

# PROVIDER NEWSLETTER

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### *Links to additional articles:*

#### Pharmacy Department

**New Recommendations for Adult Immunization**

<http://goo.gl/vPmiZh>

**The current PHC Formularies are available on our website:**

<http://www.partnershiphp.org/Providers/Pharmacy/Pages/Formularies.aspx>

**Updates to the current Formulary:**

<http://goo.gl/ss3Fub>

#### Compliance Department:

**The 2016 HIPAA Audit is coming**

<http://goo.gl/MHGvqb>

**Compliance Issues & Complaints**

<http://goo.gl/m7ie8w>

#### Health Services Department

**Effective Communication for Patients**

<http://goo.gl/3AuMIj>

**Initial Health Assessment for Your New Patients**

<http://goo.gl/fyoGOX>

#### Claims Department

**Important Provider Notices:**

<http://goo.gl/4JcXcf>

**Charting Documentation**

<http://goo.gl/v2dJl0>

#### Quality Department:

**Partnership HealthPlan's Peer Review Process**

<http://phwebsite/Providers/Medi-Cal/Documents/>

**New Information Regarding FluMist for 2016-2017**

<http://goo.gl/OAvZq2>

#### Information Technology

**Provider Online Services, Phase II**

<http://goo.gl/f3hstc>

#### Provider Relations Department

**Interpretive Services Language Line:**

<http://phwebsite/Providers/Medi-Cal/Documents/Provider%20Newsletter/Interpret816.pdf>

**Online Services Redesign Update**

<http://goo.gl/KCCdpE>

## **From the Desk of PHC CEO Liz Gibboney**

### **Continued Investment in Our Providers**

By the end of this summer, we are scheduled to release the second phase of our redesigned Provider Online Services. We recognize that providing care is far different than it was a decade ago; and as part of the redesign we have taken into account the changing environment of health care and worked hard to develop a platform that can support current and future needs of our provider network.

In Phase I of our redesign, we released updated modules for eligibility verification, capitation information, and patients in acute care report. Today, these updated modules are used by over 10,000 users. When released, Phase II will include:

- Advice Nurse Reports
- ER Notification and ER Alert
- eClaims: Claims Search, Check Search, EOP
- eCIF and ReCIF
- Code Look-up
- And more ...

Our vision of our Provider Online Services is to ensure that all of our providers have the tools and information necessary to manage the care of their Partnership patients. These new modules will give providers a larger picture of the overall health needs of each patient. By placing as much information as possible into the hands of our providers, we can provide quality care to the most vulnerable populations in our communities. As we continue to learn and improve, we will look for new opportunities to increase the resources available to our provider network. By working together we will see our members and communities become healthy.

In Partnership,



## Eliminating No-Show Rates

Six years ago, when I was the Medical Director of Ole Health in Napa, we were struggling to regain the productivity we lost after implementation of electronic health records. Our no-show rate was 15-20%, even when we called patients the day before to remind them of their appointment. When a schedule was inadvertently not confirmed the day before, the no-show rate was typically around 50%, showing the importance of this phone confirmation.

The no-show rate at Ole Health rose linearly from about 4% if a patient was told, “Come right in, we can see you right now,” to about 20% for patients who scheduled an appointment 10 days ahead of time, and then leveled off, as shown on this graph:



Based on this information, Ole Health shortened the period between patients calling for appointments and the appointment time offered. One key to doing this is, of course, to have sufficient providers to handle the volume of patients. This philosophy is now embedded in high quality integrated care systems, such as Kaiser.

As a result, no-show rates were reduced to 7-8%, an improvement in both efficiency and financial sustainability. Since then, I have believed that the best possible no-show rate was 5-7%, achievable by a combination of calling and confirming patients and scheduling appointments as close as possible to the time the patient wants the appointment. A zero per-cent no-show rate seemed impossible.

Before telling you about a health center in San Diego that achieved a zero percent no-show rate, I need to share a related story about interpersonal connection that is achievable by phone.

About 8 years ago, Ole Health conducted a telephone satisfaction survey, instead of using a polling machine at the check-out station, or mailing a survey (both have very low response rates). An outside vendor was used on the theory that we would get a non-biased response. We planned and tested the questions we wanted asked, sent them to the Florida-based vendor we selected. We set up their phone system so that caller ID would show Clinic Ole (the previous name for Ole Health), and we gave them a list of patients with recent visits to survey, so the visit memory would be fresh. Just to check on the system, we added our managers’ names to the list of patients, as “secret shoppers.” The secret shoppers were key: they found that the callers from Florida came across as rushed and not very personable, whether they called in English or Spanish.

The response rates were very low; only about 20% of those reached were willing to complete the survey. It turns out that telephone voices and etiquette are somewhat regional. A voice that works well for patients in New York or Florida may not work well for patients in Napa. Ole Health terminated the agreement with the phone survey company and decided to conduct the survey in-house.

After conducting an audition, based on ability to connect to patients by phone, several clinic staff were selected to conduct the surveys in the early evening hours. The response rate was much better; close to 70% of those reached by phone completed the survey. One surveyor, with a particularly engaging phone voice and demeanor, had close to a 90% response rate. When this surveyor conducted appointment confirmations, the no-show rate was 4-5%, far better than average.

Still, this was not a zero percent no-show rate.

### Eliminating No-Show Rates (continued)

Flash forward to the 2016 California Telehealth Network's annual meeting. No-shows are a big deal in telemedicine: a telemedicine unit, exam room, specialist and the coordinator are all planning on helping a particular patient at a particular time. Those resources are wasted if the patient doesn't show up.

Speaker panels describing their telemedicine programs included quotes of no-show rates as high as 60%. This was driven partly by long wait times for an appointment (see data above). Many coordinators compensated for this problem by confirming appointments 3 times, bringing the no-show rate down to the 15% range.

Then a speaker from La Maestra Community Health Center in San Diego told us they had achieved a less than one percent no-show rate for telemedicine. How did they do this?

Here is what is special at La Maestra:

- La Maestra CHC started as a social services organization, so the organizational culture is more relationship-oriented than typical health centers, particularly with non-clinician staff. They value long-term relationships with patients, paying staff well and not considering medical assistants and receptionists as interchangeable or expendable.
- They don't have centralized schedule confirmation; each team confirms their own appointments, so they are calling patients they know personally.
- The tenor of the confirmation call is not just a business-like, "I'm calling to confirm your appointment." There is a little conversation about life events, so the patient knows their team cares about them as an individual.
- The team uses word choice to convey a kind accountability. "You know how important it is to me to see you tomorrow. If you can't make it, I can call another patient to see the doctor. Call me if you are running late or if something unexpected happens and you need to reschedule."

Another key is what I call "gentle scolding" for patients who do not call to cancel regular provider appointments, and instead no-show. They routinely let the patient know that this disappointed the staff and led to another patient not being able to use the time slot. This sets expectation that no-shows are not acceptable, and this crosses over to telemedicine visits. Incidentally, the "gentle scolding technique" is highly associated with the lowest avoidable ED visits.

These techniques can be grouped together and called Patient Engagement. We know patient engagement improves health outcomes, such as smoking cessation and diabetes control. The experience of La Maestra CHC in virtually eliminating no-shows, and supported by the earlier data from Ole Health, demonstrates that there are degrees of patient engagement expertise, and suggests that high performance in Patient Engagement can be taught to front-line staff and built into our office systems.

**What changes can your practice make to achieve this level of engagement?**

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### HEDIS Update

Partnership successfully submitted HEDIS 2016 results to HSAG and DHCS in May. Your continued support and cooperation helped make the project a tremendous success this year. HEDIS 2016 regional performance for calendar year 2015 will be released and posted to our webpage by July 31, 2016.

Please take a moment to review our HEDIS page to identify your region and past performance:

<http://www.partnershiphp.org/Providers/Quality/Pages/HEDISLandingPage.aspx>



## Provider Relations Newsletter

### Important Numbers - Claims Mailing Addresses

<b>Medi-Cal</b>	<b>Partnership Advantage</b>	<b>Healthy Kids</b>	<b>PHC Care Coordination</b>
Attn: Claims Department	Attn: Claims Department	Attn: Claims Department	Asthma, Diabetes, ESRD & Growing Together Perinatal Programs - (707) 863-4276
P.O. Box 1368	P.O. Box 610	P.O. Box 3172	
Suisun City, CA 94585-1368	Suisun City, CA 94585-0610	Suisun City, CA 94585-3172	

### PHC's New Telehealth Services Webpage

Partnership Healthplan of California (PHC) is pleased to announce that our Telehealth Services webpage is officially LIVE on our website. With 21 clinics using video telehealth and 12 clinics using eConsult, PHC's Telehealth Program has shown steady growth and expansion since inception in August, 2014. PHC is committed to helping the communities in which we serve by providing increased access to specialty care for our members via telehealth. We support telehealth because we believe it to be an effective vehicle for increasing access to care for our members, particularly in our remote and rural service areas, and equipping providers with additional ways of delivering care.

Visit the Telehealth Services webpage [HERE](#) or by accessing the PHC website and selecting Providers → Strategic Initiatives → Initiatives: Telehealth Services.

### Member Services

#### Member Satisfaction Survey - The Results Are In!

In the spring of this year, PHC surveyed 10,000 active Medi-Cal members who had been enrolled in PHC for at least 12 months. We are very pleased to report that overall member satisfaction remains high. Satisfaction with the HealthPlan is at 91%, satisfaction with health care is at 85% and satisfaction with the PHC Member Services Department is at 90%.

We at PHC understand and appreciate the critical role that our providers play in helping PHC maintain high satisfaction scores year after year.

#### Don't Forget to Check Eligibility and PCP Assignment

It is not uncommon for PHC members to lose Medi-Cal eligibility or change PCPs. To ensure that providers get reimbursed as appropriate for services provided, PHC would like to remind provider offices to always check eligibility and PCP assignment prior to providing the service. This can be done by using PHC's Online Eligibility System at [www.partnershiphp.org](http://www.partnershiphp.org) or by calling our Integrated Voice Response (IVR) system at 800-557-5471.

#### Protecting Member Confidentiality

Partnership HealthPlan of California places a high value on maintaining our members' confidentiality.

We maintain a Confidentiality Policy to ensure that the medical and/or other personal health information of our members is handled in a confidential manner to avoid unauthorized or inadvertent disclosure of such information.

#### Contact Us:

Partnership HealthPlan of California  
(707) 863-4100 [www.partnershiphp.org](http://www.partnershiphp.org)