

# Select Health of South Carolina Progress Notes



## Inside this Issue:

**2** Select Health's 2009 HEDIS Results  
Improve Communication with Patients

**3** H1N1 Vaccine  
After-Hours Care  
Are You Using NaviNet?

**4** Appropriate Prescribing of Antibiotics  
Smoking Cessation Products

Winter 2009



## CMO Update

### Achieving Quality Results: HEDIS 2009 Results Shows Improvement in Key Areas

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

**I am pleased to announce that Select Health continues to demonstrate improvements**

**in many of the Healthcare Effectiveness Data and Information Set (HEDIS) measures.**

On behalf of Select Health, I would like to extend our appreciation to all of the physicians and their staff for cooperating and participating in the 2009 HEDIS project.

HEDIS is one of the most widely used healthcare performance measures in the United States. HEDIS is a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service. Many of the measures focus on preventive care, such as well-child visits and mammograms. Other measures look at specific

care for chronic illnesses, such as asthma or diabetes. Select Health uses these results to evaluate the efficacy of the plan's health management programs as well as adherence to clinical and preventive health guidelines.

We use NCQA's Quality Compass database to benchmark plan performance to other Medicaid plans across the country. Quality Compass includes NCQA accreditation, HEDIS and Consumer Assessment of Health Plans (CAHPS) data for hundreds of health plans as well as national and regional benchmarks.

Select Health's 2009 HEDIS results (measuring 2008 data) demonstrate an improvement in the quality of care and the services received by our members.

Highlights from our 2009 HEDIS results are listed in the chart on page 2. To compare First Choice results with Medicaid plans across the country, we have included results from NCQA's Quality Compass database. ■

## Treating Sickle Cell

We are committed to working with you to promote positive outcomes for our members with sickle cell. Listed below is a summary of recommendations from the National Heart Lung and Blood Institute for the treatment of sickle cell disease:

1. Daily penicillin prophylaxis should be given to all sickle cell patients < 5 years of age.
2. Pneumococcal vaccines (and all childhood vaccines) prevent death from infection. 7 component vaccine is started at 2 months.

23 component vaccine is added to the 7 component schedule at 2 years of age.

3. Flu shots are critically important.
4. A temperature >101.3 is a life-threatening emergency. Medical care should be sought immediately.
5. Chest pain is a life-threatening emergency. Medical care should be sought immediately.
6. Folate supplementation (usually by prescription) should be given to all sickle cell patients.

Sickle cell disease guidelines can be found in the Provider section of our website at: [www.selecthealthofsc.com/firstchoice](http://www.selecthealthofsc.com/firstchoice) ■

## Clinical Practice and Preventive Guidelines

Select Health strives to keep you aware of the plan's Clinical Practice and Preventive Guidelines as we update them.

You can easily access these guidelines from our website. Visit [www.selecthealthofsc.com/firstchoice](http://www.selecthealthofsc.com/firstchoice), and click on the Provider tab.

The Clinical Practice and Preventive Guidelines are reviewed by specialty appropriate physicians and are approved by the plan's Quality of Clinical Care Committee at least every two years or when updated information becomes available. The Preventive Guidelines section includes guidelines for adults, children and obstetrical care.

This year the following updates were made to the Preventive Guidelines:

- Addition of Chlamydia Infection Screening for all sexually active non-pregnant young women age 24 and younger and all older non-pregnant women who are at increased risk to adult preventive health guidelines.
- Addition of Anatomy Screening between 18-22 weeks for obstetrical care guidelines.

The Clinical Practice Guidelines section includes updated guidelines for congestive heart failure, pharyngitis, sickle cell disease, asthma and diabetes. These guidelines represent current professional standards, supported by scientific evidence and research.

If you do not have Internet access and would like a copy of the guidelines, please contact your local Contract Management Representative. ■

# Select Health's 2009 HEDIS Results

HEDIS Measure	Select Health HEDIS 2008	Select Health HEDIS 2009	HEDIS Medicaid Mean 2008
<b>Comprehensive Diabetes</b>			
HbA1c Testing	76.73%	80.57%	77.24%
HbA1c Poor Control (results >9, lower rates indicate better care)	Not reported	55.41%	48.05%
LDL Screening	69.70%	76.16%	70.78%
LDL Control (results <100)	Not reported	33.55%	31.28%
Screening for Nephropathy	73.11%	77.04%	74.24%
Diabetes Retinal Eye Exam	45.50%	49.01%	49.79%
<b>Asthma Use of Appropriate Medications</b>			
Ages 5 to 9	93.36%	94.10%	89.22%
Ages 10 to 17	93.10%	92.07%	86.78%
Ages 18 to 56	83.85%	81.52%	84.44%
<b>Prenatal/Postpartum</b>			
Timeliness of Prenatal Care	77.73%	83.44%	81.60%
Frequency of Ongoing Prenatal Care (>81% of expected visits)	54.89%	57.85%	59.44%
Frequency of Postpartum Care	57.26%	67.55%	58.51%
<b>Well-Child Visits</b>			
First 15 months (6 or more visits)	47.27%	54.76%	52.8%
Ages 3 to 6	54.05%	60.84%	65.28%
Adolescents	26.86%	33.49%	42.13%
<b>Appropriate Testing for Children with Pharyngitis</b>			
Ages 2 to 18	64.53%	64.8%	58.51%
<b>Appropriate Treatment for Children with Upper Respiratory Infection</b>			
Ages 3 months to 18 years	84.81%	85.07%	84.06%
<b>Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis</b>			
Ages 18 to 64	27.64%	26.61%	25.97%
<b>Breast Cancer Screening</b>			
Women ages 42 to 64	46.66%	50.87%	49.75%
<b>Cervical Cancer Screening</b>			
Women ages 21 to 64	60.23%	62.03%	64.64%

## Utilization Management Reminder

Utilization management (UM) decision making is based only on the appropriateness of care and services and existence of coverage. Select Health does not reward practitioners or other individuals conducting utilization review for issuing denials of coverage or services. Financial incentives for UM decision makers do not encourage decisions that result in underutilization.

## Improve Communication with Patients



In the last issue of *Progress Notes*, we provided you with information about the first national *Health Literacy & Plain Language Resource Guide*. We hope that you have found it to be invaluable as you continue to enhance the quality of services that you provide for our members. If you have not yet accessed this excellent tool, visit the Provider section of our website at: [www.selecthealthofsc.com/firstchoice](http://www.selecthealthofsc.com/firstchoice)

Low health literacy is not just an issue for patients when they are completing forms, understanding prescription labels or reading information about their health condition. Patients also struggle with low health literacy when they are in the exam room one-on-one with a provider. According to the American Medical Association, studies have shown that effective communication with patients has a positive effect on medical outcomes. These benefits include lower rates of anxiety, pain and psychological distress and higher rates of compliance and symptom resolution.

Clear and concise instructions delivered to patients by clinicians are associated with improved rates of adherence to medical advice. Here are six steps to improve interpersonal communication with patients:

1. **Slow down.** Communication can be improved by speaking slowly and by spending just a small amount of extra time with each patient. This will help foster a patient-centered approach to the clinician-patient interaction.
2. **Use plain, non-medical language.** Explain things to patients like you would explain them to your grandmother.
3. **Show or draw pictures.** Visual images can improve the patient's recall of ideas.
4. **Limit the amount of information provided – and repeat it.** Information is best remembered when it is given in small pieces that are pertinent to the tasks at hand. Repetition further enhances recall.
5. **Use the “teach back” technique.** Confirm that patients understand by asking them to repeat your instructions.
6. **Create a shame-free environment: Encourage questions.** Make patients feel comfortable asking questions. Enlist the patient's family or friends to help promote understanding.

For more information, please contact Cultural Competency Coordinator Jill Lemay at [jillian.lemay@selecthealthofsc.com](mailto:jillian.lemay@selecthealthofsc.com).

Source: *Health literacy and patient safety: Help patients understand. Manual for clinicians, Second edition, Barry D. Weiss, MD, American Medical Association Foundation*

# H1N1 Vaccine

## Who should receive the H1N1 vaccine?

As you may know, the Centers for Disease Control and Prevention (CDC) are providing the novel influenza A (H1N1) vaccine at no cost to all providers. Providers are strongly encouraged to contact their local health departments for information on how to get the vaccine and/or how to refer members for vaccination.

According to the CDC Advisory Committee on Immunization Practices (ACIP), the 2009 H1N1 vaccine is recommended for the following 5 target groups:

- Pregnant women
- Household and caregiver contacts of children younger than 6 months of age (e.g. parents, siblings, and daycare providers)
- Healthcare and emergency medical services personnel
- People from 6 months through 24 years of age
- People age 25 through 64 who have medical conditions associated with a higher risk of influenza complications

Once providers meet the demand for vaccine among people in these initial target groups, vaccination is recommended for all people 25 through 64 years of age.

We follow CDC guidelines for H1N1 administration, and it is covered by the plan. (Please review the next section for more about reimbursement for the vaccination.)

If you have questions, please contact your Contract Management representative. For more information about the H1N1 vaccine, visit [www.flu.gov](http://www.flu.gov) or the CDC web site at: [www.cdc.gov/h1n1flu/vaccination/public/vaccination\\_qa\\_pub.htm](http://www.cdc.gov/h1n1flu/vaccination/public/vaccination_qa_pub.htm).

## Billing H1N1 and Seasonal Flu Vaccines

The South Carolina Department of Health and Human Services has released coverage policy for H1N1 flu administration. As of October 1, reimbursement will be provided for administration of the H1N1 vaccine. The policy for flu vaccination is being expanded



this year to include H1N1 in addition to one seasonal flu vaccination. Multiple doses will be covered. The H1N1 vaccine is not being provided as a Vaccine Assurance for All Children (VAFAC) covered procedure. It will not count toward the three per day limit.

**For influenza A (H1N1) administration, providers should bill:** 90470 – H1N1 immunization administration (intramuscular, intranasal). Seasonal influenza services should continue to be billed following current policy.

The vaccine is being provided by the federal government free of charge. Information about vaccine distribution can be found on the CDC website at [http://www.cdc.gov/H1N1flu/vaccination/statelocal/centralized\\_distribution\\_qa.htm](http://www.cdc.gov/H1N1flu/vaccination/statelocal/centralized_distribution_qa.htm)

When billing for vaccines that are not covered under the VAFAC program or if the beneficiaries are over age 19, the provider may bill for the vaccine and the administration code using 96372. Administration of vaccines covered under the VAFAC program should be billed using 90471-90474. ■

## After-Hours Care

To help ensure that members have access to high quality healthcare services, primary care providers are required by contract to be available 24 hours per day, seven days per week, either directly or through shared call.

In the unusual event that a member cannot reach his or her primary care provider, the Medical Services Department will assist the member in arranging for care.

- The primary care physician must

be accessible 24 hours a day, seven days a week, either personally or through coverage arrangements with a designated contracted primary care physician.

- Primary care physicians must be available at least 20 hours per week at each primary care site for scheduled visits.
- Primary care physicians' offices must be easily accessible by phone during normal business hours.

Specialists are required to be available 24 hours per day, seven days a week through on-call arrangements or emergency department call rotations.

If you have any questions about these requirements, please contact your Select Health Contract Management representative. ■

## Are You Using NaviNet?

NaviNet is an easy-to-use, free Web portal that links providers with health plans, including Select Health. With a single login and password, you can review real-time patient information, such as eligibility, benefits and claims status, from several different health plans.

In addition to checking eligibility and claims status, you can now receive clinical alerts through NaviNet. These alerts will allow you to identify care gaps before a member comes in for a visit.

**With this enhanced network, access to Select Health's secure services web portal will eventually be phased out.** Your only avenue to check eligibility and claims status will be through the NaviNet portal.

Therefore, we encourage you to start using NaviNet today. Visit <https://navinet.navimedix.com>, and click on the "Sign Up Now" link to start the enrollment process. ■



## Appropriate Prescribing of Antibiotics

According to the Centers for Disease Control and Prevention (CDC), antibiotic resistance has been called one of the world's most pressing public health problems. In addition, the number of bacteria resistant to antibiotics has increased in the last decade.

Antibiotics will not cure viral illness such as colds or flu, most coughs and bronchitis and sore throats not caused by strep.

In an effort to provide education about the inappropriate prescribing of antibiotics, the CDC has launched a nationwide "Get Smart: Know When Antibiotics Work" campaign. Educational material regarding the appropriate use of antibiotics can be found on the CDC website at:

[www.cdc.gov/getsmart/campaign-materials/treatment-guidelines.html](http://www.cdc.gov/getsmart/campaign-materials/treatment-guidelines.html) ■

# Smoking Cessation Products

Select Health covers several products for a limited 90-day period of time to help your patients stop smoking. Preferred products include Zyban, Chantix, nicotine gum and nicotine patches.

- Zyban and Chantix will fill at the pharmacy with no prior authorization for up to 90 days. Quantity limits of two tabs daily apply.
- Patches and gum require prior authorization. If the patches are prescribed, Select Health requires a monthly step down from the 21mg patch to the 14mg patch to the 7mg patch. Quantity limits of 1 patch daily apply. If the gum is prescribed, quantity limits of 330 pieces per month apply. The pharmacy or the physician can obtain prior authorization for the patches or gum.

Please keep in mind that approval length for smoking cessation products is limited to 90 days per rolling 12-month period of time. For example, a member cannot use the patch for 1 month, discontinue use for 4 months and then resume prescription

coverage again. The 90-day benefit is consecutive. Also, members are limited to one product at a time. Multiple products can be tried over the 90 days, but each product will count toward the 90-day maximum. When the first prescription is filled, the 90-day benefit period starts. Once the 90 days benefit is exhausted, the member will need to wait 9 months before becoming eligible again for plan covered smoking cessation products.

Please contact Pharmacy Services at 866.610.2773 if you have questions or if you would like to obtain authorization. ■



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.

Provider Services Contact Information		
Toll free	800.741.6605	
Charleston	843.569.1759	
Fax	843.569.0702	
Website	www.selecthealthofsc.com	
Director, Network Management:	Peggy Vickerly	
Director, Provider Relations:	Philip Fairchild	
Contract Management Representatives		
Lowcountry	Lisa Hart	843.569.4614
FeeDee	Paige Watford	843.933.0276
Midlands	Kay Steele	803.348.5792
Upstate	Joyce Mahon	864.787.0056
Western Border	Terri Woodrome	864.787.8001

PO Box 40849 | Charleston, SC | 29423-0849

An AmeriHealth Mercy Company

**Select Health**  
of South Carolina, Inc.



Presort Standard  
US Postage  
**PAID**  
Charleston, SC  
Permit No 1057