PARTNERSHIP HEALTHPLAN of CALIFORNIA

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PROVIDER NEWSLETTER

WINTER 2018 | Volume 24 | Issue 4

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https://goo.gl/kNSrPz
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Member Services Department:
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From the Desk of CEO Liz Gibboney

On January 1, 2019, PHC will launch the Whole Child Model, and be integrating California Children's Services (CCS) with Medi-Cal benefits for over 7,000 PHC members. Counties will continue to provide eligibility, but PHC will be responsible for coordinating both the CCS and Medi-Cal-covered benefits.

In numerous conversations with staff and providers, I have been told that this transition feels more like an expansion into a new county than the shifting of the administration of an existing benefit. I believe this is a testament to the dedication and commitment each county's staff and PHC staff have to serving these children.

January does not mark the end of this transition, but the beginning. First and foremost, all doctor appointments should be kept. CCS children are ensured continuity of care for up to 12 months. Second, we will be reaching out to each family, starting with high utilizers in December, to begin establishing case managers for each child.

Lastly, we established a Family Advisory Committee (the first meeting was in September) to provide families with a platform to provide direct feedback about issues, concerns, successes and more as it relates to the Whole Child Model program. This new committee will give us valuable insights as we strive to provide high-quality care to each CCS child. The Family Advisory Committee is scheduled to meet every other month.

If the amount of change in health care over the past few years has taught us anything, it's the ability to be nimble and flexible as we implement new programs and benefits. As we progress through the implementation of the Whole Child Model, I am confident in our ability to provide the highest quality of care.

Sincerely,

From the Desk of Chief Medical Officer Robert L. Moore, MD, MPH, MBA

Hugs, not Drugs: Treatment of Choice for Neonatal Opioid Withdrawal

On October 1, national experts on maternal opioid use and Neonatal Opioid Withdrawal Syndrome (or NOWS, the new term for what was previously called neonatal abstinence syndrome) presented compelling data supporting some revolutionary ideas for treating NOWS.

Let babies be babies: comfort them, feed them when they are hungry, swaddle them, rock them, console them.

Let moms be moms: The treatment of choice for NOWS is the mother. Hospitals need to come up with a way to deliver that "drug": co-rooming, allowing the mother (not nurses) to provide routine care for the baby.

Administer the **minimum** amount of opioid for the baby to allow them to eat, sleep, and be consoled ("E.S.C"). The Finnegan scoring of withdrawal should be discarded.

Perhaps this should not be so revolutionary.

While this treatment can be provided in an intensive care unit by neonatologists, the culture of the ICN, the physical structure of most ICNs, and traditional neonatology training all conspire to make this hard to do.

Care for these newborns while they room with their mothers. Do not transfer them to a hospital with an ICN without other reason besides maternal opioid use, "just in case."

For babies going through opioid withdrawal, provide hugs, not drugs as the first line of treatment.

In the presentation on a implementing a national toolkit for caring for pregnant women taking regular opioids, OB/GYN Dr. Elliott Main noted that opioid overdose mortality exceeds any single obstetrical cause of maternal mortality. Opioid overdose mortality mostly occurs in the post-partum period, pointing to the need for a comprehensive community effort to support women with Opioid Use Disorder after the birth of their baby.

For many women, reducing post-partum mortality may require post-partum Medication Assisted Therapy with buprenorphine or Methadone, combined with intensive psychosocial support. Unlike the babies, moms may need hugs **and** drugs, in both ante-natal and post-partum periods.

Videos of the *New Paradigms in Addressing Opioid Exposure in Pregnancy* conference will be posted to the PHC website in a few weeks.

In the meantime, one of Dr. Grossman's previous presentations can be found by clicking here.

Annual Disclosure Statement

PHC recognizes the potential for underutilization of care and services and takes appropriate steps to monitor for this. The processes utilized for decision making are based solely on the appropriateness of care and services and existence of coverage. PHC does not offer incentives or compensation to providers, consultants or health plan staff to deny medically appropriate services requested by members, or to issue denials of coverage.

PARTNERSHIP HEALTHPLAN of CALIFORNIA

Provider Newsletter

Annual Physician Satisfaction Survey—The Results are In!

Thank you to the physician network for responding to our annual satisfaction survey.

The results and comments are used to assist with process improvement to increase the overall satisfaction with PHC.

This year we received a very high rating of 98% satisfaction with the PHC. However, we do have opportunities for improvement. PHC scored lower in satisfaction with the Utilization Management (UM) process for the pharmacy TAR (authorization process). Another area identified for improvement was the response for better communication with the providers when a TAR is denied for medical services. PHC has been working on improving processes and consistency when applying PHC criteria for authorizations.

PHC is also evaluating enhancing the use of technology for the TAR process. PHC will keep our network informed of changes. We encourage our provider network to continue to give us feedback and assist with improvement projects. Your input is valued.

QUALITY IMPROVEMENT 2019 ADVANCE PROGRAM

Program Applications Available November 7, 2018

Do you want to transform your practice's ability to make significant improvement in patient care? Then consider participating in the 2019 ADVANCE program. ADVANCE is a FREE, ten-month training program where participants will learn quality improvement principles and how these can be applied to specific Quality Improvement Programs (QIP - Partnership's incentive programs). ADVANCE will prepare teams from a provider practice to lead and sustain quality improvement initiatives. Each practice is assigned a coach to assist in real-time application of learning to an area of improvement within the health center. The next cohort will kick-off in February 2019 and applications will be accepted from November 7, 2018 through December 31, 2018.

Here's what past participants have said about ADVANCE:

"ADVANCE provided excellent information to evaluate, improve and develop additional projects."

"ADVANCE offered great tools and information for QI and Project Management."

"We have more people . . . with expanded knowledge, practical experience, (and) confidence."

To learn more, **please join us for an informational webinar on Wednesday, November 7,** by clicking here to register for the ADVANCE Informational Webinar. Program applications can be accessed by clicking here.

Please contact Danielle Carter at dcarter@partnershiphp.org or at (707) 420-7617 with any questions.

Contact Us: **(707) 863-4100** **www.partnershiphp.org**

The PHC Provider Newsletter and all linked articles are available online at http://www.partnershiphp.org/Providers/Medi-Cal/Pages/default.aspx

Statement: PHC Utilization Management (UM) Criteria and Policies are available online by accessing the PHC Medi-Cal Provider Manual. The Provider Manual can be found by visiting the Providers section of our website at http://www.partnershiphp.org. UM criteria is located under the Health Services category (Section 5) within the Provider Manual.

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Provider Newsletter

Claims Mailing Address - Important Numbers

Medi-Cal

Attn: Claims Department

P.O. Box 1368

Suisun City, CA 94585-1368

PHC Care Coordination

Asthma, Diabetes, ESRD

(707) 863-4276

IMPORTANT: All PHC Providers* Must be Enrolled in Medi-Cal

All Medi-Cal Managed Care Plan Providers* must be enrolled in Medi-Cal no later than December 31, 2018.

This is a State and Federal mandate.

Your organization, and all associated provider sites must also be enrolled in Medi-Cal. This includes PHC Providers contracted through Beacon.

After December 31, 2018, we will not be able to reimburse providers who provide care to PHC members unless they are enrolled in Medi-Cal.

DHCS will not allow us to have providers in the network who are not Medi-Cal approved.

*If you are classified as an FQHC, RHC, or IHS, the individual providers must enroll as Ordering Referring, Prescribing (ORP).

Click here for more information.

Partnership Quality Dashboard Update

The updated version of the Partnership Quality Dashboard (PQD) is now available to primary care providers (PCPs) through the eReports system. PQD is Partnership's online interactive data visualization system that integrates many sources of quality performance data to enable PCPs to prioritize, inform, and evaluate quality improvement efforts. PQD shows the latest monthly data and allows providers to see and compare performance over time.

This updated version of PQD will offer providers several types of dashboards to help you drive improvement and maximize your incentive dollars including:

Home Dashboard - Used to monitor an organization's performance against the plan-wide average for points, measure performance, and point's distribution between clinical and non-clinical measures.

Provider Dashboard - Used to monitor and trend individual PCP's performance and possible points earned in the current measurement year with the ability to look at historical data.

Scorecard Dashboard - Used to provide more flexibility to monitor and trend points earned by each site within your organization.

Measure Performance Dashboard - Used to provide more flexibility to monitor and trend performance data and view parent organization data as a whole.

Drill Down Dashboard - Used to provide access to historical member level information for each clinical and non-clinical measure.

The Quality Improvement Department will be hosting webinars if you would like to learn more. To access recordings of past webinars and register for upcoming webinars, click here.