



# Fast Facts

News for Providers from HealthPartners Professional Services and Hospital Network Management

July 2015

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## ADMINISTRATIVE INFORMATION

### **Reminder to Apply Now! 2015 Innovations in Health Care and Preventive Care Screening Recognition Awards**

Is your organization working to change the way it delivers health care? Or has your organization implemented a novel quality improvement process around the way your patients are being screened for preventive care that is leading to greater performance? If so, HealthPartners would like to recognize you for your efforts.

Applications and information for both the Innovation in Health Care and Preventive Care Screening Recognition Awards are available under [Partners in Quality](#) online. If you have questions or would like a Microsoft Word version of the above forms, please email [Mary.M.Gainey@HealthPartners.com](mailto:Mary.M.Gainey@HealthPartners.com).

#### **Innovations in Health Care Award**

We know that innovative efforts of any one dedicated medical or specialty clinic can ripple outward to improve care and change business as usual in the care delivery system. We created the Innovations in Health Care Award to recognize and celebrate the people behind such efforts. Their innovative work after implementation and community-wide adoption is transformational for us all. The focus of these award projects can be a specific disease or condition, care process, patient population or the entire care delivery model. You may access the application form by clicking [Application Form](#).

#### **Preventive Care Screening Recognition Award**

Quality improvement is a vital activity in the pursuit of the Triple Aim. We created the Preventive Care Recognition Award to recognize primary care and specialty groups for making major changes in their current processes resulting in persistent, sustainable change for preventive care screening improvement that addresses the health of the population served.

The Preventive Care Awards focus on process and performance improvement results in preventive care screenings as relevant to the patient population served. You may access the application form by clicking [Application Form](#).

## Injectable/Immunization Fee Schedule Update

As outlined in your market basket fee schedule, the fees for injectables and immunizations are subject to quarterly updates. Injectables were last updated on May 15, 2015 and will be updated again on August 15, 2015. A list of the updated fees will be available on the Provider Portal. Please find the Injectable Fee Schedule link under the HPI Administrative Program for Medical Providers/Fee Schedule Updates or click [healthpartners.com/provider-secure/provider-information/fee-schedule/](http://healthpartners.com/provider-secure/provider-information/fee-schedule/).

## Medical, Durable Medical Equipment (DME) & Medical Dental Coverage Policy Updates 7/1/2015

Please read this list of new or revised HealthPartners coverage policies. HealthPartners coverage policies and related lists are available online at [healthpartners.com](http://healthpartners.com) (pathway: Provider/Coverage Criteria). Upon request, a paper version of revised and new policies can be mailed to clinic groups whose staff does not have Internet access. Providers may speak with a HealthPartners Medical Director if they have a question about a utilization management decision.

Medical Coverage Policies	Comments / Changes
Investigational Services: List of Noncovered services	Policy revised to more clearly define non-coverage of investigative services.
Investigational Services	Policy revised to more clearly define non-coverage of investigative services and prior authorization requirements.
Investigational Services – Category III Codes	Policy revised to more clearly define non-coverage of investigative services.
Epidural Steroid Injections	Effective immediately, prior authorization for epidural steroid injections is not required for Medicare or MSHO products.

Contact the Medical Policy Intake line at 952-883-5724 for specific patient inquiries. For general policy and process questions, contact 952-883-6333 or email [medicalpolicy@healthpartners.com](mailto:medicalpolicy@healthpartners.com).

## Credentialing Website

HealthPartners Provider home page has a site to answer many of your common credentialing questions. You can access this site through the HealthPartners website at [healthpartners.com/credentialing](http://healthpartners.com/credentialing) (pathway: For Providers/Secured Online Systems/Secured Provider Site Links or Provider/Credentialing and Enrollment).

You will find the following information on the HealthPartners Credentialing website:

- Frequently asked questions—with detailed answers
- Convenient link to the Minnesota Credentialing Collaborative's web-based credentialing application
- HealthPartners Credentialing Plan, which includes our credentialing criteria for acceptance into the HealthPartners network
- Practitioner's rights as they pertain to the credentialing process

## Initial Credentialing Process

HealthPartners requires all Minnesota-based clinics to submit **initial** credentialing applications through the ApplySmart system. Clinics in WI, IA, ND and SD may use ApplySmart or they may continue submitting paper applications. Initial applications submitted by MN clinics by paper, fax or email may be returned to the submitter.

If you have questions or concerns about this requirement, please contact Marilee Forsberg at (952) 883-6210 or at [marilee.j.forsberg@healthpartners.com](mailto:marilee.j.forsberg@healthpartners.com).

If you do not have an account with the MCC, [Get Started](#) now. If you have questions about the ApplySmart system, contact the Minnesota Credentialing Collaborative, [MCC@mncred.org](mailto:MCC@mncred.org), (651) 789-0113.

## Medicare Part D Prescribers – Important Enrollment Information

The Centers for Medicare & Medicaid Services (CMS) has finalized changes to the Medicare Advantage and Medicare Prescription Drug Benefit Programs. The change requires physicians and other eligible professionals who write prescriptions for Part D drugs to:

- be enrolled in Medicare in an approved status, or
- have a valid opt-out affidavit on file for their prescriptions to be covered under Part D

CMS is strongly encouraging providers and other eligible professionals to submit enrollment applications or opt-out affidavits to their Medicare Administrative Contractor (MACs) no later than January 1, 2016. This will ensure sufficient time for processing to avoid their patients' prescription drug claims from being denied beginning June 1, 2016 (these dates have changed from the previous Fast Facts article to align with CMS's revised timeframes).

Medicare enrollment can be checked here: [Medicare Individual Provider List | Data.CMS.Gov](#)

For more information regarding this change, including how to enroll in Medicare, please check here:

[Prescriber Enrollment Information - Centers for Medicare & Medicaid Services](#)

<http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles>

## Preventive Care Reminder Outreach Program 2015

### Summer Mailers and Secure Web Mailings

HealthPartners continues our outreach reminder program to our members, your patients. This year's outreach efforts continue in the form of letters and Secured Web Mail (SWM) messaging technology.

Members identified by claims data who are behind on pediatric or adolescent immunizations or who have not had a mammogram, Pap test or colorectal cancer screening will receive a letter signed by Andrew Zinkel, M.D, Associate Medical Director, referring them to their doctor's office to make an appointment and to Member Services for questions about benefits. Members will also receive a secure email message that includes a reminder to have the tests or immunizations completed and a link to the HealthPartners Health Information Library.

All mailings, both letters and emails, will be targeted to the following members:

#### **Pediatric Immunizations**

Parents of children ages 13 to 23 months, all products, who appear to be behind with at least one immunization.

#### **Adolescent Immunizations**

Parents of children ages 9 years until their 13<sup>th</sup> birthday, all products, who appear to be behind with at least one immunization for HPV, Meningococcal and Tdap.

#### **Women's Breast and/or Cervical Cancer Screenings**

Women, age 51-75, all products, who have been continuously enrolled for one year and have not had a claim for a mammogram in the past 18 months; and women, age 24-64, all products, who have been continuously enrolled for three years and have not had a claim for a Pap test in the past 3 years.

#### **Colorectal Cancer Screening**

Women and men, age 51-75 (starting at 45 years old for African Americans, Native Americans and Alaskan Natives), all products, who have been continuously enrolled for one year and have not had a claim for a colonoscopy in the past 10 years or a fecal occult blood or FIT test in the past year.

If you have any questions regarding these initiatives, please contact us at [quality@healthpartners.com](mailto:quality@healthpartners.com).

## Preferred Drug List (Drug Formulary)

**Drug formularies are available at [healthpartners.com/formulary](http://healthpartners.com/formulary).**

Quarterly formulary updates and additional information such as Prior Authorization and Exception Forms, Specialty Pharmacy information, pharmacy newsletters and Pharmacy and Therapeutics (P&T) Committee policies are available at [healthpartners.com/Providers/Pharmacy\\_Services](http://healthpartners.com/Providers/Pharmacy_Services).

Pharmacy Customer Service is available to providers (physicians and pharmacies) 24 hours per day and 365 days per year.

- Fax: 952-853-8700 or 1-888-883-5434 Telephone: 952-883-5813 or 1-800-492-7259
- HealthPartners Pharmacy Services, 8170 33rd Avenue South, PO Box 1309, Mpls, MN 55440
- HealthPartners Customer Service is available from 8 AM - 6 PM Central Time, Monday through Friday. After hours calls are answered by our Pharmacy Benefit Manager.

## Drug Formulary

Several changes have been made to the HealthPartners Commercial Drug Formulary, including:

- Nasonex and Veramyst, nasal inhalers for allergies, will be non-formulary effective October 1 2015. Multiple effective and lower-cost products are available. Additional communications are being sent to affected providers and members. Members will be asked to change to preferred products. Preferred products include fluticasone (Flonase generic) and flunisolide (Nasarel generic). Qnasl remains an option on the PreferredRx and EnhancedRx Drug Formulary. OTC options include Flonase and Nasacort.
- Glyburide has been added to formulary with add an age and gender edit, for women  $\leq 40$  years of age. Glyburide was recently deleted from the formulary and is being added back to allow use for gestational diabetes.

Please see the online formulary for details at [healthpartners.com/formularies](http://healthpartners.com/formularies).

## Health Insurance Exchange Grace Period Information

Federal regulations (45 CFR 156.270) specify requirements that must be followed for terminating the coverage of Health Insurance Exchange enrollees who are receiving advance payments of premium tax credits (APTC).

In accordance with both federal regulations and the MN Administrative Uniformity Committee (AUC) Best Practice, HealthPartners began reporting Health Insurance Exchange Grace Period information in the Eligibility Response through the HIPAA 270/271 EDI transaction and HealthPartners provider portal as of **March 26, 2015**. View the [Health Care Eligibility Inquiry and Response \(270/271\) Best Practice](#).

For additional information and background regarding applicable federal regulations and the need for this best practice, refer to [AUC Best Practices to Meet Requirements for Health Insurance Exchange Grace Period Notifications](#) (per 45 CRF 156.270(d)(2)).

## CLINICAL INFORMATION

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### Case Management

Working in partnership with physicians, HealthPartners Medical Disease and Case Management professionals ensure that patients receive the support services needed to manage their conditions and optimize their health.

The HealthPartners Complex Case Management program provides case management services to patients with complex medical diagnoses who are experiencing frequent hospitalizations, emergency room use, increasing medical complexity and utilization, psycho-social issues and/or a decline in functional status.

HealthPartners Disease Management services provide support and coaching to patients with Asthma, CAD, COPD, diabetes, cancer and low back pain and to women who are pregnant. The team also supports patients with 14 additional rare neurological, pulmonary, rheumatologic and hematologic diseases. CHF and COPD patients have the added benefit of in home telemonitoring for risk management at no cost to the patient.

Using fully integrated systems, processes and information platforms, these services have been shown to optimize health and care, reduce hospital admissions and readmissions, and maximize appropriate use of available resources—all while enhancing an exceptional experience for patients and physicians.

### How the Services Work

Using personalized health coaching techniques and behavioral strategies including motivational interviewing, intrinsic coaching and shared decision making, HealthPartners Disease and Case managers provide tailored interventions designed to:

- Support medication adherence
- Ensure coordination of patient care and management of barriers
- Identify and close gaps in care
- Strengthen the patient's relationship with their provider and clinic

A skilled set of registered nurses, registered dietitians, pharmacists and social workers ensure that each patient receives the support and level of service appropriate to their circumstances. The team collaborates with physicians frequently throughout the duration of the patient's participation in the program, including care plan updates and reports of the patient's progress towards goals.

## Engaging Disease and Case Management Services

Referrals to all HealthPartners Disease and Case Management services can be made through the HealthPartners Provider Portal or by phone via HealthPartners Connect 952-883-5469 (1-800-871-9254). HealthPartners Disease and Case Management also receives referrals through the EMR for select care systems and welcomes inquiries from others about expanding this service further.

## Provider Data Profiles

### Can patients find you on the web?

The Provider Data Profiles application has been upgraded with a new look and improved functionality. This application gives HealthPartners contracted providers the ability to view, verify and correct clinic or hospital demographic information displaying in the HealthPartners website and paper directories. Members use this information to help them choose a clinic, hospital or practitioner for their medical care.

Following are examples of the changes you can make using the Provider Data Profiles Application tool:

- Update your address or office hours for your location
- Verify if a practitioner is linked to a location
- Add new administration contacts so we can keep you up-to-date
- Update practitioners to identify those that are not accepting new patients
- Terminate practitioners that are retiring or leaving
- Terminate a location that's closing

To access your clinic's Provider Data Profiles:

Log in at [healthPartners.com/provider](http://healthPartners.com/provider). Contact your clinic's HealthPartners Provider Portal site delegate if you do not see the Provider Data Profiles link in your application list. Questions? Contact [Provider Relations](#).

## GOVERNMENT PROGRAMS

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### Government Programs Incentives

HealthPartners has several new and continuing incentives for our PMAP, MinnesotaCare and MSHO members. Please see the information below for details.

#### PMAP and MinnesotaCare Programs and Incentives

- **Car Seat Program:** We are thrilled to now offer car seats for our PMAP and MinnesotaCare members. Members ages 0-8 can receive a convertible car seat or booster seat upon completion of a car seat safety education class. Members can call Member Services at 952-967-7998 to connect to their nearest car seat education provider.
- **Healthy Pregnancy Program Incentives:** To support members during pregnancy, we are now offering an incentive to participate in our Healthy Pregnancy Program. Members receive one \$25 Visa gift card for enrolling in the email or interactive phone-based program during their pregnancy. Members receive a second \$25 Visa gift card for completing the email or interactive phone-based program. Call Member Services at 952-967-7998 to enroll.
- **Adolescent Immunizations Incentive:** Vaccines are important at all ages. Adolescents, ages 11 and 12, who complete the two required immunizations, meningococcal and Tdap, will receive a \$25 Visa gift card in the mail.
- **Well Baby:** Our Well Baby Incentive Program is designed specifically to improve C&TC rates by incenting new parents to bring their infants in for their well-child visits. Children ages 0 to 15 months who have a well-child exam receive a \$10 Target gift card (for up to 6 gift cards by age 15 months). To make it easier for members and providers, no voucher is required.
- **Post-Partum Care:** HealthPartners offers a \$20 Target gift card to PMAP and MinnesotaCare members who complete their postpartum visit between 3 and 8 weeks (21-56 days) following the birth of their baby. This visit can be in the clinic or with a public health home visiting nurse. To inform members of this incentive, a postcard is sent to the member's home after the delivery of her baby with a voucher for the visit, as well as questions to ask her provider at the visit. Members can also order the "What to do When My Child Gets Sick Book" and receive a call from a nurse explaining how to best use the book to care for her child.

## MSHO Incentives

- **MSHO Preventative Screening Incentives:** MSHO members who have had or get a colorectal, mammogram or bone density screening in 2015 will receive a \$20 Target gift card. To make it easier for members and providers, no voucher is required.

Contact Riverview Member Services (952-967-7998) with questions about these incentives.

## Medicaid – Mental Health - WHODAS

This is a reminder that as of October 1, 2014, Medicaid requires that mental health professionals use the WHODAS 2.0 when conducting a diagnostic assessment for an adult. Minnesota Administrative Rules require a functional assessment as part of the diagnostic assessment. Failure to submit a WHODAS may result in the diagnostic evaluation not being accepted and a subsequent delay in authorization of treatment/services. Please refer to the DHS website for additional information

## EVENTS

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### Continuing Medical Education Activities

**Fundamental Critical Care Support**

*July 16-17 and October 22-23*

Embassy Suites, St. Paul

**Primary Care Update: Pathways to Knowledge**

*September 24-25*

Courtyard by Marriott, Minneapolis

**Behavior in the Workplace: Envision a Great Culture – Engage in Making it Happen**

*October 6*

Naegele Auditorium, Park Nicollet Clinic, St. Louis Park

**Sneezes and Wheezes: An Update on Respiratory Conditions**

*October 9*

Naegele Auditorium, Park Nicollet Clinic, St. Louis Park

**Urgent Care: An Old Concept in the New Millennium**

*October 29-30*

Naegele Auditorium, Park Nicollet Clinic, St. Louis Park

**Let Us Give You a Hand: Managing Common Hand Conditions**

*November 6*

HealthPartners Conference Center, Bloomington

**Geriatric Update**

*December 10-11*

Naegele Auditorium, Park Nicollet Clinic, St. Louis Park

For registration information or to request a brochure, call the Office of Continuing Medical Education at 952-993-3531 or visit [parknicollet.com/cme](http://parknicollet.com/cme).

## WEBINAR: Cultural Competency in Antidepressant Management

A person's culture influences all areas of their life – including their views on mental health diagnosis and treatment. This webinar will:

- Discuss the influence that a person's culture has on interactions with the health care system and how providers can recognize and respond to these cultural issues.
- Share learnings from focus groups where individuals from diverse communities discussed perceptions and experiences with mental health care.
- Introduce participants to a Provider Toolkit to increase antidepressant medication adherence and reduce racial and ethnic disparities in depression management.

This webinar is sponsored by a collaboration of health plans; Blue Cross Blue Shield of Minnesota, HealthPartners, Medica, Hennepin Health, Metropolitan Health Plan and UCare, with support from Stratis Health.

For more information on the webinar, visit [stratishealth.org/pip/antidepressant.html](http://stratishealth.org/pip/antidepressant.html). To register, email CJ at [Carroll.J.Helm@HealthPartners.com](mailto:Carroll.J.Helm@HealthPartners.com).

## Toolkit for Depression Management Available

Depression is the most common form of mental illness in the United States, and primary care continues to be the place the majority of people are diagnosed and treated. Treatment for depression often includes antidepressant medication, yet adherence to prescribed medication is less than 60 percent. Research suggests that adherence is even lower among certain racial and ethnic minority groups, which may have alternative views of mental health and how to treat it.

To help address antidepressant medication adherence issues, the [Antidepressant Medication Management Provider Toolkit: Tools to increase antidepressant medication adherence and reduce racial and ethnic disparities in depression management](#) was developed. It is a compilation of strategies and best practices to aid practitioners in depression management with their patients. It was created as part of a performance improvement project by a collaboration of health plans: Blue Cross Blue Shield of Minnesota, HealthPartners, Medica, Hennepin Health, Metropolitan Health Plan and UCare, with support from Stratis Health.

The toolkit is a collection of relevant resources and tools for providers working with patients experiencing depression, with an emphasis on racial and cultural perspectives. The toolkit includes resources on:

- Best practices for depression care
- Mental health resources for providers and patients
- Cultural competency
- Shared decision making

The toolkit is available on the Stratis Health website at [stratishealth.org/pip/antidepressant.html](http://stratishealth.org/pip/antidepressant.html).

If you have questions regarding the content of this newsletter, please contact the person indicated in the article or call your HealthPartners Service Specialist. If you don't have his/her phone number, please call 952-883-5589 or toll-free at 888-638-6648.

This newsletter is available online at [healthpartners.com/provider](http://healthpartners.com/provider) (pathway: Log into the Provider Portal).

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