



SPRING 2019

PROVIDER *Source*

A Newsletter for CareSource® Health Partners

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FROM THE MEDICAL DIRECTOR: Healthy from the Start

We all support healthy newborns, but in the state of Georgia where we have unacceptably high rates of preterm births, infant mortality and maternal mortality, we can do better. A healthy baby starts with a healthy pregnancy. CareSource values our providers who care for women in the preconception, prenatal and postpartum periods. Each period is an opportunity to optimize health. How do we partner? First, we strongly encourage our providers to submit a Notification of Pregnancy form (located on www.mmis.georgia.gov) to us so we are aware of the pregnancy. This allows our care management team to partner with the provider and your CareSource patient to assist with prenatal education, social resources as well as high-risk management needs.

Our pregnancy benefits include such things as:

- Prenatal vitamins
- Vaccinations
- Dental care
- Rewards for prenatal visits
- Glucometers
- 17-OHP
- Breast pumps
- Immediate postpartum
- Long-acting reversible contraceptives (LARCs) after delivery and in outpatient setting
- Care4Moms app that assists with pregnancy tracking and progress, assessments, and finding a provider
- And much more

In addition to traditional prenatal care, we also support group prenatal care services such as Centering Pregnancy. CareSource provides enhanced reimbursement for providers serving your CareSource patients through Centering Pregnancy. In a recent visit to Dr. Joy Baker's practice in Thomaston, Georgia, I learned how their patients are given the option of traditional prenatal care or Centering Pregnancy. Ultimately, we all strive for the same thing – a healthy outcome for the new mom and baby. Thank you for all you do and I look forward to visiting you soon.



Dr. Seema Csukas, MD, PhD, FAAP
Medical Director, Georgia Market







Reviewing Drug Testing Policy

Monitoring for controlled substances to detect the use of prescription medication and illegal substances, for the purpose of medical treatment, plays a key role in the care of your CareSource patients with chronic pain and substance-related disorders. CareSource asks that providers familiarize themselves with CareSource's drug testing medical policy to ensure that the ordering of drug testing and billing are compliant.

The policies are located on **CareSource.com**, under the Providers menu, Tools and Resources, Provider Policies. From the policy page, select the appropriate line of business, and go to Medical policies, Drug Testing policy. The drug testing policy outlines requirements and criteria for billing drug testing appropriately.

Changes to Controlling High Blood Pressure Measure

In July 2018, the National Committee for Quality Assurance (NCQA) released new technical specifications for the 2019 edition of the Healthcare Effectiveness Data and Information Set (HEDIS). HEDIS is one of health care's most widely used performance monitoring and improvement tools. Performance is monitored through the collection and analysis of data generated by the clinical care patients receive from their health care providers.

The National Committee for Quality Assurance (NCQA) has revised the HEDIS Controlling High Blood Pressure measure to reflect a new blood pressure target of <140/90 mm Hg for all adults age 18–85 with hypertension. This change was made to better align the measure with updated clinical recommendations. To be included in the measure, your CareSource patient must now have two diagnoses of hypertension over the course of the measurement year and/or the year prior. NCQA has also updated the data collection approach to support more claims data methods to collect the measure data and added telehealth encounters to satisfy certain components of the measure.

A Quick Look at the Measure:

HEDIS Controlling High Blood Pressure (CBP) Measure

TARGET BLOOD PRESSURE	<140/90 mm Hg for all adults 18-85 with hypertension
HEDIS COMPLIANT CODES	<p>Blood Pressure CPT II: 3074F, 3075F, 3077F, 3078F, 3079F, 3080F</p> <p>In an outpatient or remote blood pressure monitoring setting</p> <p>Remote Blood Pressure Monitoring CPT: 93874, 93788, 93790, 99091</p>

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

Safe OPIOID PRESCRIBING

We encourage providers to practice safe opioid prescribing habits. Below are a few main points from the Centers for Disease Control and Prevention (CDC) Opioid Guidelines:

- Non-pharmacologic therapy and non-opioid pharmacologic therapy are preferred for chronic pain. Clinicians should consider opioid therapy only if expected benefits for both pain and function are anticipated to outweigh risks to the patient. If opioids are used, they should be combined with non-pharmacologic therapy and non-opioid pharmacologic therapy, as appropriate.
- When starting opioid therapy for chronic pain, providers should prescribe immediate-release opioids instead of extended-release/long-acting (ER/LA) opioids.
- Long-term opioid use often begins with treatment of acute pain. When opioids are used for acute pain, clinicians should prescribe the lowest effective dose of immediate-release opioids and should prescribe no greater quantity than needed for the expected duration of pain severe enough to require opioids. Three days or less will often be sufficient; more than seven days will rarely be needed. Many states now limit opioid prescriptions to no more than a seven day supply. Please refer to your state's Department of Medicaid, Board of Medicine and Board of Pharmacy websites for state specific mandates. Also, please refer to the Preferred Drug List (PDL) and formulary search tool on CareSource.com for CareSource specific limitations.
- Clinicians should avoid prescribing opioid pain medication and benzodiazepines concurrently whenever possible.
- Clinicians should offer or arrange evidence-based treatment (usually medication-assisted treatment with buprenorphine or methadone in combination with behavioral therapies) for patients with opioid use disorder.

To improve access to these guidelines, the CDC has developed an app called the "CDC Opioid Guideline App" which is available on Google Play and in the Apple Store. It features a Morphine Milligram Equivalent (MME) calculator and a link to the guidelines. We encourage providers to take advantage of this free tool as we work together to fight the opioid epidemic.





Benefits to Connecting to a Health Information Exchange

CareSource connects to a variety of state and federal health information exchanges (HIEs) in order to improve the care of your CareSource patients. HIEs are organizations that allow healthcare providers and payers to appropriately and securely access and share your CareSource patient's medical information electronically.

Participation in HIEs provide value for providers and payers in four main areas: costs, efficiency, outcomes and quality. Sharing timely, accurate and actionable data enables continuity of care, preventive care and immediate action for your CareSource patients. We encourage all providers to connect to HIEs in order to take advantage of these benefits.

Please visit <http://gahin.org/> for more information.



Update your Contact Information on the Provider Portal

The Centers for Medicare & Medicaid Services (CMS) requires 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:

- Provider website information
- Indication of a provider's completed cultural competency training

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

You can now submit updates to your demographic information online, including address or phone changes, adding a provider, etc. Simply go to the Provider Portal and select "Provider Maintenance" from the navigation links on the left side of the page.

DISEASE MANAGEMENT

In the mailings for asthma, diabetes and hypertension, CareSource uses national guidelines with evidence-based materials to encourage your patients to learn more about their disease and make healthy choices. Self-management and learning is encouraged through participation in online activities as well as in-person classes.

For asthma, we encourage your patients to use the Asthma Action Plan, as well as the use of a long term controller medication.

For diabetes, CareSource stress' HEDIS® measures such as hemoglobin A1C, retinopathy and microalbumin screenings. Any assistance from you, our provider, encouraging classes such as diabetes education and referrals to podiatrists and registered dieticians is also appreciated.

CareSource revised our hypertension curriculum to reflect the American Heart Association's guidelines and evidence-based medicine, emphasizing healthy lifestyle changes and following the recommendations of providers. Your patients may qualify for a home blood pressure monitor as well as a registered dietician referral.

We ask you, our providers, to be cognizant for signs and symptoms of stress and depression. Please promote healthy lifestyle changes (healthy eating, increased physical activity) and positive coping skills (relaxation), as well as making appropriate referrals as indicated.

CareSource offers tips on having a medication routine and taking medications properly. We urge an annual medication reconciliation with the health care professional. We suggest a written summary of the discussion, including an action plan that recommends what your patient can do to manage their medications.



P.O. Box 8738
Dayton, OH 45401-8738

VISIT US
CareSource.com

CONTACT US
1-855-202-1058

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NETWORK NOTIFICATIONS YOU MAY HAVE MISSED

CareSource periodically posts network notifications. We strive to make partnering with us simple. We are aware things may change in the way we do business with you and want to communicate these changes to you in an efficient manner. Please visit the Updates and Announcements page for more information and more updates.

- CareSource will be discontinuing several PO Box numbers, posted on Nov. 1, 2018. Listed on the Updates and Announcements page are the PO Box updates that may affect your market. Please make note of the recent changes.
- The Department of Community Health has posted a banner message with billing instructions for LARC Devices. Please refer to the network notification, posted on Dec. 5, 2018, for more information on how to bill for non-inpatient LARC services.
- As previously announced, on Aug. 29, 2018, CareSource will be implementing a change to the MED limits for opioids for your CareSource patients with acute pain on Oct. 1, 2018. In an attempt to prevent prior authorizations and patients being denied coverage for their opioids, we recommend not using “range” or “double-range” orders in which the dose or dosing interval varies over a prescribed range which exceeds 60 MED.