



Fall 2011
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Provider Newsletter

From the Desk of
PHC Executive Director
Jack Horn

HEALTH PLAN NEWS

State Budget and Medi-Cal Rate Reductions

The Centers for Medicare and Medicaid Services (CMS) approved California's recent proposal to reduce some Medi-Cal provider rates by 10%. However, many of the cuts have been modified since May, which is good news. Exceptions to the approved rate cuts include physician/clinic services for children, home health, and pharmacy.

PHC is working with the State Department of Health Care Services (DHCS) regarding impact on managed care. The State Medi-Cal Fee-for-Service reductions are effective retroactively back to June 1, 2011 and for managed care retroactive to July 1, 2011.

The State's proposals to CMS regarding implementation of member copays (for physician/clinic visits, pharmaceuticals, emergency department visits and inpatient stays) remain under consideration and have not been approved or rejected.

Thank you for your support and continued participation with PHC. The Plan will update our provider network on the Board of Directors' decision by the end of November. We appreciate your continued support and service to low income residents in our communities.

Based on the new information from CMS and DHCS, the PHC Board will discuss options and approve final recommendations for provider rate reductions.

INTERPRETER SERVICES

PHC offers interpreter services through Pacific Interpreters.

This service is available to you at no cost and is for PHC Members only. To use this service, you will need the Toll-Free Number and an Access Code. To obtain these, log on to PHC e-Systems at www.partnershiphp.org.

Use of family members for translation should occur only upon the patient's request. Minors should never be utilized except when emergency services are rendered.

If you have any questions or need help logging on to PHC e-Systems, please call the Provider Relations Department at (707) 863-4100.

Please use this service to facilitate communication for your PHC patients.

Claims Mailing Addresses

Medi-Cal

Attn: Claims Department
P.O. Box 1368
Suisun City, CA 94585-1368

PartnershipAdvantage

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

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Pharmacy

The 2011 PHC Formulary is available online at:

http://www.partnershiphp.org/Pharmacy/Formulary_2011.pdf

Updates to the current Formulary can be viewed at

<http://www.partnershiphp.org/Provnews/FORMCHG.pdf>

Pharmacy Corner

<http://www.partnershiphp.org/Provnews/RxCorner.pdf>

Claims Corner

<http://www.partnershiphp.org/Provnews/Claims.pdf>

Important Provider Notices

http://www.partnershiphp.org/Provider/MC_PRNot.htm

Are You Ready for the Mandated 5010 Implementation?

http://www.partnershiphp.org/MC_Prov/Notices/PN0132.pdf

Quality Improvement

HEDIS Update

<http://www.partnershiphp.org/Provnews/HEDIS.pdf>

Pneumococcal Vaccine Polysaccharide

<http://www.partnershiphp.org/Provnews/Pneumo.pdf>

CHDP: Well Visits a Must!

<http://www.partnershiphp.org/Provnews/CHDP.pdf>

Cultural & Linguistics

<http://www.partnershiphp.org/Provnews/CL.pdf>

Health Services Care Coordination

Adult Day Health Care Benefit Elimination

<http://www.partnershiphp.org/Provnews/CareCoord.pdf>

Member Services

Member Rights and Responsibilities

<http://www.partnershiphp.org/Provnews/mbrsvcs.pdf>

Member Survey Results

<http://www.partnershiphp.org/Provnews/mbrsurvey.pdf>

Fighting Fraud, Waste and Abuse

<http://www.partnershiphp.org/Provnews/FWA.pdf>

PA Corner

Let Your Patients Know about Partnership Advantage

<http://www.partnershiphp.org/Provnews/PACorner.pdf>

Are You Ready for the Mandated 5010 Implementation?

On or after January 1, 2012, PHC will **not** accept the 4010 electronic claims format. This means that if you or your billing service submits an electronic claim to PHC that does not conform to the new ANSI X12 HIPAA compliant 5010 format, the claim file will not be accepted and will be returned to you unprocessed. It is your responsibility to ensure that you or your billing service will be able to transmit electronic claims in the HIPAA compliant 5010 format on January 1st, 2012.

For more detailed information on the 5010 requirements and testing see PHC Important Provider Notice #132 dated November 9, 2011 on our web site at

http://www.partnershiphp.org/MC_Prov/Notices/PN0132.pdf

Important Numbers

PHC Care Coordination

Asthma, Diabetes, ESRD &
Growing Together Prenatal Programs
707/863-4276

Provider Relations Representatives

Ledra Guillory (Manager) 707/863-4153
Joan Russell (Supervisor) 863-4229
Necole Montgomery (Napa) 707/863-4531
Jean Levato (Solano) 707/419-7980
Allyson Carraway (Yolo) 707/863-4243
Judy Paul (Sonoma) 707/863-4544
Daniel Santos (Marin) 415/259-4055
Sharon McFarlin (Mendocino) 707/962-0789

Protecting Member Confidentiality

Partnership HealthPlan of California places a high value on maintaining our members' confidentiality. We maintain a Confidentiality Policy in order to ensure that our members' medical and/or other personal health information 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.



From the Desk of Chief Medical Director Robert Moore, MD, MPH

4 Star Health Plan! What does that mean?

On October 12, the Centers for Medicare and Medicaid Services (CMS) announced that Partnership HealthPlan's "Partnership*Advantage*" product was awarded a 4 star rating for 2012, placing it in the top 20% of all *Advantage* plans nation-wide. We are pleased and proud of this recognition.

Why is Partnership*Advantage* special? Partnership*Advantage* combines traditional Medicare with part D prescription drug coverage and MediCal, in one unified service, including augmented coverage for dental, mental health and vision coverage. Over 7000 residents of Yolo, Napa and Solano counties have signed up for the Partnership*Advantage* product. Before becoming Partnership's CMO, I cared for many patients at Community Health Clinic Ole who had Partnership*Advantage* and were very grateful for the expanded coverage it provided, the level of customer service provided by the HealthPlan, and the responsiveness around the drug benefit. It is a great product for our patients.

What are these stars? In 2007, CMS initiated a program designed to monitor and improve the quality of care provided to beneficiaries enrolled in Medicare *Advantage* programs. CMS awards quality scores to health plans based on their performance on 53 measures, ranging from clinical measures like Hemoglobin A1c control in patients with diabetes, to measures of the patient experience, like responsiveness of the health plan when members contact us. The stars scale is from 0 to 5, with 3 stars being average. Partnership was awarded 3 stars 2 years ago and 3.5 stars 1 year ago. Our goal is to continue to improve our scores in the years to come, and we have a company-wide team working on this.

Why are stars important? Nationwide, the Medicare *Advantage* program is slated for funding cuts in coming years. There are two ways to mitigate this and ensure the survival of our valuable Partnership*Advantage* program. First, starting in 2013, high stars rating will result in progressive funding bonuses from CMS. Second, Medicare *Advantage* rates are based on risk adjustment, depending on higher severity diagnoses being accurately coded and captured each calendar year. Our population is higher risk than average, so capturing all applicable diagnoses at the Annual Physical Exam will also increase our income. Currently, only 16% of Partnership*Advantage* patients are receiving this benefit. Partnership is looking at ways to decrease complexity and increase the incentive for this Annual Physical Exam.

Why is there no Partnership*Advantage* in Sonoma, Marin and Mendocino? As noted above, the financial sustainability of the overall Partnership*Advantage* program is at risk in future years. Our efforts to improve the stars rating and capture risk severity data need to be successful for us to consider adding additional counties.

A shared accomplishment. We believe the high quality reflected in the 4-Star recognition is a reflection not just of quality of the HealthPlan for our members with the Partnership*Advantage* program, but is reflective of the overall quality of care provided for all our members with regular MediCal, Healthy Families and Healthy Kids, as well. It is also a direct reflection of the hard work our community of doctors and other clinicians do every day, as you care for our mutual patients. You should feel proud of this recognition as well. Thank you!

As we look to the future, we must all commit ourselves to quality and work together to continue improving. Quality truly is everyone's job!

Thank you for your efforts. Keep up the great work!

Survey says ... patients forget!!

PHC recently received the results from the 2011 CAHPS® survey for PartnershipAdvantage (PA) members. The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey assesses member satisfaction in a variety of areas, including overall satisfaction with the HealthPlan, Ease of getting needed care/appointments and whether they have received certain services. Several of the questions are used to rate our HealthPlan in the Medicare Star Program.

One of the CAHPS® questions with an opportunity for improvement asks Medicare members 65 years and older whether they have ever received a pneumococcal vaccine. The results showed that only 58% of our PA members stated that they have had the vaccine. Since the pneumo vaccine is often only given once, it is possible that the patients do not remember getting the vaccine. Recent data analysis from one of our sister health plans in the Bay Area confirms that patients are indeed getting their vaccines more than the reported CAHPS® rate.

Since the CAHPS® survey is administered to our PA members on an annual basis; one way to increase the rate is for providers to remind patients at every visit that they are current (or due) for their pneumococcal vaccine. Reminding your patients at every visit will help them recall whether or not they have truly ever had the vaccine.

Important Provider Notice #132 Subject: HIPAA EDI 5010 Migration

On or after January 1, 2012, PHC will no longer accept the 4010 electronic claims format.

Please visit http://www.partnershiphp.org/MC_Prov/Notices/PN0132.pdf to read more detailed information about this notice.

Reminder to PCPs: Ask Patients About Smoking

Please remember to ask your patients about their smoking habits during a provider visit.

Even if the patient doesn't smoke, you need to ask if anyone in the household smokes.

Our member survey reported that less than 28% of those responding were asked about smoking.

This is a reminder to make education about smoking a priority when addressing overall health with your patients.

Partnership HealthPlan of California is pleased to recognize two physicians who truly “go the extra mile” on behalf of their patients.

Dr. Robert Freinkel contacts the health plan when PHC members do not show up for appointments. This cooperative practice has greatly reduced the problem of appointment no-shows, and that in turn has improved continuity of care for Dr. Freinkel's patients, especially asthmatic children.

Dr. Betsy Meux of Davis Community Clinic recently contacted the health plan to advocate for one of her patients with emergency coverage only. She had taken an active role with the member knowing there was no reimbursement mechanism for her services, going so far as to offer to stay into the evening to ensure that specialty services were coordinated.

Drs. Freinkel and Meux are exemplary physicians and their dedication to their patients plays a big role in the success of Partnership HealthPlan of California and quality outcomes for its members.

Many thanks to both for their hard work and compassionate care.

Physician 2011 Satisfaction Survey

Thank you for participating in the PHC Annual Physician 2011 Satisfaction Survey. The Plan had an 85% response rate. PHC received some excellent feedback and comments which will be considered as we evaluate best practices and how to improve our service to our providers.

The Plan continues to score high with overall satisfaction. Only 4% of respondents gave the Plan a negative response.

PHC will be evaluating those areas identified for improvement, which include the Pharmacy TAR process and improved communication regarding our Quality Improvement Program.

Thank you for your ongoing support.

Web Links

Our website:

<http://www.partnershiphp.org/>

Provider Services:

<http://www.partnershiphp.org/Provider/Provider.htm>

Online Services:

<https://secure.partnershiphp.org/>