

# Select Health of South Carolina Progress Notes



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## CMO Update: SCHIP and Medicaid Benefits

By Fred M. Volkman, M.D., FAAP

**I recently attended the South Carolina American Academy of Pediatrics meeting and**

**had the opportunity to speak with many of the pediatricians in the Select Health network.**

I appreciate all of the positive feedback I received, but I also noticed some concerns about the differences in benefits between the State Children's Health Insurance Program (SCHIP) and the Medicaid program.

SCHIP was enabled by the state legislature, and the first members were enrolled in the program in May 2008. Medicaid and SCHIP are both managed through the South Carolina Department of Health and Human Services, but SCHIP benefits are based on the State Employee's Health Plan. With several thousand children now enrolled in the program, it might be helpful to review the key differences in benefits.

There is no Fee-for-Service option in SCHIP. It is an MCO only plan. MCOs manage behavioral health/substance abuse in SCHIP. These services require prior authorization by Select Health but

are carved out under Medicaid. Medically appropriate Chiropractic (limited to 8 visits), Podiatry services and inpatient rehabilitation is covered under SCHIP but currently excluded in Medicaid. SCHIP allows more Skilled Nursing Facility days than Medicaid. There is also a vision benefit.

There is an important exclusion regarding speech, occupational and physical therapy, which has been a source of confusion among pediatricians and therapists.

Like Medicaid, SCHIP covers therapies to restore bodily function that has been lost because of trauma or disease. **Unlike Medicaid, these therapies are excluded for developmental delays in SCHIP.**

The majority of therapy requests in young children are for developmental delays. Though an evaluation is covered, if the need for therapy is due to developmental delay, Select Health is unable to cover those services.

As a pediatrician, I understand the medical necessity of these therapies. However, the exclusion does not allow us to cover the benefit like we do for Medicaid. It's important to remember that SCHIP provides health coverage for many children who previously had none, but it is different than Medicaid. ■

## Member Satisfaction Results

Each year, we contract with a National Committee for Quality Assurance (NCQA) certified vendor to conduct our member satisfaction survey. NCQA uses the CAHPS® (Consumer Assessment of Healthcare Providers and Systems) survey for health plans to measure members' satisfaction. We are happy to report that Select Health ranked higher than the national average in many key areas of the survey.

The survey aims to capture accurate and complete information related to the members' experiences with healthcare and the services provided by the plan. Specifically, the survey addresses areas such as the timeliness of medical service and the ability to get information from a health plan. CAHPS® results indicate how well the plan and its providers are meeting the members' expectations, while also identifying opportunities for improvement.

The survey was given to a sample of 1,485 adult members from January through May of 2009, using the CAHPS® 4.0H Medicaid Adult Survey. Using a combination of mail and telephone reminders, 34% of surveyed members responded.

Medicaid plans across the county use this survey, providing a substantial database of comparable information. We used NCQA's Quality Compass – Adult Medicaid database for benchmarking and comparison purposes of the plan's adult Medicaid satisfaction survey. We review the results and identify opportunities for improvement and implement interventions. To offer your input, please contact your Contract Management Representative.

Our results are listed in the graph below, along with NCQA's Quality Compass Medicaid mean data for comparison.

### Select Health of South Carolina Medicaid Adult CAHPS® Key Findings

	Select Health Results	2009 Quality Compass Mean
Getting Needed Care	79%	76%
Getting Care Quickly	84%	80%
How Well Doctors	92%	87%
Rating of Health Plan	79%	72%
Customer Service	85%	80%
Rating of Healthcare	77%	67%
Rating of Personal	85%	76%
Rating of Specialist	81%	76%

# The First National “Health Literacy and Plain Language Resource Guide”



Low health literacy is a serious problem that costs the healthcare industry billions of dollars each year. With the high prevalence of chronic illnesses such as diabetes, asthma and heart disease, it is imperative that patients successfully obtain, process and understand health-related information to live a balanced and healthy life.

Using plain language is an excellent way to improve health literacy in patient-provider communications. Increased health literacy will improve outcomes and reduce healthcare costs while encouraging patients to manage their conditions and participate in preventive care.

Health Literacy Innovations, in partnership with the AmeriHealth Mercy Family of Companies, produced the nation’s first “Health Literacy and Plain Language Resource Guide.” This free guide will assist healthcare professionals in accessing many tools, standards and resources related to health literacy and plain language.

This guide is available in the Provider Center of our website, [www.selecthealthofsc.com/firstchoice](http://www.selecthealthofsc.com/firstchoice). Please use this guide as you continue to enhance the quality services you provide for our members. For more information, call Cultural Competency Coordinator Jill Lemay at 843.529.5218. ■

Have you read our Member Rights and Responsibilities?  
Visit the Provider section of our website at [www.selecthealthofsc.com](http://www.selecthealthofsc.com), and a take a minute to read over the rights and responsibilities for our members.

## Breast and Cervical Cancer Screening FAQs

The following chart provides answers to frequently asked questions and concerns about breast and cervical cancer screenings, including clinical practice guidelines.

Patient Type	Recommended Test Type
<b>Breast Cancer Screening</b>	
Women ages 35 to 40	High-risk women should have a baseline mammogram
Women ages 40 to 49	A baseline mammogram at age 40 and then every 1 to 2 years thereafter
Women ages 50 to 59	Mammogram every year
All women ages 20 to 59	Physician breast exam annually and monthly self breast exams
<b>Cervical Cancer Screening</b>	
Women by age 21, or at least three years after first sexual encounter (whichever comes first)	First cervical cancer screening should occur
Women between 21 and 30 years of age	Should obtain yearly cervical cancer screenings
Women older than 30 years of age	Cervical cancer screenings every 2-3 years if no history of CIN2 or CIN3, are not immunocompromised, HIV negative and not exposed to DES
High-risk women 30 years of age or older	Yearly cervical cancer screenings

## NaviNet News

Select Health is proud to announce that we have partnered with NaviNet to provide you with a free, easy to use healthcare communications network, which will link providers to the nation’s leading health plans.

With NaviNet, you can access Select Health and other health plans through one secure Web portal, which requires only one username and password. No more jumping in and out of different health plan websites and remembering different usernames and passwords!

NaviNet’s core-needs suite of provider solutions is free, easy to use and requires only a PC and an internet connection to get immediate access to America’s largest healthcare communications network. Add-on solutions are available at a low cost.

Navinet offers you:

- Real-time information from multiple health plans right at your desktop.
- Individual usernames and passwords.
- Access to common transactions such as eligibility, benefits and claim status inquires across multiple health plans.
- Time savings by eliminating the need to visit multiple web sites or wait on the telephone.
- Decreased paperwork between the provider office and health plans
- Clinical communications through the Intensive Case Management program, which supports collaboration with patients, the health plan, colleagues and other healthcare partners to enhance the delivery of quality care.

With this enhanced network, eventually access to Select Health’s secure services web portal will be phased out. Your only avenue will be through the NaviNet portal. Therefore, Select Health is encouraging you to use NaviNet as a tool to help streamline your workflow and more effectively control your organization’s daily routine.

For more information or to register for this service, visit the Select Health website at [www.selecthealthofsc.com/firstchoice](http://www.selecthealthofsc.com/firstchoice), and click on the NaviNet link in the Provider section.

# RSV Season

As the Respiratory Syncytial Virus (RSV) season approaches, we are providing a review of our prior authorization procedure for Synagis. Criteria has been updated this year based on the changes made in the 2009 American Academy of Pediatrics Red Book guidelines.

Select Health, in conjunction with its pharmacy benefit administrator PerformRx, will approve the administration of Synagis® from November 1, 2009, to March 31, 2010, for First Choice and First Choice

Kids members who meet the prior authorization requirements. Doses will be limited to a maximum of either 3 or 5 doses depending on gestational age, chronological age, and clinical condition. For a copy of our criteria, please visit the Pharmacy section of the Select Health website at [www.selecthealthofsc.com](http://www.selecthealthofsc.com).

Please contact PerformRx at 866.610.2773 for a copy of the prior authorization form. A representative will fax the form to you and is also available if you need assistance completing the form. If you choose to administer Synagis® in your office this year, we can ship the drug via our preferred vendor, CarePlus Specialty Pharmacy (for-

merly PharmaCare Specialty Pharmacy). CarePlus can be reached at 800.619.2531. Select Health will reimburse your office for the nurse visit and drug administration. Please use CPT codes 99211 and 90772.

If you have any questions about Synagis® administration, please contact PerformRx at 866.610.2773. ■



# Flu Vaccines

Flu season is gearing up again, and this year, there has been additional cause for concern due to the H1N1 Influenza A outbreak.

The Centers for Disease Control and Prevention (CDC) is currently formulating its recommendations for H1N1 influenza A vaccinations, but since recommendations may change on a frequent basis, it is best to access the latest information from our website at: [www.selecthealthofsc.com/firstchoice](http://www.selecthealthofsc.com/firstchoice).

The CDC has published its recommendations for who should receive seasonal influenza vaccinations. Below are previously identified risk groups that fall under CDC's recommended vaccination for Seasonal Influenza.

- Children ages 6 months to 18 years of age
- Pregnant women
- Breastfeeding mothers
- Employees of assisted living and other residences for people in groups at high risk
- People who provide home care to others in groups at high risk
- Household contacts (including children) of people in groups at high risk
- People age 50 and older
- People of any age with certain chronic medical conditions such as chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological or metabolic disorders (including diabetes mellitus)
- People who have immunosuppression (including



# Coding Children's Vaccines

Providers who are participating in the South Carolina Vaccination Administration for All Children (VAFAC) do not need to include vaccination codes on claims submitted for First Choice or First Choice Kids members.

While you do need to maintain documentation that the vaccination was provided, Select Health does not require reporting of the vaccination code on the claim forms.

We encourage all pediatric providers to enroll in the VAFAC program. For more information about the program, visit the South Carolina Department of Health and Environmental Control website at [www.scdhec.gov](http://www.scdhec.gov).

immunosuppression caused by medications or by human immunodeficiency virus)

- People who have any condition (e.g., cognitive dysfunction, spinal cord injuries, seizure disorders, or other neuromuscular disorders) that can compromise respiratory function or the handling of respiratory secretions or that can increase the risk for aspiration

All patients should be encouraged to get a yearly flu vaccination—especially those who are identified as high risk by CDC standards.

The flu vaccine is covered for all Medicaid-eligible beneficiaries. However, the Flu-Mist vaccine is not covered for members 19 years of age or older. ■

**Visit the the Select Health website ([www.selecthealthofsc.com/firstchoice](http://www.selecthealthofsc.com/firstchoice)) for information about flu vaccine recommendations.**

# Programs To Help Your Patients

We would like to remind you of our case management programs, which may benefit your First Choice and First Choice Kids patients.

**Intensive Case Management** – Our nurses work one-on-one with patients who have complex medical issues. This includes members with multiple comorbidities and members with a single, complex diagnosis like metastatic cancer.

**Healthy Moms and Babies** – This program aims to improve health outcomes of our prenatal members and their babies. Our nurses follow high-risk members throughout their pregnancy and post-partum period. Nurses also follow the newborns that require NICU admission. They make sure the babies receive the best care possible and help new moms as they learn to care for their special newborns.

**Disease Management** – We have several disease-specific programs. Interventions range from one-on-one nurse interaction for high-risk members to periodic educational mailings for low-risk members.

- **Breathe Easy** – asthma management program with a special emphasis on promoting member compliance with controller medications
- **In Control** – diabetes management program for members of all ages with the goal of preventing or reducing long-term complications
- **Living Well** – heart failure management program with an emphasis on self-management interventions such as daily weights and medication compliance
- **Sickle Cell Program** – assisting members with sickle cell to get the care they need to better manage their disease

**Emergency Room Program** – We reach out to frequent ER users to direct them to more appropriate sources of care, such as their PCP or an Urgent Care Center.

**Rapid Response Program** – This program is designed to meet the short-term or episodic needs of some of our members—especially members who have had recent hospitalizations.

If you have members who would benefit from one of our programs, call Case Management at **1.888.559.1010, ext 55251.** ■

## Modifier Usage Reminders

Helpful information on modifier usage, especially for modifiers 25, 51 and 79.

**Modifier 25** should only be appended to Evaluation and Management (E&M) codes. No other usage of this modifier is appropriate when appended to any other CPT codes. It should only be used when the E&M service is a separate and significant service from the procedure performed on the same day. It should not be used to bill two E&M services on the same date.

**Modifier 51** is appended to indicate multiple procedures performed on the same date of service. This modifier may be appended but is not required as our claims processing system is configured to apply multiple procedure reductions per SCDHHS guidelines. It is appropriate to use on surgical, radiology and medicine code sets. It should not be used with add-on codes identified with a "+" or modifier 51 exempt codes indicated by "Ø" in the CPT book.

**Modifier 79** is appended to surgery and medicine CPT codes. It indicates that the current procedure performed during the post-operative period is unrelated to the original procedure. We follow the South Carolina Medicaid global period guidelines of 30 days. This modifier should not be appended to E&M services and is not appropriate when other procedures are performed on the same date. ■

To report suspected fraud and abuse, please contact the Corporate and Financial Investigations Unit Fraud Hotline at 866.833.9718 or the SCDHHS Fraud and Abuse Hotline at 888.364.3224.

Contract Management Representatives	
Lowcountry	Lisa Hart 843.569.4614
PeDee	Paige Watford 843.933.0276
Midlands	Kay Steele 803.348.5792
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