



Neighborhood News

A Newsletter for Neighborhood Health Plan of Rhode Island's
Practitioner and Provider Community

WINTER 2008

PROVIDER NEWS

Recruiting Latinos for Depression Care Study— How PCPs Can Help

Neighborhood Health Plan of Rhode Island received a Robert Wood Johnson Foundation *Finding Answers: Disparities for Change* grant to evaluate the effectiveness of telephone-based, culturally sensitive, depression care management for Latino primary care patients.

The recruitment phase began in Q2 2007, and we are facing some recruitment challenges, the most common being disconnected phone numbers. We are reaching out to our PCP provider community to encourage them to refer patients to the study who meet eligibility criteria. Participation in the study allows the member to benefit from close monitoring with improved health outcomes. In addition, the study participants will receive \$125.00 in incentive payments.

Neighborhood's commitment to eliminating health disparities among our racially and ethnically diverse membership led us to look at our own member data. "We found that our data was consistent with national trends—Latinos who receive a diagnosis of depression almost immediately begin to have gaps in care as compared to whites," said Beth Marootian, Principle Investigator for Neighborhood. When we learned about this research opportunity, we joined forces with Beacon Health Strategies and Butler Hospital to create the core team needed to conduct this 18-month clinical study. The purpose of the study is to evaluate whether a bilingual, bicultural

Depression Care Manager can help reduce depressive symptoms, increase general functioning, improve treatment satisfaction and increase medication adherence in the patients they are outreaching to.

The study involves a randomized clinical trial in which depressed adult (over the age of 18 years), Latino members of Neighborhood are treated with one of two methods:

- Treatment as usual. Patients in the trial must have an antidepressant prescription from their PCP, and they cannot be currently receiving behavioral health services.
- A telephone-based program called Depression Health Enhancement for Latino Patients (D-HELP), in addition to treatment as usual. For those who

are assigned to the D-HELP group, a bilingual Depression Care Manager (DCM) will make eight calls to recipients over a 12-week period. During these phone calls, DCMs will:

- Collect information about symptoms of depression
 - Assess adherence to antidepressant medication prescriptions and other concerns about medication use
 - Discuss the patient's next follow-up appointment with their PCP
 - Discuss with the patient how to decrease any barriers to adherence or attending PCP follow-up appointments
- The DCMs provide written feedback to PCPs once a month, or more often if medically necessary. DCMs also participate in weekly psychiatric supervisory meetings to discuss all cases. ●

Call today to learn more about D-HELP and the referral process! Please contact Diane Giarrusso, LICSW, at **1-401-459-6636** or **dgiarrusso@nhpri.org**.

Inside this Issue:

HEDIS AND CAHPS®: PERFORMANCE MEASUREMENT MEANS CONTINUOUS IMPROVEMENT IN SERVICE TO MEMBERS page 2 • **QUALITY MATTERS: IMPROVING QUALITY FOR ALL** page 3 • **ANNUAL EYE EXAMS STRONGLY RECOMMENDED FOR DIABETIC MEMBERS** page 4 • **NEIGHBORHOOD'S 'CONTROL FOR LIFE' DIABETES DISEASE MANAGEMENT PROGRAM** page 5 • **MEMBER RIGHTS AND RESPONSIBILITIES** page 6 • **CONGRATULATIONS! CULTURAL COMPETENCY ACKNOWLEDGMENTS** page 7 • **NATIONAL PROVIDER IDENTIFICATION UPDATE** page 8

FIND US ONLINE AT: WWW.NHPRI.ORG



Mack Johnston, M.D.
Chief Medical Officer

PROVIDER NEWS

HEDIS® and CAHPS®: Performance Measurement Means Continuous Improvement in Service to Members

Neighborhood uses several tools to measure our, and our providers', performance serving members. Similarly, our accrediting body, National Committee for Quality Assurance (NCQA), uses HEDIS and CAHPS® as a means of measuring the performance of health plans. The discussion below summarizes our recent performance, learning and plans for further improvement in the future.

HEDIS

HEDIS measures performance on clinical measures and drives continuous program improvement for our members and providers. HEDIS 2007 results included:

- Continued strong performance in "Effectiveness of Care" measures. Measures that exceeded the 90th percentile include the following: "Adolescent Immunization—Combo 2," "Cervical Cancer Screening" and "Follow-up After Hospitalization for Mental Illness" (within both 7 and 30 days).
- New improvements were seen in: "Frequency of Ongoing Prenatal Care" (increased into the 75th percentile), "Postpartum Care" (increased into the 75th percentile) and "Use of Appropriate Medications for People with Asthma" (increased into the 90th percentile).

These results reflect hard and programmatic work, built on past lessons. In the behavioral health world, strong success in "Follow-up After Hospitalization for Mental Illness" reflects Beacon's policy of an Aftercare Coordinator making reminder calls of scheduled appointments, as well as contacting providers to confirm that the appointment was kept. "Performance for Use of Appropriate Medications for People with Asthma" reflects not only focus on treatment

guidelines and provider information, but other asthma-focused work: spirometers and disposable kits distributed to selected sites, asthma camp for children ages 9-12 and work developing a network of Certified Asthma Educators.

CAHPS®

CAHPS® is the primary tool to assess member satisfaction. Results from CAHPS® help identify areas of member dissatisfaction and opportunities for improvement. Highlights of this year's performance:

- Neighborhood's "Rating of Health Plan" remains well above the 2007 Quality Compass Medicaid 90th percentile for the fourth consecutive year.
- "How Well Doctors Communicate" and "Rating of Personal Doctor" remained in the 75th percentile.
- "Rating of Specialist Seen Most Often" improved from below the 10th to the 50th percentile.
- Member satisfaction with Neighborhood's Customer Service remains extremely high, in the 90th percentile, compared to our survey vendor's Medicaid Book of Business (The Myers Group).
- The three new composite measures, "Shared Decision Making," "Health Promotion and Education" and "Coordination of Care," all rank in our survey vendor's Book of Business 25th percentile and require improvement.

Although CAHPS® had made several changes to the survey instrument, high member satisfaction levels persisted in key areas. Our performance recognizes the great work in the provider community, as reflected in the continued, high member satisfaction levels with physician communication and rating of personal doctor.

HEDIS AND CAHPS® WILL DRIVE FUTURE WORK

HEDIS and CAHPS® results are reviewed internally and by our stakeholder committees, the Clinical Affairs Committee and the Member Satisfaction Workgroup. From this study come program improvements for the future.

- We have identified the need to develop disease-specific data registries in order to proactively identify and target members lacking key milestones in disease management and preventive care.
- Access to routine, urgent and specialty care were identified as particular areas needing improvement, especially in the Hispanic community. In response, we will be conducting a focus group of Hispanic members to determine their current access patterns and barriers to access, and will solicit targeted suggestions for improvement.
- Another area identified as an opportunity for improvement is the new area introduced in the 2007 CAHPS® survey of "Health Promotion and Education." We will be approaching providers to solicit current educational activities involving patients, to identify barriers to effectively communicating health promotion ideas with patients and to define key strategies to engage members in their health care in the future.

We are very proud of the performance our providers and programs have brought to members. Beyond the excellent performance, we have the commitment to continuous learning and improvement. HEDIS and CAHPS® help make that happen. ●

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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

Quality Matters: Improving Quality for All

The purpose of Neighborhood's Quality Improvement Program is to ensure that members have access to high-quality health care services that are safe and responsive to their needs. Activities are organized around routine quality reporting; management of complaints; peer review; specially designed quality improvement studies; and general development, institution and evaluation of quality improvement plans. Our commitment to quality improvement enables us to continuously identify opportunities to improve access, quality and outcomes.

Our program goals include the following:

- Ensure the availability of health promotion and prevention programs and monitoring practices.
- Assure the accessibility of high-quality services.

- Ensure member and provider satisfaction.
- Monitor acute-care activity and assist members in managing their acute conditions.
- Provide chronic-care programs that assist members and practitioners in managing chronic conditions.
- Develop and maintain safety monitoring practices that demonstrate commitment to improving safe clinical practices.

Each year, we establish program priorities and goals, and monitor our progress in achieving those goals. Interventions are implemented where necessary to improve performance. At the conclusion of the year, the overall effectiveness of the program is evaluated. Neighborhood works in partnership with members and affiliated physicians and providers to promote quality. ●

To obtain more information detailing the objectives and progress of quality management initiatives undertaken in 2007, please call Neighborhood at 1-401-459-6000. The 2007 Quality Improvement Program Evaluation will be available upon request in May 2008.



HOW WE MAKE CARE DECISIONS

Medical Management staff decision-making is based solely on appropriateness of care and service, and existence of coverage. Neighborhood Health Plan of Rhode Island does not reward practitioners or any other individuals who perform medical reviews for issuing denials, nor does it use incentives to create barriers to care and service.

SPECIALTY PRACTITIONERS' TERMINATION NOTIFICATION

Neighborhood Health Plan of Rhode Island practitioners are contractually obligated to inform Neighborhood sixty (60) days prior to their effective termination date with a participating primary care site, provider group or the network, to ensure coordination of care for the members cared for by them.

Neighborhood specialty practitioners are responsible for notifying plan members currently under their care in advance of their date of termination.

Annual Eye Exams Strongly Recommended for Diabetic Members

Neighborhood calls out to our network providers and practitioners to assure coordinated care for our members with diabetes. We strongly recommend annual retinal eye exams for members with diabetes, as noted in the *National Diabetes Practice Guidelines*. Annual eye exams for our diabetic members are critical—as is the communication of the exam results to the member's primary care provider to assure comprehensive management and treatment.

Over the past two years, Neighborhood has conducted medical chart reviews to evaluate the communication of retinal eye exams between eye care specialists and primary care physicians for our diabetic members. During November 2007, Neighborhood's chart review nurses visited primary care and eye care specialty offices. The nurses examined the medical records of Neighborhood members known to have diabetes, and who, according to claims data, had an eye exam. The nurses reviewed the records to assure that both

PCPs and eye specialists recorded that the eye exams were performed, by whom, and that consultation reports were present in the medical records and noted as forwarded to the member's PCP. Only 16% of PCP records contained communication or a consultation report from an eye care provider.

Quarterly diabetes reports detailing members' missing diabetic care milestones have traditionally been sent to our primary care physician offices. **Beginning in 2008, Neighborhood also will be informing our eye care specialists of those members who were seen in their office and have diabetes.** The member's primary care physician name will be listed, for a more efficient exchange and communication of their eye exam results to their PCP. Additionally, our enrolled Neighborhood members with diabetes receive reminder letters notifying them of the diabetes care milestones to which they need to pay attention. We appreciate your collaboration with us to ensure that our members with diabetes remain in control. ●

HOW TO SUBMIT AUTHORIZATION REQUESTS

For communications regarding authorization requests and utilization management issues, Neighborhood is accessible to practitioners from 8:30 a.m. to 5 p.m., Monday through Friday.

All requests will be retrieved by the next business day. Authorization will be granted for after-hours urgent requests as long as notification was sent to Neighborhood prior to rendering the service.

Please call **1-401-459-6060** or **1-800-264-3955**. Our fax number is **1-401-459-6023**.

For after-hours requests, please leave a message or fax. These lines are available 24/7.

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



Neighborhood's 'Control for Life' Diabetes Disease Management Program

The goal of Neighborhood Health Plan of Rhode Island's 'Control for Life' program is to enable and empower members with diabetes to live healthier lives, confident in their ability to manage their diabetes. Neighborhood has adopted clinical guidelines from the American Diabetes Association to build a program that provides members with education and reinforcement of the physician's care plan.

Applying HEDIS® criteria, identification is predominantly automatic, using medical and pharmacy claims data. Individuals also may be identified manually, through referrals from our network providers, in-house referrals or member self-referrals. Members are automatically enrolled upon identification. However, participation is optional

and they may opt out at any time by calling Neighborhood.

The members identified for the program receive a welcome letter, along with periodic educational materials that address the diabetes standards of care and self-management. Topics include:

- Nutrition and exercise recommendations
- Foot care basics
- HbA1c test
- LDL-C test
- Nephropathy screening
- Dilated retinal exam
- Flu vaccine
- Pneumonia shot

Each identified member also receives an annual general knowledge test to gauge

their progress in managing their diabetes and is encouraged to bring their results to their practitioner.

Members at higher risk will be scheduled for telephonic outreach by Neighborhood's Certified Diabetes Educator/Disease Manager. During this time, barriers to managing diabetes will be addressed one-on-one.

Neighborhood provides our physicians with actionable information derived from health plan claims and pharmacy data to support improved patient outcomes. Quarterly reports are sent to selected primary care sites to inform them of the diabetes milestones that Neighborhood monitors, and whether or not each was achieved by the member. ●

For questions about Neighborhood's 'Control for Life' program, or if you would like to refer a Neighborhood member to the program, please call **1-401-459-6127**.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA)

NEW PHARMACY EDIT FOR CATEGORY X DRUGS

In September, Neighborhood implemented a new Point-of-Service Pharmacy edit intended to help prevent the unintended use of Category X drugs in patients who might be pregnant. Category X drugs are those medications for which there is evidence of significant fetal risk, based on human experience. Use of Category X drugs is absolutely contraindicated in pregnancy.

The new edit works by flagging any prescription as a Category X drug when the patient's medication-claims history identifies any prenatal vitamin dispensed within the previous three months. Once the prescription is flagged, it only can be processed after the pharmacist has determined that the patient is not pregnant, or when the ordering provider has determined that the use of the drug is warranted. In either case, the pharmacist will need to call Neighborhood to obtain a Prior

Authorization Override in order to process the claim for the Category X drug.

Neighborhood recognizes the potential for "false-positive" results to occur. However, we feel strongly that the added level of safety is well worth any inconvenience caused by false-positive results.

For questions regarding the new edit, please call **Stephen Davis, M.D., at 1-401-459-6015**.

EXAMPLES OF CATEGORY X DRUGS

- | | |
|---|-------------------------------|
| Acitretin (Soriatane®) | Finasteride (Proscar®) |
| Antineoplastics:
e.g., fluorouracil,
methotrexate | Isotretinoin (Accutane®) |
| Benzodiazepines: flurazepam,
temazepam, triazolam | Misoprostol (Cytotec®) |
| Danzol® | Raloxifene (Evista®) |
| Ergotamine | Statins |
| | Thalidomide |
| | Tretinoin (including topical) |
| | Warfarin (Coumadin®) |

Member Rights and Responsibilities

We support the rights of members of Neighborhood and want them to receive high quality care and service. Please be aware of members' rights and assist them with their responsibilities.

RIGHTS OF A MEMBER

- The right to receive information about Neighborhood; its services, practitioners and providers; and members' rights and responsibilities.
- The right to be treated with respect and recognition of their dignity and right to privacy.
- The right to participate with practitioners in decision-making regarding their health care.
- The right to privacy of all records and communications to the extent required by law. (Neighborhood employees follow a strict confidentiality policy regarding all member information.)
- The right to respectful, personal attention without regard to their race, national origin, gender, age, sexual orientation, religious affiliation or preexisting conditions.
- The right to obtain a second medical opinion for medical and surgical concerns.
- The right to a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- The right to voice complaints or appeals about Neighborhood or the care provided by its practitioners.
- The right to make recommendations about Neighborhood's Member Rights and Responsibilities policies.

RESPONSIBILITIES OF A MEMBER

When members enroll with Neighborhood, they agree to the following:

- To choose a PCP and primary care site. Their PCP will coordinate all of their medical care. They may change their

PCP at any time by calling Customer Service at **1-800-459-6019**.

- To have all of their medical care provided by a Neighborhood participating doctor.
- To carry their Neighborhood Identification Card with them and show it whenever they seek medical care.
- To provide, to the extent possible, information that Neighborhood and its practitioners and providers need to care for them.
- To learn about their health problems and help plan treatment they and their PCP agree on.
- To follow the plans and instructions for care that they have agreed on with their practitioners.
- To talk with their PCP about all specialty care. If they need a specialist, their PCP will work with them to make sure they get quality care.

- To call their PCP first for help if they have an urgent medical condition. If an emergency is life-threatening, they should immediately go to the nearest emergency room or call 911. They (or a friend or relative) should contact their PCP the next day.
- To let Neighborhood know about changes to their name, home address, telephone number, marital status, number of dependents or if they have other insurance coverage. ●

Questions? Feel free to call Customer Service at 1-800-459-6019.



CITIZENSHIP AND IDENTITY: REMINDING PATIENTS TO GATHER DOCUMENTATION

Federal law now requires U.S. Citizens who apply for, or receive, Rite Care, Rite Share or Medical Assistance (except those receiving SSI or Medicare) to show proof of their citizenship and identity.

Because obtaining these documents may take several weeks, please remind your patients at each visit.

Rite Care members who are age 16 or older need:

U.S. passport or Certificate of Naturalization

OR

Birth certificate *and* either a driver's license, state photo ID card or school photo ID

Rite Care members younger than age 16 need:

U.S. passport or Certificate of Naturalization

OR

Birth certificate *and* either a parent's signature on application, attestation form verifying identity for children younger than 16 or school photo ID

For more information, go to:

www.nhpri.org

www.dhs.ri.gov/dhs/whatnew/fed_citiz_req.htm

Neighborhood Values Our Patient-Practitioner Relationship

Neighborhood Health Plan of Rhode Island (NHPRI) recognizes the importance of our members' established relationships with both participating and nonparticipating practitioners. Neighborhood will, on a case-by-case basis, authorize services to preserve an ongoing clinical relationship with a nonparticipating practitioner or recently terminated practitioner to preserve continuity of care for reasons including, but not limited to:

- Neighborhood members currently receiving treatment for an acute medical condition or an acute episode of a chronic illness
- Neighborhood members currently in their second or third trimester of pregnancy
- children with special health care needs who are unable to be transitioned to a practitioner with comparable or greater expertise.

Please contact the Medical Management Department at 1-401-459-6060 to request authorization for the provision of services to Neighborhood members who you believe would qualify. Or complete the Continuity of Care Request Form, which may be found in Section 12 of the Provider Manual at www.nhpri.org. ●



2007 MEDICAL RECORD DOCUMENTATION STUDY

Medical Record

Documentation standards ensure high-quality care and safe and effective treatment. Neighborhood assesses primary care practitioners' compliancy with selected medical record documentation standards annually. The 2007 analysis of chart review based on six elements indicates that results exceeded performance goals. Site-specific letters were mailed to practitioners included in the study.

The standards are accessible to practitioners in the *Provider Manual* on our website, www.nhpri.org.

CLINICAL PRACTICE GUIDELINES UPDATE

We have updated the Judicious Use of Antibiotics for Pediatric Upper Respiratory Infections Clinical Practice Guidelines. To access these guidelines, go to our website and click on "For Providers," then "Clinical Programs." Paper copies of all guidelines also are available upon request.

Access to Neighborhood's guidelines on clinical practice, prenatal care, and preventive care also are available through our website, www.nhpri.org. Contact Cesarina Elias at 1-401-459-6087 for more information.

CLINICAL MEDICAL POLICIES

The Medical Review staff of the Medical Management Department utilizes clinical medical policies (CMPs) to guide decisions regarding Neighborhood's Conditional Benefits.

Through collaboration with Neighborhood's Associate Medical Director and our specialty consultants, the policies are developed and/or revised following thorough review of current medical literature and standards of practice. To the extent possible, Neighborhood's CMPs are developed according to evidence-based outcomes.

To view one of Neighborhood's approved CMPs, please go to www.nhpri.org for Providers, Clinical Programs or Clinical Medical Policies.

FRAUD AND ABUSE

As part of the Neighborhood Fraud and Abuse Initiative, we continue to use the Virtual Examiner® 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 these errors. For those claims that do not meet CMS-mandated coding standards, Neighborhood will deny, adjust or retract payments. For questions about your claims, please contact Customer Service at **1-800-459-6019**.



National Provider Identification (NPI) Update

Please contact Customer Service at **1-800-459-6019** to ensure your electronic submissions will be accepted and to confirm Neighborhood's receipt of your NPI. Continue to use your legacy provider and vendor numbers along with NPI numbers until your office is able to confirm Neighborhood's receipt of your NPI information.

Providers who submit claims on paper also should use NPI numbers in addition to the legacy provider and vendor numbers until further notice. ●

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 MAIL TO:

Tracy Scates
Provider Services Specialist
Neighborhood Health Plan of Rhode Island
299 Promenade Street
Providence, RI 02908

OR

FAX to 1-401-459-6066

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

BY E-MAIL AT:

customerservice@NPIenumerator.com

OR ONLINE:

<https://nppes.cms.hhs.gov>

OR BY TELEPHONE AT:

1-800-465-3203

OR BY MAIL AT:

NPI ENUMERATOR

P.O. BOX 6059

FARGO, ND 58108-6059

If you have any questions related to our credentialing requirements, or the status of your credentialing/re-credentialing application, please feel free to contact us at **1-800-459-6019**.



Neighborhood News

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