CONTRA COSTA HEALTH PLAN
A Division of Contra Costa Health Services

CCRMC CARE MATTERS

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Winter 2010

The Contra Costa Health Plan Provider Bulletin

HEDIS 2010

The Health Plan's reporting of quality of care indicators called HEDIS (Healthcare Effectiveness Data and Information Set) measures is required by Medi-Cal and other payers. These measures allow the Health Plan, the public and other stakeholders to assess the quality of care provided by the Health Plan.

This year, CCHP had no measures below the State's Minimum Performance Level (California 25th percentile). Of the sixteen measures with statewide benchmark data available, we exceeded the mean on eleven of them. We scored above the 90th percentile on one measure.

The table below summarizes the data and stratifies it by provider network. The complete report can be viewed on the Health Plan's iSite page, under Quality Management.

CCHP Medi-Cal Population	2008 CCHP	2009 CCHP	2010 CCHP	2010 CCRMC	2010 CPN	2010 Kaiser	2010 Medi-Cal Mean
BMI %ile documented for children			18.49%*	11.62%*	20.74%*	57.14%	56.8%
Nutrition counseling given for children			49.15%	52.70%	40.00%	60%	63.6%
Physical activity counseling for children			38.44%	39.42%	32.59%	54.29%	47.9%
Yearly well child visit 3-6 yr.	66.46%	77.37%	74.70%	76.61%	75.83%	60.47%	76.2%
Yearly adolescent well visits	80%	47.45%	38.69%	36.40%	37.86%	46.25%	45.1%
Combo 3 immunizations	81.00%	82.48%	77.13%	86.72%	52.1%*	78.43%	74.5%
No antibiotics for URI in children	91.95%	93.64%	92.76%	94.98%	88.01%	97.70%	87.1%
First trimester prenatal	80.25%	83.45%	84.67%	86.89%	80.28%	80.56%	83.9%
Postpartum visit 26-51 days	61.48%	68.13%	68.13%	71.91%	61.97%	59.72%	60.6%
No imaging for lower back pain		87.02%	87.14%	86.71%	87.04%	91.67%	80.4%
Breast cancer screening	47.60%	43.68%	56.19%	52.24%	47.06%	76.07%	54.0%
Cervical cancer screening	69.70%	67.88%	69.34%	67.19%	61.64%	82.35%	69.5%
Diabetes Eye Exam 2 yrs.	53%	53.47%	48.54%	56.01%	46.46%	26.85%	54.4%
Diabetes screening LDL-C	77.90%	79.38%	78.65%	77.42%	74.75%	86.11%	79.3%
Diabetes LDL <100	42.10%	42.20%	40.69%	39.30%	26.26%	58.33%	37.9%
Diabetes HbA1c testing	82%	83.03%	85.40%	84.75%	84.85%	87.96%	82.8%
Diabetes HbA1c(>9%) (lower is better)	38%	42.15%	31.75%	25.51%	71.72%	14.81%	37.4%
Diabetes HbA1c (<8%)		49.09%	52.55%	52.20%	44.44%	60.19%	49.4%
Diabetes Nephropathy screen or treatment	81.20%	82.30%	86.50%	85.92%	85.86%	88.89%	81.1%
Diabetes BP <140/90		56.20%	53.10%	49.56%	58.59%	58.33%	63.9%
Avoidance of antibiotics in adults with acute bronchitis	37.50%	32.50%	31.87%	32.32%	30.67%	37.50%	29.1%

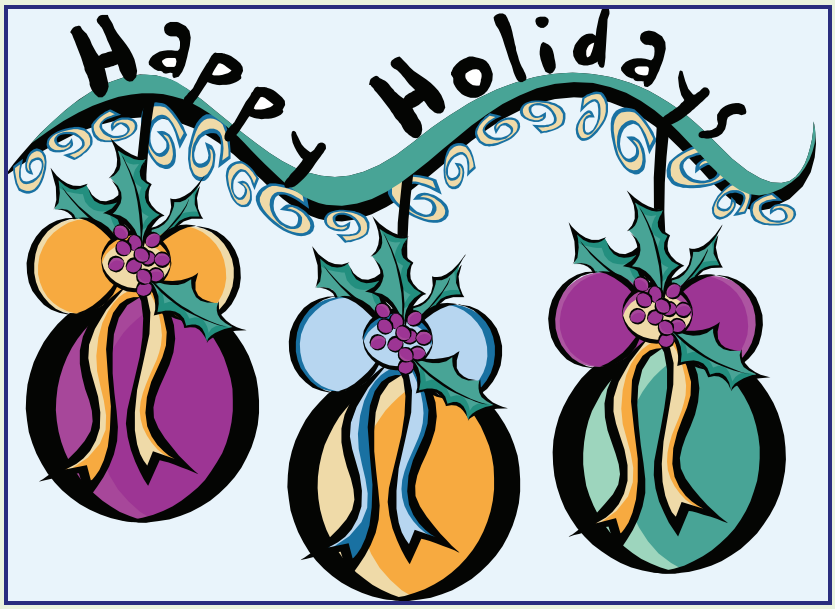
* data problems make this number unreliable

Medicare Payment Alert for DME Products

After January 1, 2011, it is mandatory for physicians enrolled in the Medicare program and are ordering DME products to obtain a PECOS number if the physician wants to continue to prescribe DME for their patients and have Medicare remit payment. Physicians do not have to enroll into PECOS, but DME providers will not receive payment if they bill Medicare with a non PECOS physician NPI as the referring physician. You and your patients with Medicare will receive a denial for the DME. This affects members in our Senior Health Program as well as dually eligible Medi-Cal members with FFS Medicare.

If you have not updated your enrollment application (completing Internet-based PECOS or the CMS-8551) since 2003, and plan on ordering DME services or items, you are **required** to submit a Medicare enrollment application. Those with questions concerning the enrollment process should contact their designated Medicare contractor/local carrier in advance of submitting the CMS-8551. For additional information regarding the Medicare enrollment process, including Internet-based PECOS, go to http://www.cms.hhs.gov/MedicareProviderSupEnroll on the CMS Web site.

Inside this issue:



Pharmacy and Therapeutics Update

The Pharmacy and Therapeutics committee at CCHP reviewed the efficacy, safety, cost and/or utilization of the following therapeutic categories/medications at the December 3rd, 2010 meeting. The changes are expected to be effective the week of January 20th, 2011.

➢Gastrointestinal Salicylates	➢Thiazolidinediones	➢Apidra (Insulin)
➢Gastrointestinal Salicylates	➢Urinary Antispasmodics	➢Low Dose Seroquel

The committee approved ***addition*** of the following to the Preferred Drug List (formulary):

- Apridra (insulin glulisine) will be added to the formulary as our **preferred first line rapid acting insulin**. Patients currently on Novolog (insulin aspart) or Humalog (insulin lispro) will be grandfathered and allowed to stay on these agents. Any new starts will need to use Apidra.

The committee approved ***deletion*** of the following to the Preferred Drug List (formulary):

- The previous P&T decision to have Actos® (**pioglitazone**) and Avandia®(**rositglitazone**) become PA (removing the step therapy that allowed them to process as formulary) was brought back to the committee for review. The committee reviewed data showing the **comparable efficacy** of Januvia compared to TZDs. All patients currently on Actos and Avandia will need to be **transitioned** to Januvia® (sitagliptin) or Janumet® (sitagliptin/metformin) by March 1st 2011.

The following were reviewed and ***prior authorization criteria*** approved or updated (remain non-formulary):

- Apidra. Criteria updated to **require all new** starts to rapid acting insulin use Apidra. Patients currently on Humalog and Novolog will be allowed to continue on these agents.

FYI/REMINDERS:

- Walgreens will be using our **text pagers** to notify prescribing providers in the event the Pharmacist has questions about a prescription. Providers will be paged with the 10-digit Pharmacy phone number followed by the patient's 8 digit DOB. Please return the call and give the pharmacy the birth date. They will use that info to find the specific question they have for you. This service should be minimally intrusive to you, and yet will help get your patient their Rx promptly.
- 340Breminder: there are 10 Rite Aid and 12 Walgreens pharmacies in our 340B network. For all CCRMC network patients, we encourage use of these pharmacies in order to save the county money through the 340B program.

SelectCare News

SelectCare is a Medicare Advantage Special Needs Plan offered by Contra Costa Health Plan. It is designed for Medicare beneficiaries who are also enrolled in the California Medi-Cal program. More information about ***SelectCare*** can be found at http://www.cchealth.org/health_plan/selectcare/. The complete ***SelectCare*** formulary can be found at http://selectcare.performrx.com/. No negative formulary changes have occurred to the ***SelectCare*** formulary thru December 2010.

CCHP Seasonal Flu Vaccine Matrix 2010-2011

CCHP Medi-Cal Members	Healthy Families Program	Commercial Members	Medicare Members SelectCare SeniorHealth
CHDP Code on PM 160 Ages: 6 months to 18 years 53 Flu Vaccine 71 Flu Mist Vaccine Plan Payment $9.45	Preservative Free Vaccine Ages: 6 months to 35 months CPT code 90655 $20.58 90465 $ 4.91 Plan payment $25.49	Preservative Free Vaccine Ages: 6 months to 35 months CPT code 90655 $22.45 90465 $ 5.35 Plan payment $27.80	Preservative Free Vaccine 90656 $18.20 G0008 $27.43 Plan payment $43.67
CHDP-Privately Purchased Ages: 6 months to 20 years CHDP code 54 on PM 160 Plan payment $ 13.76	Preservative Free Vaccine Ages: over age 3 90656 $34.61 90471 $ 4.91 Plan payment $39.52	Preservative Free Vaccine Ages: over age 3 90656 $37.76 90471 $ 5.35 Plan payment $43.11	Regular Flu Vaccine 90658 $13.22 G0008 $ 27.43 Plan payment $38.69
For more information on the VFC program, please call (877) 243-8832	Regular Flu Vaccine Ages: 6 months to 35 months 90657 $15.14 90465 $ 4.91 Plan payment $20.05	Regular Flu Vaccine Ages: 6 months to 35 months 90657 $16.51 90465 $ 5.35 Plan payment $21.86	Nasal Vaccine Ages: to age 50 90660 $26.72 G0008 $27.43 Plan Payment $52.19
Privately Purchased Vaccine Must bill on CMS 1500	Regular Flu Vaccine Ages: over age 3 90658 $15.14 90471 $ 4.91 Plan payment $20.05	Regular Flu Vaccine Ages: over age 3 90658 $16.51 90471 $ 5.35 Plan payment $21.86	
Preservative Free Vaccine Ages: 21 and over 90656 $33.03 90471 $ 4.46 Plan payment $37.49	Nasal Vaccine Ages: to age 8 90660 $24.50 90467 $4.91 Plan payment $29.41	Nasal Vaccine Ages: to age 8 90660 $26.72 90467 $ 5.35 Plan payment $32.07	
Regular Flu Vaccine Ages: 21 and over 90658 $14.42 90471 $ 4.46 Plan payment $18.88	Nasal Vaccine Ages: 9 to 18 years 90660 $24.50 90473 $ 4.91 Plan Payment $29.41	Nasal Vaccine Ages: 9 to 50 years 90660 $26.72 90473 $ 5.35 Plan Payment $32.07	
Nasal Vaccine Ages: to age 50 90660 $23.38 90473 $ 4.46 Plan payment $27.84			
Pneumococcal Reimbursement			
Ages: 2 and above 90732 $59.52 90471 $ 4.46 Plan Payment $63.98	Ages: 2 and above 90732 $62.36 90471 $ 4.91 Plan Payment $67.27	Ages: 2 and above 90732 $68.03 90471 $ 5.35 Plan Payment $73.38	Ages: 2 and above 90732 $32.70 G0008 $27.43 Plan Payment $58.17

Revision Date: 10/28/2010 Provider Relations Department.

FREE Telephone Interpreter Services for CCHP Members 24/7

I recently heard a true story that occurred in one of our clinics. A concerned Spanish-speaking parent took their child to see one of our pediatricians for an ear infection. The parent spoke little English and she thought that she could get by without an interpreter. The young child was miserable, the doctor prescribed antibiotics, which came in a liquid form with a dropper. The parent misunderstood the instructions given to her in English and put the liquid antibiotics in the ear for several days. You can only imagine what happened. The infection got worse and the child was in the emergency room a week later. As a parent it is painful to hear this story. This incident could have been avoided if an interpreter was used. Please use the resources we have available to avoid any unintended harm to your patients.

Any questions please contact Otilia Tiutin, CCHP's Manager of Cultural and Linguistic Services at Otilia.Tiutin@hsd.cccounty.us.

How we can help:

Each county clinic and hospital has procedures for how to use interpreter services. There is a card printed with instructions on each phone or video unit that gives the number to call HCIN at (925) 313-8360. If no HCIN interpreter is available, then you will be connected to Language Line, who will be asking for the ID # and Cost Center #. These number are also printed on that card.

Federal and State Guidelines:

- By law, we must ensure that members of our health plans have access to interpreter services if they do not speak English.
- Interpreter services must be available on a 24-hour basis for medical encounters.
- If the medical staff or providers do not speak the member's language, the health plan and provider cannot require or suggest to a member to provide their own interpreters.

You must inform the member of the right to free interpreter services. However, we discourage the use of family and friends. If they insist that they want to bring their own interpreter, you must document it in the patient's chart. Do not allow children under 18 to interpret under any circumstance.

We provide flyers you can post in your office which state: **Point to your language! We will get you an interpreter.**

To print a copy go to our website at: http://cchealth.org/health_plan/provider_interpretation.php

The Bulletin Board

Welcome!! New Primary Care Providers.

Huang, Harry, MD
Shenkin, Budd, MD
Bayside Medical Group

Villanueva, Lee, MD
Brookside Community Health

Veal, Ulanda, MD
Comprehensive Allergy Services

Sheldon, William, MD
Richmond Health Center

Mostaghasi, Taraneh, MD
Pediatrics

Holidays Observed by CCHP

Martin L. King Jr. Day January 17, 2011

President's Day February 21, 2011

Find resources for uninsured individuals at
www.cchealth.org/insurance

Visit our CCHP Provider & Pharmacy Online Search Engine (OSE) at:
www.contracostahealthplan.org

Find available on our web site; Provider Manual, Provider Directory, and Prior Authorization Forms.

Our accredited **URAC Advice Nurse Unit** is available for our member's 24 hours a day, 7 days a week including holidays. The Advice Nurse Unit can be reached by calling
1 (877) 661-6230 Press 1

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E-mail us: ProviderRelations@hsd.cccounty.us
Website: www.contracostahealthplan.org

Contra Costa Health Plan
Provider Relations - Contracts Contact Information

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Mary Berkery, RN	Facility Site Review Manager	(925) 313-9507	Mary.Berkery@hsd.cccounty.us
Maria Perez	Credentialing Coordinator	(925) 313-9506	L.Perez@hsd.cccounty.us
Nicole Meyer	Contracts Secretary	(925) 313-9521	Nicole.Meyer@hsd.cccounty.us
Heather Wong	Credentialing/Contracts Assistant	(925) 313-9508	Heather.Wong@hsd.cccounty.us

Contra Costa Health Plan
Provider Call Center 1 (877) 800-7423

Press 1 – Member Eligibility and Primary Care Physician Assignment
Press 2 – Pharmacy Services Department
Press 3 – Authorization Department
Press 4 – Interpreter Services (Advice Nurse)
Press 5 – Claims Department
Press 6 – Provider Relations Department
Press 7 – Member Services Department