

Neighborhood NEWS

SPRING 2015

2014 After-Hours Survey Highlights Access to Care



Neighborhood's Provider Engagement and Contracting (PEC) department completed its annual After Hours Survey of the primary care network in October 2014. Eighty-seven sites were surveyed, representing 94 percent of Neighborhood's membership. All primary care practices with an enrollment of 200 members or more were contacted. Calls were made to primary care sites after scheduled hours of operation.

The survey records:

- Whether each site uses an answering machine, answering service, or both
- The number and type of languages available to callers
- Whether or not emergency department instructions are mentioned first

The survey determined:


- Seventy-seven percent of the sites surveyed use both an answering machine and answering service, or the on-call provider answers the call directly
- Eighty percent of the practices surveyed offer alternative languages through their answering machine, answering service, or both
- One hundred percent of the practices surveyed have a reliable mechanism (answering machine, answering service or both) to receive calls into the practice after business hours
- **NEW:** A member can expect a call back from a covering provider within 21 minutes

Because of our network of dedicated primary care providers, access to care is available to our members 24 hours a day, seven days a week. We thank you for your ongoing commitment.

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Changes and Constants at Neighborhood

By Francisco "Paco" Trilla, M.D., Chief Medical Officer

The landscape of health care continues to change across the country and nowhere is that more evident than right here at Neighborhood Health Plan of Rhode Island. For 2015 we doubled our offerings, lowered our commercial rates, and saw our membership growth reach a new record high of 159,000.

Ten thousand enrollees are from Health Exchange programs, up from seven hundred the previous year. Correspondingly our staff has doubled in size and I'm pleased to announce that we have welcomed David Burnett, former Chief of Government and Public Affairs at the Executive Office of Health and Human Services, as our first Chief of Staff.

One constant in this varying climate is Neighborhood's unwavering mission to serve the underserved and engage our members in their health care. We are sincerely grateful to our large network of high-quality providers for their ongoing partnership in this effort. As our staff grows and membership increases, improving the patient experience is as important as ever.

Patient satisfaction not only improves the member's experience but when done correctly, also contributes to the improvement of medical outcomes. With an influx of new populations in the health care system, I ask you to take a moment to review the small but important things that can play an important role in the patient experience.

View the experience of your office with a fresh set of eyes.

- Was it easy to park and access the building? Would it have been on crutches or in a wheelchair?
- Was the person at the front desk helpful and friendly?
- Are waits timely?
- Is appointment-making easy?
- Would you feel listened to? Is there time for questions?
- Is there helpful literature in the office? Picture books for children?
- Is communication pleasant and accessible whether by phone or electronically?



Another addition to the health care topography of our state is that Minute Clinic, a division of CVS Caremark Corporation and the largest provider of retail medical clinics in the United States, will soon open several locations. Neighborhood has contracted to be part of the first three in Rhode Island.

Minute Clinic, which is physician-led, are staffed by Minute Clinic nurse practitioners who specialize in family health care and can diagnose, treat and write prescriptions, when clinically appropriate, for common family illnesses such as strep throat and ear, eye, sinus, bladder and bronchial infections. Minor abrasions, and skin conditions are treated, and common vaccinations such as influenza, tetanus, pneumonia and hepatitis A & B are available. Patients must be at least 18 months old.

As new methods to deliver care emerge, the value of a doctor-patient relationship is one that we believe is important, valuable and integral to best health outcomes, and we stress this message in our communication efforts. The value of the provider network-health plan relationship is valued as well.

Educating Patients About Postpartum Appointments

Timely postpartum care is an integral component of successful health outcomes for women after giving birth. It is also a measurement of quality care. Often this visit is not completed and results in missed opportunities for assessment of any medical complications, symptoms of postpartum depression and contraception counseling.

Ways to increase patient's adherence to postpartum visits:

- Educate patients during the prenatal period regarding the importance of postpartum appointments.
- At an incision check, be sure a postpartum appointment is scheduled within three to eight weeks post-delivery.
- Schedule postpartum visit prior to discharge from the hospital.

- Piggyback visits with infant appointments if both are patients at your site.
- Provide appointment reminders via phone or postcard.
- Conduct outreach for missed appointments.
- Update patient contact information at each visit.
- Schedule the postpartum visit within six weeks of delivery to allow time to reschedule if missed.
- If transportation is an issue, have members call LogistiCare at 1-855-330-9133 or Neighborhood Member Services at 1-800-459-6019 (TTY 711).

Pregnant members are eligible for transportation to medical appointments beginning in their third trimester and continuing until three months postpartum.

CAHPS® Member Satisfaction Survey Underway

Neighborhood's annual Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey is in the field from March through May 2015. Both our Medicaid and Exchange members are being surveyed this spring.

CAHPS is Neighborhood's primary tool to assess member satisfaction with their overall health care experience. Results from CAHPS help identify areas of strength and opportunities for improvement.

Survey topics include satisfaction with access to urgent, routine, and specialty care, as well as physician communication. Members are also asked to rate their personal doctor and the health plan on a scale from 0 to 10.

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

"Love that Baby" Campaign Encourages Family Visiting Referrals



The Rhode Island Department of Health (HEALTH) launched a new campaign in January to promote family visiting programs to Rhode Island moms-to-be, parents and families. Family visitors (formerly known as home visitors) provide free services and evidence-based

support to moms-to-be, parents and families so they can help their babies develop and grow up healthy. Family visiting programs have demonstrated improvements in a wide range of maternal and child health outcomes. If you know someone who may benefit from the programs, please refer!



Call HEALTH's Resource and Referral Specialist at 1-401-222-4609. To learn more, check out the campaign website, which includes video testimonials where program participants and family visitors tell their stories, at www.FamilyVisitingRI.org.

Postpartum Depression and Your Patients

Neighborhood and Beacon Health Strategies (Beacon) work collaboratively to ensure our members receive the best and most appropriate care available. In keeping with that goal, we want to share with you important information on a disorder that can affect pregnant women prior to and following the birth of a child.

The birth of a child often triggers feelings of joy and excitement as well as anxiety and fear. For some mothers this time can also bring about something else: postpartum depression.

Postpartum depression has many symptoms that providers should assess for, including:



- Loss of appetite
- Insomnia
- Intense irritability and anger
- Lack of joy in life
- Severe mood swings
- Feelings of shame or guilt
- Difficulty bonding with the new baby
- Thoughts of harming oneself or the baby

If you have a Neighborhood member who is showing these symptoms for two weeks or more, these may be signs of postpartum depression.

There are many treatment options available that bring together the Primary Care Physician (PCP), obstetrician and behavioral health clinicians. Please remind your patients to sign releases so their treatment can be most appropriately addressed and organized.

If you feel that a patient may be suffering from postpartum depression and you would like more information or assistance referring her to a behavioral health clinician, Beacon can help.

For more information on assessment, medication management and other treatment issues, visit the Beacon website at www.beaconhealthstrategies.com. Click on Providers, select Tools, and type "NHPRI" in the search box.

You can also call Beacon at **1-800-215-0058**, Monday through Friday, from 8:30AM to 5PM. Thank you for your partnership and dedication to our members.

Clinical Practice Guidelines

Neighborhood provides a number of Clinical Practice Guidelines (CPGs) for providers' reference. These guidelines are for our members' more common chronic problems and for their preventive care. They are based on established national guidelines from medical authorities such as the National Institutes of Health and the American College of Cardiology. These guidelines are each reviewed every two years, but updates can occur as needed.

For many of the CPGs, rather than create our own set of guidelines, Neighborhood will adopt a national guideline and publish the link to that guideline for practitioners.

The guidelines can be found online at our website at www.nhpri.org under Providers/Clinical Resources.

The Clinical Practice Guidelines include:

- Adolescent Routine Preventive Care
- Adult Diabetes Care
- Adult Routine Preventive Care
- Diagnosis and Management of Heart Failure
- Diagnosis and Management of Adult Coronary Artery Disease
- Diagnosis and Management of Asthma
- Diagnosis and Management of Attention Deficit Hyperactivity Disorder (ADHD) in Primary Care for School Age Children and Adolescents
- Diagnosis and Management of Chronic Obstructive Pulmonary Disease (COPD)
- Diagnosis and Management of Depressive Disorders in Adult Primary Care Patients
- Pediatric Routine Preventive Care
- Prenatal Care
- Tobacco Cessation in Pregnancy
- Tobacco Cessation for Adults
- Use of Antibiotics for Pediatric Upper Respiratory Infections

Complex Case Management Can Help

Neighborhood has a case management program for members with highly complex needs. Along with our other case management programs, this division focuses on the coordination of services and goal-setting treatments for members who have experienced a critical event or received a diagnosis that requires the extensive use of resources.

Who might benefit from complex case management services?

- High risk neonates discharged to home from a NICU or Level 2 nursery stay
- Members with an inpatient hospitalization greater than 21 days that have been discharged home
- Pediatric members discharged home from an acute rehabilitation or skilled nursing facility stay
- Adult members with a length of stay greater than seven days in acute rehabilitation facility discharged to home
- Members who have been discharged to home after having a transplant
- Members taking multiple medications with sub-optimal treatment plans
- Members with multiple chronic medical conditions and gaps in their treatment plan

What can Neighborhood complex case managers do for members?

- Support and reinforce members in their efforts to adhere to treatment interventions recommended by their health care providers
- Advocate for members to obtain the most appropriate health care services available
- Act as a liaison between all providers to enhance communication
- Educate members, families and health care providers regarding benefits, availability of services, community resources and health care alternatives
- Reduce barriers in order to maximize positive member outcomes
- Help navigate the health care delivery system

To learn more about Neighborhood's case management programs, or to refer a member that you believe may benefit from these services, please call us at **1-800-459-6019**.

Benefit Coverage for RHO Members

RHO Medicaid only members receive comprehensive medical and prescription coverage. RHO members with Medicaid and Medicare receive coordinating Medicare coverage and over-the-counter prescription coverage.

RHO members are eligible for:

- Interpreter services
- Lead care manager who develops plan of care
- Adult day health
- Transportation
- Vision
- Preventive services:
 - *Homemaker*
 - *Minor environmental modifications*

- *Physical therapy evaluation and services*
- *Respite*
- Long-term supports and services (if eligible):
 - *Adult companion*
 - *Assisted living services*
 - *Day supports*
 - *Case management*
 - *Community transition services*
 - *Home adaptation*

- *Home-delivered meals*
- *Home health services*
- *Long-term care in nursing home*
- *Personal care services*
- *Personal emergency response system*
- *Rlte@Home / shared living*
- *Supported employment*

If you have any questions about RHO benefit coverage, call **1-855-996-4774**.

Neighborhood's Breathe Easy Program Helps You Help Members with Asthma



Neighborhood has a disease management program for our members with asthma called Breathe Easy. Our goal is to assist your patients to better understand their asthma, provide information, and offer assistance from our nurses to help them manage their condition.

All members in the program receive educational newsletters to keep them informed on managing their asthma.

Members also have the option to access support from our nurses who provide health coaching. Our goal is to reinforce your treatment plan for the patient. Our nurses will notify you of your patient's engagement; issues identified during the assessment, and planned interventions. Periodic assessments of your patient's health status are completed and you are contacted with any new concerns.

Health coaching includes education and informational materials to help your patient understand and manage their medications, be better self-managers of their asthma, and effectively plan for visits with their providers.

As you know, the Healthcare Effectiveness Data and Information Set (HEDIS®) is a widely used set of

performance measures in the managed care industry, developed and maintained by the National Committee for Quality Assurance (NCQA). HEDIS® has traditionally measured asthma standards of care by looking at the appropriate use of medications to include members' use of short acting beta-agonist without evidence of controller medication and oral corticosteroid with no claims evidence of a PCP visit.

“ Our goal is to **reinforce your treatment plan** for the patient. ”

In the past few years, measures have been expanded to include evaluation of members who remained on an asthma controller medication for at least 50 percent or at least 75 percent of their treatment period and had a ratio of controller medications to total asthma medication of 50 percent or greater. Neighborhood's HEDIS® department sends provider sites reports that include information on your Neighborhood members with asthma related to these measures.

If you would like to refer your Neighborhood patients who have asthma for educational mailings or health coaching, please call us at **1-401-459-6020**.

Pharmacy Updates Online

View the latest pharmacy changes from Neighborhood's Pharmacy and Therapeutics Committee at www.nhpri.org. Click on "Providers," then "Pharmacy Resources."



Asthma Treatment Overview

The goals of asthma management are to attain good control of symptoms, continue normal activity and decrease subsequent risk of exacerbations. The categories for treatment of asthma include controller and rescue medications.

Controllers are taken regularly to reduce airway inflammation, control symptoms and reduce the risk of exacerbations and worsening lung function.

Rescue medications provide breakthrough symptom relief. Decreasing or eliminating the need for rescue treatment is a measure of successful asthma treatment.

Recommended options for initial therapy are low dose inhaled corticosteroid (ICS), Neighborhood preferred-Asmanex[®], Flovent[®], Pulmicort[®] and Qvar[®] and for rescue, a short acting beta agonist (SABA), Neighborhood preferred-Ventolin HFA[®].

For those with asthma symptoms on most days or nighttime symptoms, one or more nights per week, preferred controller is medium to high dose ICS.

An alternative choice is low-dose combination ICS/long acting beta agonist (LABA).

For severely uncontrolled asthma or an acute exacerbation, high dose ICS or moderate dose ICS/LABA is recommended. ICS/LABA inhalers Advair[®], Dulera[®] and Symbicort[®] are formulary but subject to step therapy and will pay at point of sale for members if previous ICS inhalers have been used or has continuously filled an ICS/LABA inhaler.

If more than 90 days have elapsed between fills, the claim will reject and prior authorization will need to be obtained. The form can be found online at www.nhpri.org, click on Providers to Pharmacy Resources.

Claims should automatically pay if prescribed by a doctor board certified in pulmonology or allergy.

TIP: Adherence is often poor with controller inhalers. Verify adherence with member's pharmacy before stepping up to higher dose or changing therapy.

For more information, visit:

www.ginasthma.org/local/uploads/files/GINA_Report_2014_Aug12.pdf

www.nhlbi.nih.gov/files/docs/guidelines/asthsumm.pdf



Our Medical Review Team

Neighborhood has a special team of nurses and clinical staff. This team reviews requests for hospital admissions and other treatments. The process is called utilization management (UM). Our UM decisions are based on what is right for our members. We want to make sure you receive the best health care possible!

Neighborhood does not reward anyone who makes UM decisions with money or other incentives for denying or limiting services to members. Neighborhood does not give financial rewards for UM decisions that result in fewer services or less care. If you have questions about how Neighborhood makes care decisions, call us at **1-800-459-6019**.

Claims Corner: Helpful Reminders

Medical notes should only be submitted to Neighborhood if requested by the plan. If notes are requested, the reconsideration process should be followed:

A Claim Reconsideration request form should accompany all reconsideration requests

The form can be found on our website at www.nhpri.org

If you have any questions on the reconsideration process, please contact our call center for assistance at **1-401-459-6080**

Effective January 1, 2015:

Initial and corrected claim submission should be mailed to:

**P.O. Box 28259
Providence, RI 02908-3700**

Electronic claims for the Exchange products should be billed with Payer ID 96240

Neighborhood receives weekly crossover claims from CMS. When a provider submits their claims to CMS they will automatically send us the secondary claim and providers no longer need to submit the Medicare secondary claim. Please allow at least 30 days post of the Medicare payment before calling Neighborhood about a claim status.

Stop Fraud & Abuse

As part of the Neighborhood Fraud and Abuse Initiative, we use software to identify potential aberrant billing practices.

Please refer to your remittance advice to review, if applicable, any identified billing errors. We encourage you to take the appropriate actions to correct any errors. For claims that do not meet CMS-mandated coding standards, Neighborhood will deny, adjust or retract payments. For questions about your claims, call Neighborhood Member Services at **1-800-459-6019**.

Neighborhood encourages you to report suspected cases of fraud and abuse. You can also report situations you think may not be right. Call the Neighborhood Compliance Hotline at **1-800-826-6762** to tell us about fraud, abuse or your concern.

Billing Practices Reminder

In their contract with Neighborhood, providers accept the terms of reimbursement and cannot bill or balance-bill Medicaid members.

In no event can the provider bill, charge or have any recourse against Neighborhood members for covered services provided by the provider under the agreement with Neighborhood.

Our commercial members have cost-sharing in the form of deductibles, copays and coinsurance. Please check the member's ID card or call provider eligibility line to confirm the member's coverage and whether any cost sharing is applicable.

For Rhody Health Options (RHO) members who have Medicare coverage, providers are prohibited from seeking to collect any additional amount from a member for Medicare deductibles, coinsurances or copays.

Our providers, their staff and billing subcontractors may call Provider Claims Services at **1-800-459-6019** with billing issues. Neighborhood Member Services can also assist with member education and outreach to ensure our members' and providers' needs are met.