

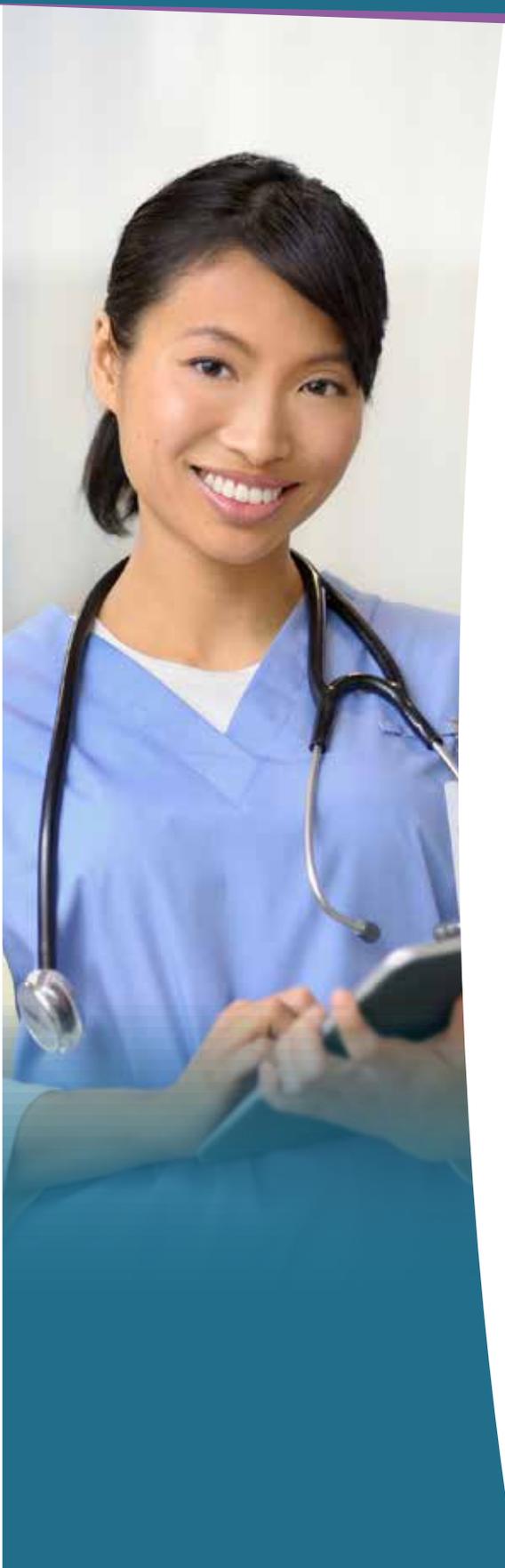
WINTER 2017

ProviderSource

A newsletter for Humana – CareSource® Health Partners

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OPERATIONAL NEWS

Update your contact information on the provider portal

The Centers for Medicare & Medicaid Services (CMS) requires Humana – CareSource to maintain accurate provider information. You can assist us in this effort by ensuring your information is up to date. CMS has asked that we provide expanded information in our provider directories, including:

- A provider website
- Indication that the provider has completed cultural competency training

If your information is not current, it will not appear correctly to members in the provider directory.

You can now submit updates to your demographic information online, including changing your contact information or adding or removing a provider. Simply go to the Provider Portal and select “Provider Maintenance” from the navigation on the left side of the page.

Humana®


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From the Medical Director

According to the Centers for Disease Control and Prevention, about one-third of U.S. adults – or nearly 75 million people – have high blood pressure. Yet only about half (54 percent) of these people have their high blood pressure under control. Humana – CareSource® is working to improve these statistics.

As you know, the cardiovascular health risks of uncontrolled hypertension are great. At Humana – CareSource, we understand the challenges of patient compliance and are dedicated to working with you to achieve positive health outcomes. We are here to help our members follow your treatment and medication plans, as well as understand the importance of diet and exercise.

You can help your Humana – CareSource patients who have been diagnosed with hypertension by documenting the following in the patient's record:

- Diagnosis of hypertension
- Blood pressure results during every visit
- Treatment plan – including medications

We endorse the nationally-recognized, evidence-based clinical guidelines for controlling hypertension issued by the American Heart Association, the American College of Cardiology and the Centers for Disease Control and Prevention. I encourage you to refer to them at **CareSource.com/providers/kentucky/medicaid/patient-care/clinical-guidelines**. Working together, we can help our members control their blood pressure and live healthier and happier lives.

Sincerely,



Lisa Galloway, MD, MRO, FACOEM
Medical Director, Kentucky

Coding and risk adjustment educational opportunities

Humana – CareSource has partnered with Pulse8 and is now offering online ICD-10-CM diagnosis coding and risk adjustment education sessions and webinars. The free one-hour webinars cover documentation and coding of illnesses as well as the basics of risk adjustment. Live and on-demand opportunities include a question-and-answer session after the presentation. On-demand sessions are approved for one continuing education unit (CEU) through the American Academy of Professional Coders (AAPC).

Learn more and register

To learn more about this great educational opportunity and register for webinars, send an email to providerengagement@pulse8.com.

Develop a fraud, waste and abuse plan

In order to protect you, your practice and your patients from fraudulent activities, the Office of Inspector General (OIG) suggests developing and following a voluntary compliance program. There are seven components of an effective compliance program. Following are seven components of an effective compliance program, according to the OIG's "Avoiding Medicare and Medicaid Fraud and Abuse" publication:

1. Conduct internal monitoring and auditing.
2. Implement compliance and practice standards.
3. Designate a compliance officer or contact.
4. Conduct appropriate training and education.
5. Respond appropriately to detected offenses and develop corrective action.
6. Develop open lines of communication with employees.
7. Enforce disciplinary standards through well-publicized guidelines.

For further information, please reference the links below:

OIG Publication: http://oig.hhs.gov/compliance/physician-education/roadmap_web_version.pdf

OIG Publication: <http://oig.hhs.gov/authorities/docs/physician.pdf>

Medicare Learning Network Publication:
https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Avoiding_Medicare_FandA_Physicians_FactSheet_905645.pdf

Report fraud, waste or abuse:

You have many options to report suspected fraud, waste or abuse.

- Call the Provider Services line and follow the appropriate menu option for reporting fraud.
- Write us a letter or complete the Fraud, Waste and Abuse Reporting form on **CareSource.com**. Send it to:
 Humana – CareSource
 Attn: Special Investigations Unit
 P.O. Box 1940
 Dayton, OH 45401-1940
- Fax: 800-418-0248
- Email: fraud@caresource.com



Spread the word about Drug Take-Back Day

National Prescription Drug Take-Back Day aims to provide a safe, convenient and responsible means of disposing of prescription drugs while educating the general public about the potential for abuse of medications. Check the Drug Enforcement Administration website for the next date, time and location of a drug take-back program near you: www.deadiversion.usdoj.gov/drug_disposal/takeback/index.html.

Behavioral health diagnostic assessments with SBIRT

Screening, Brief Intervention, and Referral to Treatment (SBIRT) is an evidence-based approach to identify, reduce and prevent problematic substance use disorders (SUD). There are three major components:

1. **Screening:** Assessing a patient for risky substance use behaviors using standardized screening tools.
2. **Brief Intervention:** Engaging a patient showing risky substance use behaviors in a short conversation, providing feedback and advice.
3. **Referral to Treatment:** Providing a referral to brief therapy or additional treatment to patients who screen in need of additional services.

Just as preventive screening for heart disease or diabetes is customary, diagnostic assessments for early detection of SUD are critical to an individual's physical, behavioral and psychosocial health.

For more information, visit www.integration.samhsa.gov/clinical-practice/sbirt.

Screen children for lead poisoning

Blood lead level screenings should be performed at 12 and 24 months of age. As part of the federal definition of EPSDT services, the Medicaid statute requires coverage for children to include screening blood lead tests appropriate for age and risk factors. If you obtain the specimen (either capillary or venous blood test) and analyze the test in your office, you should report results directly to the Cabinet for Health and Family Services. For additional information, please contact Childhood Lead Poisoning Prevention Program (CLPPP), Division of Maternal and Child Health at 1-502-564-2154.

Education on lead poisoning is an important part of the well-child visit. You should cover:

- Effects of lead poisoning on children
- Sources of lead poisoning
- Pathways of exposure
- How to prevent exposure to lead hazards
- Appropriate testing schedules for children

Please remember that completing a lead risk assessment questionnaire does not count as a lead screening.

Prostate cancer screening guidelines

Current prostate cancer screening recommendations indicate that the benefits of prostate-specific antigen (PSA)-based screenings do not outweigh the potential harms. Other methods of detection, including digital rectal exams and ultrasonography, are recommended.

PSA-based screenings should not be used unless a clinically-indicated diagnosis is present, even in men of optimal age range (55 to 69 years). They should only be completed in the presence of an exclusion diagnosis, including prostate cancer, prostate dysplasia or an elevated PSA test in the prior year.

Please document clinically-appropriate screenings for prostate cancer in the patient's medical record.

Patients with asthma need special care

Although doctors play an important role in effective asthma management, many ethnic and racial minorities don't see a doctor regularly as part of their asthma care. In fact:

- More than one in four African American adults can't afford routine doctor visits.
- Nearly one in seven Hispanic adults can't afford routine doctor visits.*

Humana – CareSource Care Managers educate patients diagnosed with asthma to help them understand and manage their asthma. They cover topics such as medication compliance, asthma trigger control, self-management, care coordination and adherence to treatment plans.

For patients with asthma, please be sure to:

- Prescribe appropriate asthma medications and appropriate delivery devices as needed.
- Remind patients to get their medications filled regularly.
- Ensure that patients know the importance of taking their asthma medications and understands how to take their medications.
- Remind patients not to stop taking asthma medications even if they are feeling better and are symptom free.
- Educate patients on identifying asthma triggers and medication adherence.
- Create an asthma action plan (documented in the patient's medical record) and ensure the patient has a copy.

Humana – CareSource offers disease management and wellness programs for patients with chronic conditions. Humana – CareSource members diagnosed with asthma are automatically enrolled into this program and receive information to help them better manage their condition. This information includes care options for them to discuss with their health care provider.

* www.cdc.gov/asthma/impacts_nation/asthmafactsheet.pdf

Support patients' oral health

Humana – CareSource encourages regular and appropriate oral health care for all patients. Please remember that oral health providers are not the only providers who can administer topical fluoride treatments for children. Treatments may also be administered by pediatricians and primary care providers. A well-child visit is an appropriate time to assess the need for this service and apply the treatment, if needed. As an alternative, please refer your patients to a dentist for services.



Document immunizations

When completing immunization for your Humana – CareSource patients remember to:

- Record the immunizations through the Kentucky Immunization Registry.
- Document the immunizations (historic and current) in the patient’s medical record to include:
 - A note indicating the name of the specific antigen and the date of the immunization
 - The certificate of immunization prepared by an authorized health care provider or agency
 - Parent refusal, documented history of anaphylactic reaction to serum/vaccinations, illnesses or seropositive test results
 - The date of the first hepatitis B vaccine given at the hospital and the name of the hospital if available.

By age 6, children should have the following immunizations:

- Four DTaP and three hepatitis B
- Four inactivated polio vaccine (IPV) and two influenza
- Two measles-mumps-rubella (MMR) and four pneumococcal conjugate
- Three Hib and two or three rotavirus
- Two hepatitis A and two dose series of varicella

By age 13, they should have:

- One meningococcal vaccine between the ages of 11 and 13
- One Td or Tdap
- Two doses of the HPV vaccine

Promoting prevention with well-child exams

Well-child exams play a key role in preventive care for children and adolescents. Humana – CareSource promotes the American Academy of Pediatrics Bright Futures schedule and recommendations for preventive pediatric health care. These visits may include immunizations, blood lead screenings, developmental screenings, review of medications, substance use treatment and many other screenings.

For each well-child visit you perform, please document in the patient’s medical record that the office visit was specifically for a well-child exam and include the visit date. Be sure to document, at a minimum, all of the following:

- Health and developmental history
- Physical exam
- Physical and mental developmental histories
- Health education and anticipatory guidance

Document BMI screenings

Measuring body mass index (BMI) remains a quick and relatively simple way to gauge your patients' risk for obesity and other health problems. Routine BMI measurements can promote discussions that may influence healthier habits.

BMI should be calculated at least annually and documented in the patient's medical record. Be sure medical records reflect all of the following:

Adults (19 to 74 years)

- Date of visit
- Weight and BMI value

Children (24 months to 18 years)

- Date of visit
- Height and weight
- BMI percentile documented as a value (e.g., 85th percentile)
- BMI percentile plotted on an age growth BMI chart
- Checklist to indicate counseling for nutrition and physical activity annually (not solely topics on sports or safety)

Remember, a nutritional evaluation and anticipatory guidance are required as part of a routine well-child exam.

EPSDT services support children's health

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental and specialty services.

Early: Assessing and identifying problems early.

Periodic: Checking children's health at periodic, age-appropriate intervals.

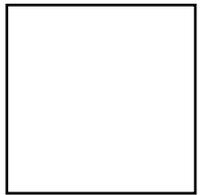
Screening: Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems.

Diagnostic: Performing diagnostic tests to follow up when a risk is identified.

Treatment: Control, correct or reduce health problems found.

If you encounter any abnormalities or address a pre-existing problem during a well-child visit, please bill both the appropriate EPSDT visit code and the appropriate E&M code with the modifier 25.

For more information regarding well-child exam frequency, immunization schedules, and proper bill coding and procedures, please review the Humana – CareSource Health Partner Manual or www.CMS.gov.



Preventive care for adults

Help us to remind our members that well-care checkups are not just for children and adolescents. Humana – CareSource has a commitment to prevention and early detection of disease for the people we are privileged to serve. We are dedicated to helping people live healthier lives, and we hope you encourage our members to receive age- and gender-appropriate preventive care services.

Find PDL (Preferred Drug List) Updates Online

Humana – CareSource regularly reviews and updates the PDLs for our Medicaid plan. These PDL updates and other important pharmacy information can be found at www.caresource.com/providers/kentucky/medicaid/patient-care/pharmacy/.

Drug coverage information is also available via apps on your smartphone. Apps include Formulary Search by MMIT and Epocrates.

If you do not have access to the internet, please call us and we will send you the updates. Please call **1-855-852-7005** and follow the prompts to reach the pharmacy department. Hours of operation are Monday through Friday, 8 a.m. to 5 p.m., Eastern time.