

SUMMER 2007

## PROVIDER NEWS

### Membership in RIte Care Declining

The federal Deficit Reduction Act of 2005 (DRA), signed into law in February 2006, includes a provision requiring all individuals applying for or renewing Medicaid coverage to present “satisfactory documentary evidence” of their citizenship or status as a legal alien.

For most people, proof of citizenship or legal residency, as well as proof of identity, means an original birth certificate and a driver's license, or a U.S. passport. The challenges of providing these documents are many. Without all the original papers, an applicant first needs to understand which documents are acceptable; then, it could take some time to obtain them. If the applicant needs to get a birth certificate and a state ID card

for his or her child, that usually costs \$15 per item, plus time off from work — a significant burden for someone typically earning less than 150 percent of the Federal Poverty Level.

#### What Does This Mean for Rhode Island?

On January 16, 2007, Rhode Island implemented the first phase of the new documentation requirements. This phase targets first-time applicants for Medicaid coverage and those who have allowed their coverage to lapse. As of April 30, 2007, the number of RIte Care (Rhode Island's Medicaid managed care program) enrollees dropped by more than 4,100 — a drastic change from the typical fluctuation of 200 to 400 people per month.

#### How Neighborhood Is Responding

Neighborhood is in the process of alerting all its members to the new documentation requirements to ensure they can begin the lengthy process of locating original documents while their Medicaid

coverage continues uninterrupted.

Neighborhood also is collaborating with the state and health care providers to simplify the documentation process for Medicaid recipients in Rhode Island. Neighborhood also is working to inform Rhode Island's congressional delegation about the burden of the new requirements and urging delegates to consider joint legislative action to ease the burden on those eligible for Medicaid. ●

#### HOW YOU CAN HELP

Please direct individuals to the following organizations, which can tell them how to comply with requirements.

**Rhode Island Department of  
Human Services**  
[www.dhs.ri.gov](http://www.dhs.ri.gov)  
1-401-462-5300

**Rhode Island Health Center  
Association**  
1-401-274-1771, ext. 201

**Neighborhood Health Plan of  
Rhode Island**  
1-800-459-6019

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L. McTyeire Johnston, MD,  
Chief Medical Officer

## PROVIDER NEWS

# Incorporating the Member's Voice into Our Daily Work

**H**ealth care organizations widely accept the value of working with patients and their family members to improve the quality of care. Successful partnerships with members require important knowledge and tools. Neighborhood's learning and work is guided by three seminars presented by the Institute for Healthcare Improvement (IHI). (For details, go to [www.ihl.org/IHI/Topics/PatientCenteredCare/PatientCenteredCareGeneral/Literature/PartneringwithPatientsandFamilies.htm](http://www.ihl.org/IHI/Topics/PatientCenteredCare/PatientCenteredCareGeneral/Literature/PartneringwithPatientsandFamilies.htm).)

Putting the lessons learned from IHI into practice, in 2003 Neighborhood established a Member Satisfaction Workgroup (MSW), whose mission is to identify, understand and remove sources of dissatisfaction with health care services for our members. Members of this Workgroup bring the critical voices of Neighborhood's members and providers to the table. Serving alongside internal Neighborhood staff, they provide a direct and vital connection to our member and provider communities by sharing their experiences and observations, and offering the member/provider perspective on identified issues and proposed interventions. Currently, Neighborhood has three active member participants, representing key lines of business (Rite Care, CSN and Substitute Care) and two provider participants representing our community health center and private practice colleagues.

MSW meets bimonthly and reviews:

- Member complaint data and feedback from the Child and Family Consumer Advisory Committee,
- Neighborhood's various member advisory committees,
- Results of the CAHPS® and Visit-Based Member Satisfaction surveys, and
- Feedback from member focus groups and comments received during



marketing activities.

All other pertinent member satisfaction-related information is also reviewed when available. All issues identified are logged on the committee's priority grid, updated as interventions occur and tracked until resolved.

Over the years, this work has identified many issues and led to numerous interventions. The meeting agenda has been so packed that members now review materials ahead of time and come to meetings prepared to comment and actively participate. As a result, all participants lend opinions, insights and suggestions, and more action items have been identified. Examples of discussion topics and interventions include:

- Specifics of survey questions seeking to quantify member satisfaction levels with transportation and interpreter services,
- Modifications to Neighborhood's Member Complaints policy and procedure and discussion of its distribution to the entire organization so that all

Neighborhood staff encourage members to call with complaints or concerns, and

- Methods of educating members and providers about different benefit packages that may be limited, such as Extended Family Planning, or specific benefits, such as coverage for over-the-counter (OTC) medications.

This work has led to specific interventions such as the addition of an OTC medication page in Neighborhood's formulary accompanied by Web site language to remind providers that a written prescription is necessary for OTC medications to be covered. Provider Relations Representatives also provided this reminder during all site visits during the month of April 2006.

Another valuable intervention centered on discussion of how challenging it can be to determine if a member is really complaining, especially if their issue is resolved immediately during a call and the end result is a satisfied member. A suggestion at MSW led to a QI pilot in which members were specifically asked "Would you like to file a complaint?" to validate the Neighborhood's complaint documentation. Results of the pilot were monitored and discussed and as of Q2 2007, complaints, inquiries and concerns are being tracked more effectively.

Related to this important work engaging members and providers, CAHPS® satisfaction scores for the Plan have improved and remain strong, and the proportion of member complaints regarding claims/billing issues has decreased over time (from 45% in Q1 2005 to 20% in Q4 2006).

At the end of the day, engaged members and providers improve programs, compliance and outcomes. Neighborhood will continue to harness those energies to improve the work that we do. ●

*L. McTyeire Johnston MD*

## PROVIDER NEWS

# Summer Fun Inside and Out

Here's a great list of FREE activities offered throughout the state. Please share it with your patients and consider posting it in your waiting or exam room. These fun programs are sure to inspire kids of all ages, all summer long.

### ■ Audubon Environmental Education Center

(Bristol, 1-401-245-7500)

FREE Family Fun Days are held the first Saturday of every month. Tour the aquarium and see a rare blue lobster. Or hike along the quarter-mile of boardwalk to Narragansett Bay. Get there early and make a nature craft.

### ■ Bookworm Wednesdays at Showcase Cinemas

Kids get in FREE to a children's movie when they bring a book report. Call your local Showcase Cinema for show times.

### ■ City Arts!

(Providence, 1-401-941-0795)

FREE summer camp for children ages 8 to 14.

### ■ Home Depot Kids Workshop

FREE "How-To" Clinics for children ages 5 to 12 are held on the first Saturday of each month from 9 a.m. to noon. Children make projects from kits. Children must be with an adult.

### ■ Homestead Gardens

(North Smithfield, 1-401-765-4847)

Visit a 55-acre family-friendly farm for FREE. You can feed and pet sheep and llamas, fish, go on a hayride, and learn about growing and harvesting.

### ■ Providence Children's Museum

(1-401-273-5437)

Get in FREE with your Neighborhood ID card for hands-on learning and fun for the whole family.

### ■ Roger Williams Park Zoo

(1-401-785-3510, ext. 358)

Providence residents get into the zoo FREE on the first Saturday of every month with proof of address.

### ■ Wright's Dairy Farm

(North Smithfield, 1-401-767-3014)

Visit a working dairy farm and watch cows get milked daily from 3 to 6 p.m.

### ■ Your Town's Recreation Department

Some towns offer low-cost summer programs for local children held at elementary schools. Activities may include field trips, games, arts and crafts, and sports. Call your town's recreation department for details.

### ■ Volunteer Opportunities

Older children can stay active and help their community by volunteering with these groups:

#### **Audubon Society of Rhode Island**

(Bristol, 1-401-245-7500, ext. 19)

#### **Save the Bay**

(1-401-272-3540, ext. 130)



### MEET OUR SENIOR LEADERSHIP TEAM

Neighborhood has welcomed a new Chief Financial Officer (CFO) and Chief Operating Officer (COO) this year. Together with our other senior leaders, this team works to assure our members have access to top quality health care through an outstanding network of practitioners.

Pictured at left are: Scott O'Gorman (CFO), Mark Reynolds (Chief Executive Officer), Mack Johnston, MD (Chief Medical Officer) and Nancy Coburn (COO).

# Bright Start: Helping You Support Moms-to-Be

### NAVIGATING THE SYSTEM: NEIGHBORHOOD'S MEMBER ADVOCATE

It's not always easy for patients to navigate a health care system. But Neighborhood Member Advocate/Ombudsman Jacqueline L. Dowdy, MSW, is dedicated to helping our members do just that. She helps Neighborhood members file complaints, and she works with health plan staff, consumer advisory groups and local community organizations that interact with our members to make sure their needs are addressed.

Jackie is a foster mom who has cared for a child with special health care needs for seven years. She has experience and a personal interest in resolving systemic issues.

"I have many roles at Neighborhood," Jackie said. "I am an educator, a problem solver, an investigator and a voice for change. I listen to member concerns and needs, gather information, help find answers and resolve service-level problems."

Please do not hesitate to refer a Neighborhood member in need of assistance to Jackie Dowdy at **1-401-459-6172**.

Neighborhood Health Plan of Rhode Island can put your prenatal patients in touch with a variety of social services — at no charge. It's all part of Neighborhood's comprehensive prenatal program, Bright Start.

### Connecting Patients to Social Services

Neighborhood designed Bright Start to help members have healthy pregnancies and healthy babies.

"Providers may be unfamiliar with the full range of community resources available for their patients' social problems," said Nancy Harrison, RN, MPH, Health and Wellness Team Lead at Neighborhood. "By participating in the Bright Start program," she added, "providers have access to nurse case managers and social workers who can connect their patients to the services they need."

Services available include the following:

- Nutrition support,
- Transportation to and from appointments (if qualified),
- Smoking cessation support,
- Referral to mental health providers for depression or other problems,
- Treatment for substance abuse through Beacon Strategies, our behavioral health provider,
- Assistance against domestic violence through Beacon Strategies, and
- Home care services (if qualified).

In addition, Neighborhood can help providers promote the importance of breast-feeding to new moms and moms-to-be. Breast pumps, as well as meetings with a lactation consultant, are covered

services. "We recognize that care for pregnant women requires a team approach, and we want to help," Harrison said.

### Help Us Help Your Patients

Bright Start services are available to any pregnant woman who is a member of Neighborhood. By participating in Bright Start, you can ensure that your patients who are members have access to these services.

If your site has not yet agreed to participate, it's easy to do so. Just call Nancy Harrison directly at **1-401-459-6127**. Each month, you'll receive information about risk identification and plan of care on your patients enrolled in Bright Start.

**If you are already participating in Bright Start and need assistance with a specific patient, please call the Medical Management Department's Bright Start direct line — 1-401-459-6675 — and ask to speak with a Bright Start care manager. ●**



To view up-to-date pharmacy changes approved by Neighborhood's Pharmacy and Therapeutics Committee, please visit our Web site at **www.nhpri.org**, then follow the links "For Providers" and "Pharmacy Info."

# Helping Patients with Pain Management

Steven Friedman, PhD

In the United States, pain-related visits to a physician account for the vast majority of medical appointments. It has been estimated that upwards of \$100 billion is spent annually on costs related to pain management, including medical expenses and lost work time and productivity. In some cases, pain is of an acute nature, temporary and resolvable, either through effective medical intervention or on its own. Chronic pain, on the other hand, is more persistent, less amenable to medical treatment and interwoven with psychological and emotional factors.

Most approaches to pain management take a “biopsychosocial” view that considers the biological or physical nature of the pain as well as the psychological and social contributions. There is a reciprocal interaction among all components, including the physical sensations, emotional reactions, cognitive perspectives and environmental influences, including the social environment. The biopsychosocial approach requires that patients assume increased responsibility for managing their pain on a day-to-day basis. Coping strategies can be learned that often have significant impact on the felt perception of pain. These strategies can lead to increased control and a feeling of success in more fully managing the pain so it doesn't control the patient's life.

Persistent pain and discomfort can lead the patient to feel hopeless and helpless in the face of this unrelenting condition. It is



important for the patient to regain a sense of control and success in managing the pain. These successes promote a sense of hopefulness, which can further cycle into continued progress. Lifestyle changes are necessary, including engaging in an exercise program and learning relaxation skills and various modes of stress management, such as breathing exercises, visualization, yoga and self-hypnosis.

The following factors should be included in your comprehensive pain assessment:

- An overview of psychosocial factors (effects of the problem on patient and family),
- Meaning of the pain to the patient and family members,

- Changes in mood,
- Typical coping responses,
- Expectations regarding managing the pain,
- Economic impact of pain and its treatment, and
- Evaluation of support systems.

Patient education and active involvement in a comprehensive treatment plan is necessary to gain control and mastery over the pain. Treatment must be tailored to the individual needs of patients and their families and should begin with the least-invasive procedures. For many patients, medication combined with the patient's active involvement in exercise and stress management programs will serve to optimize success and prove most beneficial over time. ●

## **WOMEN & INFANTS' HOSPITAL OFFERING HPV VACCINE**

Women & Infants' Hospital is holding monthly HPV clinics where nonpregnant women ages 19 to 26 can get the shot. The vaccine is given as a series of three doses spread over six months. Follow-up clinics for the second and third doses of the vaccine are scheduled to ensure that all participants have the opportunity to complete the full vaccination series.

Clinics will be held from 8 a.m. to noon on the following Saturdays: August 4, September 8 and October 6. Appointments are necessary. Call **1-401-277-3628**.

## NATIONAL PROVIDER IDENTIFICATION (NPI) UPDATE

Neighborhood will accept the Neighborhood legacy provider and vendor numbers along with NPI numbers until 5/23/2008.

If you or your group has not already done so, please forward a copy of your NPI notification letter from the Centers for Medicare & Medicaid Services so that we may enter your NPI into our claims payment system. Please send to:

Ken Vinhateiro, Manager of Specialty Services  
Neighborhood Health Plan of Rhode Island  
299 Promenade Street  
Providence, RI 02908  
Fax: **1-401-459-6066**

If you have not received your NPI, you may apply for one by contacting the NPI Enumerator:

NPI Enumerator  
P.O. Box 6059  
Fargo, ND 58108-6059  
Phone: **1-800-465-3203**  
E-mail: **customerservice@npienumerator.com**

You also may apply on the NPI Web site, **[www.nppes.cms.hhs.gov](http://www.nppes.cms.hhs.gov)**.

**Please note:** If you have already submitted your NPI(s), do not send it again.

**Reminder:** Neighborhood accepts claims electronically via Emdeon Business Services. We encourage providers now submitting paper claims to move to an electronic format. To learn how, call Emdeon at **1-800-845-6592**, or contact Neighborhood Customer Service at **1-401-459-6020** with any questions.

## PROVIDER NEWS



### Help Prevent Lead Poisoning

In Rhode Island, health care providers are required by law to annually screen their patients between 9 months and 6 years of age for lead poisoning. More frequent screening may be justified based on elevated lead levels or answers to the Risk Assessment Questionnaire (see below for link) asked during routine office visits.

1. Does your child live in or regularly visit a house with peeling or chipping paint built before 1950 (day care center, preschool, home of babysitter, friend or relative)?
2. Does your child live in or regularly visit a house built before 1978 with recent or ongoing renovations or remodeling (within the last 6 months)?
3. Does your child have a brother, sister, housemate or playmate who has or did have lead poisoning?
4. Does your child live near an active smelter, battery recycling plant or other industry likely to release lead?
5. Does your child live with an adult whose

job (e.g., construction, painting) or hobby (e.g., pottery, stained glass, furniture refinishing, automotive bodywork and boat refinishing) involves exposure to lead?

If above-normal lead levels are found in a child's blood, the child's physician will be notified and the child will get whatever help and treatment is needed from the state health department and from the special Lead Centers in Rhode Island.

Neighborhood works closely with the RI Department of Health to be sure all of our member children are tested for lead by mailing educational information and reminders to families. For more information on Neighborhood's lead-testing initiative, contact Nancy Harrison at **1-401-459-6127**. ●

For a copy of the Risk Assessment Questionnaire, go to **[www.health.ri.gov/lead/family/lead\\_poster.pdf](http://www.health.ri.gov/lead/family/lead_poster.pdf)**.

### CLINICAL PRACTICE GUIDELINES UPDATE

Access to Neighborhood's guidelines on clinical practice, prenatal care and preventive health is available through our Web site, **[www.nhpri.org](http://www.nhpri.org)**.

To access these guidelines, click on "For Providers," then "Clinical Programs." Paper copies of all guidelines also are available upon request. Contact Cesarina Elias at **1-401-459-6087**.

# Preventing Fraud and Abuse: How You Can Help

*The second article in Neighborhood's ongoing series about preventing fraud and abuse.*

**B**y using correct coding, you can avoid denials and receive faster reimbursement. Familiarizing yourself with CPT, HCPCS and ICD9 coding fundamentals is key.

Coding to the highest degree of specificity avoids incorrect billing. CPT — Current Procedural Terminology — codes are used by physicians, hospitals and other health care professionals to report specific medical, surgical and diagnostic services and procedures for statistical and third-party payment purposes.

HCPCS, or Health Care Procedure Coding System, is a listing of codes and descriptive terminology used for reporting the provision of supplies, materials, injections and certain services and procedures to Medicare.

ICD-9-CM — the International Classification of Diseases, 9th revision, Clinical Modification — is a statistical classification system that arranges diseases and injuries into groups according to established criteria. Read notes and information available for each code before selecting.

Stay current with updated copies of CPT, HCPCS and ICD9 codes. This will help ensure you are compensated for services rendered and avoid billing for services that do not meet professionally recognized standards for care. The codes and available publications are typically issued in mid-September each year by the National Center for Health Statistics (NCHS), which is part of the Centers for Disease Control and Prevention (CDC). ●



Web sites such as [www.ama.com](http://www.ama.com) and [www.pmic.com](http://www.pmic.com) can provide further information about the updating process and how to acquire coding materials for your billing convenience.

### FOR MORE INFORMATION...

If you have questions about our case management programs or your medical review authorization status, please call our Medical Management Department at 1-800-963-1001.

### CLAIMS CORNER

Please note that if you are requesting retractions related to coordination of benefits or auto accidents, we can process your request more quickly and efficiently if you fax any supporting documentation to **1-401-459-6146**.

If you need to return a claim check, please send supporting documentation and detailed information. This helps ensure accurate processing and correct amounts and avoids delay in processing requests.

Changes in guidelines may affect how well we can process and pay your claims. The updated guidelines can be obtained from various CMS-affiliated Web sites, as well as coding books that can be purchased through various vendors.

If you need to submit corrected claims and medical records, please fax these to the Claims Department at **1-401-459-6146**. Please be sure to clearly indicate if your claim is corrected to help us avoid denying your claim as a duplicate in error. Avoid unnecessary delays— if a handwritten correction is made, please initial and date your changes.

**REMINDER:  
BILLING PRACTICES**

In their contract with Neighborhood Health Plan of Rhode Island, practitioners accept the Neighborhood fee schedule, and therefore cannot bill or balance bill members. Other than allowable copayments or deductibles, in no event can the practitioner bill, charge or have any recourse against Neighborhood members for services provided by the practitioner under their agreement with Neighborhood.

Our practitioners, their staff and billing subcontractors may contact Neighborhood's Customer Service Department at **1-401-459-6020** with billing issues.

Neighborhood's Customer Service Department is also available to assist with member education and outreach to ensure that our members' and providers' needs are being met.



**Neighborhood  
News**

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# A Summary of Changes to RI Department of Health Rules and Regulations for the Utilization Review of Health Care Services

Neighborhood's utilization, or medical review activities, have aligned with the rules and regulations set forth by the Department of Health (DOH). In February of this year, a new version was released, and the following grid outlines some of the key changes for you to be aware of, as well as information on how the change may affect you.

DOH CHANGE EFFECTIVE 3-15-07	WHAT YOU CAN EXPECT
Physician Reviewers are no longer required to have "peer-to-peer" conversation/attempt prior to making adverse determination decisions.	Our Medical Review nurse notifies the attending practitioner of the decision and provides contact information should the practitioner wish to initiate contact with the Neighborhood physician reviewer.
Review decision timeline for prospective, nonurgent services, has been expanded to 15 calendar days from receipt of the request.	Previous time frame was seven business days. Medical Management (MM) staff will continue to process requests expeditiously to avoid service delays.
DOH now allows an extension of 15 additional days, on both prospective and retrospective review decisions, if additional information required.	Extensions only used by MM staff to allow additional time to collect information that may result in a positive decision outcome for the member.
The timeline for appeal decisions has changed. All appeal decisions now due within 15 business days of receipt of the appeal request.	Medical Management (MM) staff will continue to process requests expeditiously to avoid service delays.
The "peer-to-peer" conversation between the Physician Reviewer and ordering practitioner is now required prior to an appeal decision.	Our Physician Reviewer will make reasonable attempts to contact the ordering practitioner prior to the appeal decision.
Medical Review nurses may conduct "patient interviews" in accordance with specific requirements set forth in the rules and regulations.	Neighborhood Medical Review nurses who review on-site at hospitals may use the patient interview for complicated discharge planning.
Members have the right to notify DOH with "complaints" regarding the outcome of an appeal.	Our denial and appeal notification letters have been modified to include this important information.