



PROVIDER NEWSLETTER

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Links to additional articles:

Pharmacy Department

New Recommendations for Adult Immunization

<http://goo.gl/PZ9cn6>

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/TETtLB>

Health Services Department

Health Education State Requirements for Providers

<http://goo.gl/PTOX30>

Staying Healthy Assessment Helps Patients Stay Healthy:

<http://goo.gl/YmECqk>

Mental Health Benefits Through Beacon

<http://goo.gl/2Rh6MO>

Claims Department

Important Provider Notices:

<http://goo.gl/N7KNgx>

Claims CIFs vs. Appeals:

<http://goo.gl/2Asl4x>

Member Services: Member Rights & Responsibilities:

<http://goo.gl/kFNWNX>

Quality Improvement Department

QI Department Updates:

<http://goo.gl/feFb9q>

Information Technology

Partnership Quality Dashboard (PQD) Early Announcement:

<http://goo.gl/P49Te5>

Provider Relations Department

Interpretive Services Language Line:

<http://goo.gl/9S2QK6>

Substance Use Disorder Preventive Services:

<http://goo.gl/elj75b>

Medical Interpreter Certification Assistance Program

<http://goo.gl/qrMBdi>

Managing your Quest Diagnostics Account

<http://goo.gl/H7ciyX>

From the Desk of PHC CEO Liz Gibboney

It's a marathon, but it feels like a sprint!

This summer we will once again be able to enjoy the remarkable feats performed by athletes at the Rio 2016 Olympics. These individuals have trained for many years in order to perform at the pinnacle of all athletic competitions. During the Track and Field events we will cheer on individuals running the marathon and others running the 100 meter dash. Today, providing quality health care can feel as if we are running a marathon at a sprinter's pace.

Each day we receive more and more health data regarding access, disease management, medications, and so much more. This data is then used to guide new programs, legislation, and best practices. I wanted to take a little time to discuss what we, PHC, are doing to build our endurance to continue sprinting towards providing the highest possible care to all our members.

Provider Directories – Last year the California legislature passed SB 137 (2015), requiring health plans to have an interactive online provider directory. We have already convened an internal workgroup to meet this requirement and in the coming months we will be reaching out to all our contracted providers to begin collecting the necessary information.

Full Scope Medi-Cal for All Children – Over the past few months we have been meeting, or “training”, with a number of community stakeholders, including County Childrens’ Health Initiatives and Kaiser, to discuss the transition and ensure continuation of care for thousands of newly Medi-Cal eligible children in our communities, starting in June.

California Children’s Services (CCS) Redesign – We have been begun meeting with the counties we serve to discuss the transition of providing care for the whole-child, better coordinating their CCS and non-CCS covered services. We anticipate this transition happening early next year.

Drug Medi-Cal Waiver (DMC) – We are working with many counties in our service area to explore an option for PHC to managed substance use disorder funds to provide a comprehensive drug treatment benefit for our members. Eventually, we would like these services to integrate with the “mild-to-moderate” mental health benefit that we currently offer.

Thank you for your assistance in helping us provide the highest quality of care to our members; we are sprinting this marathon together!

Why Are Lawyers Doing More Advance Care Planning Than Physicians?

by Robert Moore, MD MPH

“If end-of-life discussions were an experimental drug, the FDA would approve it.” -Atul Gawande, *Being Mortal: Medicine and What Matters in the End*
These conversations are at the philosophical heart of the professions of medicine, nursing, clinical social work, and other health care professions, yet the medical profession is mostly ignoring advance care planning/goals of care.

While 82% of adult Californians say they want to express their wishes around their care at the end of life documented in writing, only 23% have done so. A majority of this documentation was facilitated by *lawyers* as part of estate planning. Only 7% of adult Californians have spoken with a doctor or non-physician clinician about their wishes. (CHCF, 2012: Final Chapter, Californians Attitudes and Experiences with Death and Dying).

Many clinicians will say that they are not reimbursed for these conversations. Although Medicare and Medi-Cal now both specifically reimburse for goals of care/advance care planning conversation, (more on that later), based on this PHC experience, reimbursement is not the key barrier. Partnership Health Plan has had an incentive for such conversations for 8 years, and only 32 clinical sites submitted attestations in 2014-2015.

What is the key to increasing ACP? We can learn from physicians and groups that have been successful in doing ACP for most of their patients. **Here is the solution: create processes and systems to integrate ACP with the health care we provide.** It sounds so easy, but it is not. Ideally it is a team approach, with each member of the health care team playing a role. The larger community can also play an important role in normalizing these conversations. Underlying it all, though, is a dedication and commitment from the clinicians to make this change. **Passionate clinical leadership is key.**

Where can you learn more? If you like in-person trainings, the Coalition for Compassionate Care in California (the steward of the California POLST) is working with the Institute of Palliative Care at Cal State San Marcos to put together a [training on advance care planning for primary care clinicians](#). If you are a family physician, the California Academy of Family Physicians is offering Part IV Maintenance of Certification module to use a quality improvement approach to increase advance care planning conversations in your office. You can enroll at www.advancedirectivesMOC.org

About reimbursement: Medi-Cal (including PHC) and Medicare both reimburse for goals of care conversations and advance care planning using the CPT codes: 99497 and 99498. The details of the conversation should be documented in the medical record; see the Medicare regulations for details.

What will happen to the Partnership HealthPlan primary care QIP measure for advance care planning? The measure will continue, but with some changes.

Effective January 1, 2016, PHC members with dual Medicare and Medi-Cal coverage are no longer eligible for the incentive; Medicare should be billed for the service.

Effective October 1, 2015, specialists may no longer use the ACP QIP; they should bill PHC for advance care planning using the 99497-8 codes.

Primary care providers may choose to bill using either 99497-8 OR submit for the PCP QIP, but not both for the same service. In general, physicians in solo and group practices, as well as large medical groups will opt for using the CPT codes. Primary care sites that use the prospective payment system (PPS) will be better off using the PCP QIP, as quality payments are not subject to limits on PPS-rate reconciliation (this includes Federally Qualified Health Centers, Rural Health Centers and Tribal Health Centers).

I will wrap up with a note on high and low quality ACP conversations:

Low quality conversation: (without much preamble): “Would you want CPR if your heart stops?”

Another low quality conversation: “You are young and healthy, so I’ll just note that you want everything done,” (without further conversation about what they would want if they had an unexpected neurologic event).

High quality conversation: Start with, “Tell me about your life and what is important to you.”

Another high quality conversation: For patients with advanced illness, here is some additional wisdom from *Being Mortal*, (a book every clinician should read): Geriatrician Dr. Susan Block has a list of questions that she covers with sick patients in the time before decisions have to be made:

- What do they understand their prognosis to be,
- What are their concerns about what lies ahead,
- What kinds of trade-offs are they willing to make,
- How do they want to spend their time if their health worsens,
- Who do they want to make decisions if they can’t?”

Take pride in the profession you chose; talk to your patients about their mortality.

Behavioral Health Treatment Services

On February 1st, Behavior Health Treatment (BHT) for children diagnosed with Autism Spectrum Disorder (ASD) will be transitioned to Partnership HealthPlan of California (PHC).

BHT is comprised of professional services and treatment programs that develop or restore the functioning of an individual with ASD to the maximum extent practicable. This includes, but is not limited to, Applied Behavioral Analysis (ABA) and other evidence-based behavior intervention programs.

We are working closely with the state and with local providers to determine credentialing, authorization and billing processes. If you receive questions about this benefit, please contact PHC Member Services Department at (800) 833-4155. We are working with the families on a case by case basis to assist with diagnosis and treatment planning.

Quality Corner:

HEDIS® Update

Medical record collection for HEDIS ®2016 concludes on May 16th. We appreciate your continued support and cooperation with our annual HEDIS® project!

HEDIS® 2016 regional rates 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>.

QIP Update:

A lot of important dates are coming up with the end of the 2015-16 Measurement Year, June 30, 2016, fast approaching! Please be sure to send us all submissions via email by July 31 and via eReports by August 15. We will be hosting a Wrap-Up QIP 2015-16 webinar on June 14, 2016 to share important information that will help you maximize your point earnings. It will also be a great opportunity to bring up questions. Please plan to attend!

Date: June 14, 2016

Time: Noon – 1 p.m.

Registration Link: <https://attendee.gotowebinar.com/register/5064523554881149699>

The PCP-QIP 2016-17 Measurement Set has been approved! A quick summary of the changes: Child BMI is removed and Monitoring for Patients on Persistent Medications is added to the Family Medicine sites' clinical domain; Child BMI is removed from the Pediatric sites' clinical domain; Advance Care Planning measure requirements are expanded; and lastly, Health Information Exchange is added to the Unit of Service Measurement Set. Thank you for providing feedback in this process and throughout the measurement year.

Managing Pain Safely:

Partnership HealthPlan of California (PHC) has instituted prescribing guidelines to safeguard the health and well-being of our members. This June, PHC will further its mission by adopting the Center for Disease Control and Prevention (CDC) recommendations for using opioid pain medications for acute pain. According to the CDC, the lowest effective dose of fast-acting opioid prescriptions should be prescribed for 3 days or less; more than 7 days will rarely be needed. If more medication is needed, a TAR will be required to ensure the treatment is safe and appropriate. To coincide with these guidelines, PHC will be implementing 30 tablet/-90 day quantity limit for immediate release opioids (similar quantity limits will be placed on immediate release opioid analgesic solutions).

Who is effected?

At this time, the Managing Pain Safely program will be expanding its focus to include all short acting (immediate-release) opioid analgesics with utilization restrictions.

These limits will not affect patients on stable, ongoing short-acting opioid prescriptions.



Important Numbers - Claims Mailing Addresses

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

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 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. Please refer to the PHC Provider Manual for the full Confidentiality Policy.

IT CORNER

Partnership Quality Dashboard (PQD) Early Announcement!

Partnership HealthPlan of California (PHC) is committed to improve health care outcomes and has recently kicked-off a project called Partnership Quality Dashboard (PQD). It brings many sources of quality performance data together to enable Provider Sites and PHC staff to prioritize, inform and evaluate quality improvement efforts. It will also enable Provider Sites to monitor Quality Improvement progress, perform patient drilldowns, compare performance with peers in de-identified fashion, view monthly ad-hoc reports, etc. This is a collaborative effort between internal IT and business teams along with feedback from our provider community to deliver a one-stop single sign-on dashboard by second quarter of 2017.

Partners In Fighting Fraud

Fraud related losses in healthcare programs add up to billions of dollars each year. All programs, such as Medi-Cal and Medicare are susceptible. PHC asks that providers and their employees join the fight against fraud by referring suspicious and fraudulent activity to the resources listed below.

PHC's Anonymous Fraud Hotline - (800) 601-2146 | Medi-Cal Fraud Issues - (800) 822- 6222

Contact Us:

Partnership HealthPlan of California
(707) 863-4100 www.partnershiphp.org