Tumors and Ependymoma.
- Allogeneic SCT for Myelodysplastic Syndromes and Myeloproliferative Neoplasms.
- Hematopoietic Cell Transplantation for Epithelial Ovarian Cancer.
- Percutaneous Mitral Valve Repair.



Notice for Specialty Drug Policy Changes

The following policies have been updated and are effective June 1, 2018:

- Hepatitis C (Direct Acting Antiviral Medications for Treatment of Hepatitis C) — HMO and PPO (except Control formulary).
- Hepatitis C (Direct Acting Antiviral Medications for Treatment of Hepatitis C) — Control formulary.
- Hepatitis C (Direct Acting Antiviral Medications for Treatment of Hepatitis C) — QUEST Integration.

The updated policies are available at hmsa.com/portal/provider/zav_pel.aa.DIR.505.htm.



New Medical Specialty Drug Policies

In the February 2018 edition of *HealthPro News*, information on the new Gonal-f policy to take effect on May 1, 2018, was included. However, there won't be a policy in effect on that date. Please disregard the information.

We apologize for any inconvenience or confusion this may have caused.

More policy changes are listed in the Contract Notification section of this newsletter.

CALENDAR



Well-Being Workshops

The following workshops are available to HMSA members at no cost. These informative sessions can help your patients improve their health and well-being. Non-HMSA members may attend if space is available.

For more information, refer your patients to hmsa.com/well-being/workshops or have them call 1 (855) 329-5461, option 1, toll-free to register at least three days before the workshop date.

HAWAII ISLAND

Diabetes 101

Learn how to prevent and treat diabetes.

- 4/14, 10–11 a.m.
HMSA Center @ Hilo
- 4/27, 10–11 a.m.
HMSA Kailua-Kona Office

Senior Fitness

Discover ways to maintain your strength as you age.

- 4/10, 10:30–11:30 a.m.
HMSA Kailua-Kona Office
- 4/19, 10–11 a.m.
HMSA Center @ Hilo

KAUAI

Senior Fitness

Discover ways to maintain your strength as you age.

- 4/4, 5–6 p.m.
Kuhio Medical Center

OAHU

Diabetes 101

Learn how to prevent and treat diabetes.

- 4/20, 10–11 a.m.
HMSA Center @ Honolulu
- 4/21, 10–11 a.m.
HMSA Center @ Pearl City
- 4/28, 10–11 a.m.
HMSA Center @ Honolulu

Senior Fitness

Discover ways to maintain your strength as you age.

- 4/13, 9:30–10:30 a.m.
HMSA Center @ Honolulu
- 4/14, 10–11 a.m.
HMSA Center @ Pearl City
- 4/17, 12:30–1:30 p.m.
Mililani YMCA
- 4/26, 9:30–10:30 a.m.
HMSA Center @ Honolulu

Take a Look at Stress

Learn how to relax and improve your emotional health.

- 4/26, 10–11 a.m.
HMSA Center @ Pearl City



Community Activities

Adult Fitness at Queen's: Learn body shaping, tai chi, kickboxing, yoga, and more. Times and instructors vary. The Queen's Medical Center, Women's Health Center Classroom. Six classes for \$66. Call 691-7117 for details and to register.

Health & Education at Queen's: The Queen's Medical Center, Women's Health Center Classroom.

- **Genetics Class:** Learn about prenatal genetic screening and tests to check the health of your baby. 691-7633. Free.
- **Lamaze Class:** Sundays, 1–4 p.m. Get birthing techniques from a Lamaze-certified instructor in this birth-partner-focused class. \$150 per couple for five sessions. Instructor: Nicia Platt.

CALENDAR (CONTINUED)

- **Lymphedema/Breast Cancer Clinic:** First and third Thursdays, 1:30–2:30 p.m. Learn exercises to prevent lymphedema (swelling of the arms). Free.
- **Mammogram and Cervical Cancer Screening:** Every other Friday, 8 a.m.–noon. Free for women ages 50–64, uninsured or underinsured, or low income. 691-7726.

Alzheimer's Association Support Groups: Information and support for people caring for a loved one with Alzheimer's disease. Groups meet on Hawaii Island, Kauai, Maui, and Oahu. For locations and meeting times, visit alz.org/hawaii.

Bariatric Support Group: April 11, 5–6 p.m. Pali Momi Medical Center. Information and guidance for those who have had or are considering bariatric surgery. 485-4173.

Big Island Ostomy Group: April 16, 11:30 a.m. Hilo Medical Center. Open to ostomates, pre-ostomy patients, caregivers, medical professionals, and the public. 339-7640.

Car Seat Checks: Kapiolani Medical Center. Get your baby or child's car seat checked by a trained child passenger safety technician. Call to schedule an appointment. 527-2588.

COPD Support Group: April 10, 10 a.m.–noon. Pali Momi Women's Center at Pearlridge. Get support and information on medication, breathing techniques, exercise, and more. To register, call Valerie Chang at 699-9839, email valerie@hawaiicopd.org, or visit hawaiicopd.org.

COPD Support Group Hilo: April 16, 4:30–5:30 p.m. Hilo Medical Center. Chronic Obstructive Pulmonary Disease patients their caregivers. Free.

Farmers Market at HMSA: Every Friday, 11 a.m.–2 p.m. HMSA Center @ Honolulu. Fresh island-grown produce and ready-to-eat local food. For information on vendors, call HMSA at 948-6521.

Hawaii Prostate Cancer Support Group: This free support group provides men and their families on Hawaii Island and Oahu with information, materials, and support to help them make informed decisions about prostate cancer treatment. For locations and meeting times, go to hawaii prostatecancer.org or call 486-9675.

Kardiac Kids Support Group: April 13, 6:30–9 p.m. Kapiolani Medical Center. Education, encouragement, and support for families with children who have congenital heart defects. Jullie Passos, 227-4558.

Mommy & Me Hui: April 1 and 19, 11:15 a.m.–12:30 p.m. Adventist Health Castle. Learn about breastfeeding and connect with new mothers. 263-5400.

Rat Lungworm Disease Support Group: April 11, 4–5 p.m. Keaau Community Center. To gather and support survivors of rat lungworm and their caregivers. People who suspect they had the disease are also welcome to attend. Free. 932-3160.

Relay for Life of Kauai: April 28-29, 6 a.m.–6 p.m. Hanapepe Soccer Fields. Raise awareness, honor loved ones, and celebrate survivors of cancer. Support your favorite team or start your own. 935-0025.

safeTALK Suicide Awareness Training: April 24, 10 a.m.–2:30 p.m. Hilo Medical Center. An introduction to suicide awareness sponsored by the Hilo Medical Center and Hawaii Department of Health. Free and open to the public. To register, contact Gary Gardner, RN-BC, at agardner@hhsc.org or 896-0423.

Stroke Support Group: April 10, 4–5 p.m. Hilo Medical Center. A forum for stroke survivors and their caregivers, family members, and friends. Amy Shipley, 932-3049 or ashipley@hhsc.org.

Support Group for Cancer Patients: April 26, 2–4 p.m. North Hawaii Community Hospital. A support group for cancer patients and their families and caregivers. 881-4417.

CALENDAR (CONTINUED)

Walk Around the Block with a Doc: April 21, 7 a.m., Wilcox Medical Center, Lihue. Walk around the campus with a doctor and other walkers, then enjoy a healthy breakfast and talk about a health topic. Free. Registration required. 245-1198.

Walk with a Doc Oahu: Every Saturday, 8 a.m. Patsy T. Mink Central Oahu Regional Park. Walk includes a brief warm-up/stretch and a health tip from a community doctor. New participants are asked to arrive by 7:45 a.m. walkwithadoc.org.

Walk with a Doc on Hawaii Island: Every Sunday, 8 a.m. Liliuokalani Gardens, Hilo. Walk includes a brief warm-up/stretch and an informative talk from a community physician or medical student. Meets rain or shine. wwadbisland.org.