

WINTER 2005

PROVIDER NEWS

Screening Adult Patients for Depression

One in five women and one in 10 men will have depression at some point in their lives. But since many patients miss out on treatment for depression, Neighborhood Health Plan of Rhode Island (NHPRI) and its behavioral health partner, Beacon Health Strategies, are asking primary care providers to screen adult members for depression each year.

"In 2002, the United States Preventive Services Task Force recommended that primary care providers screen adults for depression," said Loren Sidman, RN, Supervisor of Behavioral Health at NHPRI. "Our goal is to have providers conduct yearly screenings. By identifying patients with depression earlier, we know we can improve their outcomes."

UNDERSTANDING DEPRESSION IN PRIMARY CARE

Research has shown that:

- Patients with undiagnosed depression make more frequent office visits for other complaints.
- About 40 percent to 70 percent of patients with chronic medical conditions, such as pain or diabetes, also have depression.
- Patients with medical conditions as well as untreated depression aren't as likely to follow treatment recommendations. They also may not keep appointments.

BEGIN WITH TWO QUICK QUESTIONS

To identify patients in need of treatment, NHPRI suggests that providers perform

a quick, two-question depression screen.

Providers should ask the following:

- 1 "Over the past two weeks, have you felt down, depressed or hopeless?"
- 2 "Have you had little interest or pleasure in doing things?"

If patients answer "yes" to either question, they might have depression.

A more in-depth screening tool can follow, particularly if providers plan to treat the patient themselves. Sidman recommends the Patient Health Questionnaire (PHQ-9), a nine-symptom checklist. Besides providing useful information to help guide treatment, the PHQ-9 can monitor the patient's response to treatment.

"Providers have a lot of flexibility in conducting the screenings," said Sidman. For example, the two questions can be posted in the office or added to standard visit documentation. Or a nurse can ask the questions while taking the patient's blood pressure. "Providers can choose the method that fits their own style, preference and patient population," Sidman said. ●



FOR MORE INFORMATION...

NHPRI and Beacon are committed to helping providers screen for depression. To receive depression-screening posters or to obtain copies of the screening tools, please call John Colburn, PhD, Beacon Account Manager at NHPRI, at (401) 459-6632. For referrals, contact Beacon at 1-800-215-0058.

On the Inside:

NHPRI VALUES OUR PATIENT-PRACTITIONER RELATIONSHIP *page 2*

- IMPROVEMENT IN DIABETES CARE *page 3* • 2004 PHARMACY CHANGES *page 4* • MEMBER RIGHTS AND RESPONSIBILITIES *page 5* • 2004 BENEFITS UPDATE *page 6* • GROWING YOUR PRACTICE — OPEN ACCESS *page 7* • QUALITY CARE COUNTS IN YOUR NEIGHBORHOOD *page 8*

FIND US ONLINE AT: WWW.NHPRI.ORG

NHPRI 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. NHPRI 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:

- NHPRI members currently receiving treatment for an acute medical condition or an acute episode of a chronic illness
- NHPRI 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 CARE MANAGEMENT DEPARTMENT AT (401) 459-6060 TO REQUEST AUTHORIZATION FOR THE PROVISION OF SERVICES TO NHPRI MEMBERS THAT 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.

Goodbye for Now

Renee B. Rulin, MD, MPH Chief Medical Officer

As many of you know, I will be leaving Neighborhood Health Plan of Rhode Island (NHPRI) on February 1, 2005. I feel privileged to have worked with the medical community, NHPRI and other local leaders to establish our national model for health care justice—RItE Care. Together, over the past 10 years, we have created a program that is strong, resilient and successful. The improvements in quality of care and the cost savings are well documented and directly impact nearly one-third of all children in Rhode Island.



What is not documented is the remarkable commitment and focus of NHPRI's leadership and staff. They are devoted to the mission of improving access and health for people in need, and continue to inspire

me with their creativity and passion. That creativity has powered NHPRI's growth in membership, net worth, scope and ability over the past 10 years. And it is what will drive NHPRI to even greater accomplishments over the next 10 years.

My decision to move on is a personal one, driven by my own desire to try something new and see what else I can accomplish professionally. From now through the end of January, I will focus on wrapping up my work here and facilitating a smooth transition. To that end, L. McIntyre (Mack) Johnston, MD, NHPRI's associate medical director, will take over my QI, Program and Care Management responsibilities. You can reach him at mjohnston@nhpri.org.

Thank you again for your strong partnership with NHPRI, steadfast support of me and responsive care for our members. I am proud to have served with you, and will always hold the people, mission and vitality of NHPRI in my heart. ●



Improvement in Diabetes Care



Neighborhood Health Plan of Rhode Island's (NHPRI) Diabetes Program is based on the 2004 guidelines written by the American Diabetes Association; our program works with practitioners and members to improve adherence to these guidelines. Additionally, NHPRI has worked to expand members' access and resources for nutrition support.

HEDIS PERFORMANCE ON DIABETES MILESTONES

NHPRI tracks performance of key measures associated with diabetes control. Our recent Health Plan Employer Data and Information Set (HEDIS®) scores found opportunities for improvement in hemoglobin A1c control and lipid control.

NHPRI Guidelines for Diabetes Care recommend an A1c test be performed two to four times a year in all patients with diabetes, with a management goal of normal or near-normal glyceemic control (A1c <7%).

- The most recent HEDIS results show that 86 percent of members with diabetes are getting at least one A1c test in a year, although only 53 percent are getting two or more.
- However, 40 percent of tested members with diabetes have "poor glyceemic control," with A1c levels of >9%. *NHPRI Guidelines recommend a test for lipid disorders at least annually, and more often if needed to achieve the goal of LDL <100 mg/dl.*
- HEDIS results show that 82 percent of members with diabetes had a lipid

profile performed during 2003.

- Only 29 percent of those tested had the recommended LDL level <100mg/dl and 47 percent had an LDL level greater than 130 mg/dl.

NHPRI BENEFITS FOR NUTRITION COUNSELING

Nutrition counseling is a cornerstone in the management of diabetes, lipid disorders and obesity. The NHPRI nutrition benefits are as follows:

- Individualized medical nutrition therapy (MNT) is recommended by *NHPRI Guidelines for Diabetes Care* and is a covered benefit for all patients with diabetes as needed to achieve treatment goals. No prior authorization is required.
- Nutrition counseling by a licensed dietitian, in either a group or individual setting, is a covered benefit for NHPRI members with medical conditions other than diabetes (e.g., total cholesterol >240, cardiovascular disease, abnormal glucose tolerance or "prediabetes") and for members of any age with BMI indicating overweight/obese (for adults, BMI >26). No prior authorization is required.
- Weight Management Programs and medications are a covered benefit with prior authorization when medical necessity guidelines are met. The practitioner must submit the NHPRI Request for Weight Management Programs form, which may be obtained by calling (401) 459-6060. ●

THE NHPRI DIABETES PROGRAM WANTS TO ASSIST PRACTITIONERS IN MANAGEMENT OF NHPRI MEMBERS WITH DIABETES OR WITH RISKS FOR DIABETES. *THE NHPRI GUIDELINES FOR DIABETES CARE ARE AVAILABLE ON THE NHPRI WEBSITE, WWW.NHPRI.ORG, OR BY CALLING (401) 459-6127. PROVIDERS ALSO MAY CALL TO OBTAIN A CURRENT LIST OF REGISTERED DIETITIANS AND/OR CERTIFIED DIABETES EDUCATORS IN THE NHPRI PROVIDER NETWORK.*

PROVIDER NEWS

Winter 2005 Pharmacy Changes Approved by NHPRI's Pharmacy and Therapeutics Committee—As Of January 5, 2005

MEDICATIONS MODIFIED OR ADDED	COMMENTS
Accupril	There will be no restrictions on this product.
Adderall XR	Previous AGE EDIT removed.
Concerta	Previous AGE EDIT removed. QUANTITY LIMIT of 60 tablets per 30 days will be allowable for the 36mg strength.
Crestor	Prior authorization required. Please call (401) 459-6688 .
Lofibra	There will be no restrictions on this product.
Metadate CD	Previous AGE EDIT removed.
Miralax	Previous STEP THERAPY EDIT removed.
Omnicef 250mg/5mL Suspension	There will be no restrictions on this product.
Paxil CR	Not covered for ages <18. New STEP THERAPY EDIT. Prior trial of citalopram, fluoxetine, or paroxetine IR (Not covered for ages <18) in the past 90 days required.
Ritalin LA	Previous AGE EDIT removed.
Singulair	Covered for asthma only. Previous Step Therapy Edit increased to look back 6 months for asthma medications. Oral corticosteroids will not be qualifiers.
Spiriva	There will be no restrictions on this product.
Strattera	Previous STEP THERAPY EDIT and AGE EDIT removed.
Tricor	There will be no restrictions on this product.
Viagra	Quantity limit of four tablets per month.
Vytorin	There will be no restrictions on this product.
Xolair	Prior authorization required. Please call (401) 459-6688 .
Zoloft	New STEP THERAPY EDIT. Prior trial of citalopram, fluoxetine, or paroxetine IR (Not covered for ages <18) in the past 90 days required.

GET THE INFORMATION YOU NEED!

Clinical practice guidelines and member education materials are now available on our website at www.nhpri.org.

Paper copies of Neighborhood Health Plan of Rhode Island's clinical practice guidelines are available upon request. You can find information about:

- asthma
- diabetes
- birth control
- member rights and responsibilities
- depression screening.



continued on page 5

PROVIDER NEWS

Winter 2005 Pharmacy Changes Approved by NHPRI's Pharmacy and Therapeutics Committee—As Of January 5, 2005

continued from page 4

MEDICATIONS REMOVED	PREFERRED MEDICATIONS
Bactroban 2% Cream and 2% Nasal Ointment	Mupirocin 2% Ointment
Bextra	Generic NSAIDs
Celebrex	Generic NSAIDs
Lexapro	Formulary SSRIs: citalopram, fluoxetine, or paroxetine IR (Not covered for ages <18)
Lifescan (One Touch) diabetic supplies	Roche's (Accu-Chek) diabetic supplies
Lunelle	Formulary hormonal contraceptives including Depo-Provera and Ortho Evra
Prenatal Vitamins: Materna, Natafort, Natalvit, Obstetrix-100, Prenatal Combopak, Prenate 90, Prenate Ultra, Stuart Natal plus 3, Precare Prenatal Caplet, Strongstart, Stuart Natal Plus	Cal-Nate, Nutrinatate, Natatab, Ultra Natalcare, Natalcare Plus, Prenatal RX, Advanced Natal Care, Vinate GT, Premensis RX
Preven	Plan B
Vioxx	Generic NSAIDs
MISCELLANEOUS	
Generics are mandatory.	
Infertility medications are not covered for RIte Care.	
Medications used cosmetically are not covered.	
Formulary OTCs covered for RIte Care.	
Does your patient need an extra asthma inhaler for school or day care? If so, please call the Pharmacy Help Desk at (401) 459-6688 for a pharmacy authorization.	
Prescriptions written for amphetamine sulfate, dextro amphetamine sulfate, methamphetamine hydrochloride, methylphenidate and amphetamine mixtures, may be written for up to a sixty- (60-) day supply with a maximum of two hundred fifty (250) dosage units, as determined by the prescriber's directions for use of the medication.	



For our complete e-Formulary, please visit www.nhpri.org.

Member Rights and Responsibilities

We support member rights as required by the National Committee for Quality Assurance (NCQA). NHPRI promises to work with its primary care providers and other health care professionals to give members the highest quality health care services.

Please read the following rights and responsibilities carefully.

MEMBER RIGHTS

- Members have the right to receive information about NHPRI, its services, practitioners and providers, and members' rights and responsibilities.
- Members have the right to be treated with respect and recognition of their dignity and right to privacy.
- Members have the right to participate with their practitioners in decision making regarding their health care.
- Members have the right to privacy of all records and communications to the extent required by law. (NHPRI employees follow a strict confidentiality policy regarding all member information.)
- Members have the right to respectful, personal attention without regard to their race, national origin, gender, age, sexual orientation, religious affiliation or preexisting conditions.
- Members have the right to obtain a second medical opinion for medical and surgical problems. Members should always get a referral from their primary care practitioner (PCP) for a second opinion.
- Members have the right to a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- Members have the right to voice complaints or appeals about NHPRI or the



care provided by its providers.

- Members have the right to make recommendations about NHPRI's Member Rights and Responsibilities policies.

If you have any questions, call Member Services at 1-800-459-6019.

MEMBER RESPONSIBILITIES

When members enroll with NHPRI, they agree to:

- Choose a PCP and primary care site. Their PCP will coordinate all of their medical care. Members may change their PCP at any time by calling Member Services at **1-800-459-6019**.
- Have all of their medical care provided by or arranged by an NHPRI participating doctor.
- Carry their NHPRI identification card with them at all times. Members should show this identification card whenever they seek medical care.
- Provide, to the extent possible, information that NHPRI and its practitioners and providers need to

care for them.

- Learn about their health problems and help plan treatment they and their PCP agree on.
 - Follow the plans and instructions for care that they have agreed on with their practitioners and providers.
 - Talk with their PCP about all specialty care. If a member needs a specialist, their PCP will work with them to make sure they get quality care.
 - Call their PCP first for help if they have an urgent medical condition. If an emergency is life threatening, members should go immediately to the nearest hospital for care. The member or a friend or relative should contact their PCP the next day.
- Members should let NHPRI know about changes to their name, home address, telephone number, marital status, number of dependents, or if they have other insurance coverage.***

If you have any questions, call Member Services at 1-800-459-6019.

2004 Benefits Update

Neighborhood Health Plan of Rhode Island (NHPRI) has recently reviewed vision services and would like to clarify the various benefits and limitations for RIte Care members receiving vision care.

BENEFIT	MEMBERS AGES 0 TO 21	MEMBERS AGE 21 AND OLDER
Routine Eye Exam	Covered as medically necessary with no limits.	One routine eye exam every <u>two</u> years
Eyeglasses	Covered as medically necessary with no limits.	One pair of eyeglasses every <u>two</u> years
Contact Lenses	Contact lenses covered when medical necessity guidelines are met. Prior authorization required.	Contact lenses covered when medical necessity guidelines are met. Prior authorization required.
Cosmetic Corrective Eye Surgeries	Cosmetic corrective eye surgeries are not covered.	Cosmetic corrective eye surgeries are not covered.
Special Frames	<ul style="list-style-type: none"> • Polycarbonate lenses are covered. • Other special frames and lenses covered when medical necessity guidelines are met. Prior authorization required. 	Special frames and lenses, including Polycarbonate, covered when medical necessity guidelines are met. Prior authorization required.
Noncovered Services	Noncovered services include: Tinted lenses, antireflective lenses, UV lenses, eyeglass cases, scratch-resistant coatings, mirror coatings.	Noncovered services include: Tinted lenses, antireflective lenses, UV lenses, eyeglass cases, scratch-resistant coatings, mirror coatings.

All other medically necessary treatment for illness or injury to the eye is covered, including but not limited to, eye exams for people with diabetes. If you have any questions regarding these changes, please contact the NHPRI Provider Relations Department at **(401) 459-6030**.

NHPRI's updated benefits grid is now available on our website at www.nhpri.org! It is located in the "Provider" section under "eligibility/benefits/referrals."

CLAIMS CORNER: DID YOU KNOW?

- 1)** Practitioners can submit claims electronically to Neighborhood Health Plan of Rhode Island (NHPRI). Contact your Provider Relations representative to learn more!
- 2)** CPT code 81002 (urinalysis) is part of the OB Global reimbursement. Additional monies are not paid when billed separately.
- 3)** NHPRI does not reimburse separately for the administration code (injection) when a vaccine or immunization is administered as part of the Evaluation and Management office visit. However, if the patient must return for the injection, bill for the service with procedure code 99211.
- 4)** It is necessary to submit the primary and most accurate diagnosis in the first and second fields on the billing submission form.

Please contact the Claims Department at **(401) 459-6000** with any questions you may have. Thanks!

Quality Management Program Helps Our Members Get Great Care

The goal of the Quality Management Program is to assure that Neighborhood Health Plan of Rhode Island's (NHPRI) members have access to high quality, safe health care services responsive to their needs. Activities are organized around routine quality reporting, management of complaints, peer review, specially designed quality studies and general development,

institution and evaluation of quality improvement plans.

ORGANIZATIONAL STRUCTURE

The NHPRI Quality Management Program is a systematic approach to the assessment and improvement of the Plan's services. Under the direction of the Board of Directors of NHPRI, the Office of the Chief Medical Officer is responsible for administering the various quality activities that comprise the Quality Management Program.

PROGRAM FUNCTIONS

- Provide the organization with an annual Quality Management Program Description, Quality Management Work Plan and Quality Management Annual Evaluation.
- Coordinate the collection, analysis and reporting of the data used in monitoring and evaluating care, including quality, utilization, credentialing and member service functions delegated to associated organizations.
- Identify opportunities to improve care and develop quality improvement interventions.
- Identify and address instances of substandard care.
- Track the implementation of quality improvement interventions.
- Evaluate its effectiveness at improving care and services.
- Ensure that all potential breaches in patient safety are investigated and acted upon.



GROWING YOUR PRACTICE— OPEN ACCESS

Open Access is a method for assuring patients an appointment with the provider of choice at a date and time the patient chooses. Most often, the health care group operationalizes this by offering an appointment today, for any problem, with a patient's primary care provider or a teammate. Schedules are not held, patients are not told to call back and space is available each day to meet the predicted demand for care.

If your practice is interested in a special Open Access pilot opportunity or would like to learn more, please contact Alison Croke, Senior Project Manager, at (401) 459-6171 or acroke@nhpri.org.

TO OBTAIN MORE INFORMATION DETAILING THE OBJECTIVES AND PROGRESS OF QUALITY MANAGEMENT INITIATIVES UNDERTAKEN IN 2004, PLEASE CALL US AT (401) 459-6000. THE 2004 QUALITY MANAGEMENT PROGRAM ANNUAL EVALUATION ALSO WILL BE AVAILABLE UPON REQUEST IN MAY 2005.

NHPRI PROVIDER BRIEFS

Neighborhood Health Plan of Rhode Island (NHPRI) has a special concern regarding underutilization. Decision-making by NHPRI's care management staff is based solely upon the appropriateness of care and services. Further, NHPRI does not compensate practitioners or individuals conducting medical review for denials of coverage or service, nor does NHPRI offer incentives of any kind to reviewers to encourage denial.

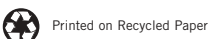
FOR MORE INFORMATION...

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



Neighborhood News

Neighborhood News is published by Neighborhood Health Plan of Rhode Island for its network practitioners. The information is intended to update and educate practitioners and staff on relevant topics and, in turn, help improve access, health and systems in Rhode Island. © 2004. Printed in U.S.A.



Quality Care Counts in Your Neighborhood



We want to help our physicians to provide the best care. That's why we measure quality of services you provide in many ways.

One is through Health Plan Employer Data and Information Set (HEDIS). It was developed by the National Committee for Quality Assurance and helps us track quality down to the doctor level.

We also look at Consumer Assessment

of Health Plans Survey (CAHPS). This data tells us how satisfied patients are with their care.

Results from 2003 show that Neighborhood Health Plan of Rhode Island's (NHPRI) network practitioners continue to provide high quality care. Some of your best services include preventive, as well as chronic, care for diabetes and asthma. ●

BILLING MEMBER AND HOLD HARMLESS PROVISIONS

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