## **ProviderSource**

A newsletter for Humana – CareSource providers

Humana – CareSource receives valuable feedback and shows gains in provider satisfaction survey results

The Humana – CareSource® health care provider satisfaction survey provides valuable feedback we use to improve our service to you and your patients. We work to address opportunities you identify to deliver a positive health care experience.

While there is more to be done, providers indicated progress was made in the following areas since 2014:

- Timeliness of claim processing
- Pharmacy-related issues
- Satisfaction with customer service from Provider Services

Providers also shared service opportunities and improvements made in the following areas:

- Better information and improved search functionality for drugs in the formulary We added an online pharmacy formulary tool that includes links to medical policies and prior authorization requirements for medications billed under the medical benefit to help identify more drug options.
- Streamlined claims review for faster payment We implemented a revised medication fee schedule to reduce time to payment and provider call volume in relation to miscellaneous Healthcare Common Procedure Coding System (HCPCS) claim codes review.
- Improved provider orientation materials accessible on our website We organized all medical, payment and administrative policies into one streamlined collection on our website for easier access and improved visibility.

We continually take steps to improve these and other areas. Thanks to everyone who took the time to provide feedback. We will update you in future communications about changes to continue to improve your experience.







Dr. Vaughn Payne

### From the medical director

Humana – CareSource uses a unique and innovative care coordination model for our members. It's grounded in the principles of population health and focuses on coordinating care for those with complex needs, as well as the following:

- Facilitating access and removing barriers to care
- Considering the social determinants that impact care
- Managing chronic conditions
- Preventing illness through specific activities and interventions
- Promoting the health of our members through outreach and education

Our model is based on regional and community considerations, such as member demographics, common needs of the population, social considerations, patterns of care, provider distribution, access to care and patterns of disease and illness. This dynamic population health platform is available to all members and delivers health and wellness plans based on self-management and mass customization concepts.

We appreciate your partnership as we continue to support our members with compassionate care. Please feel free to contact me about this or other topics. You can reach me by email at **vaughn**. **payne@caresource.com** or by phone at **1-502-213-4730**.

Vaughn Payne, Pharm.D., M.D., MBA, FACC, FACP, CPE Medical Director

Humana - CareSource

### Learn more about upcoding and undercoding

Humana – CareSource wants to reduce the instances of upcoding and undercoding in relation to billed physician evaluation and management (E&M) codes. While Humana – CareSource pays for many physician services billed with E&M codes, new patient visits generally require more time than follow-up visits for established patients. New patient visits subsequently result in higher reimbursement compared to E&M code reimbursement for established patients.

#### Examples of upcoding:

- Providing a follow-up office visit or follow-up inpatient consultation, but billing using a higher level E&M code.
- Misusing modifier 25 when billing E&M codes. Modifier 25 allows additional payment for a
  separate E&M service rendered on the same day as a procedure. Upcoding occurs when a
  provider uses modifier 25 for an E&M service on a submitted claim when the patient care
  rendered was not significant, was not separately identifiable and was not above and beyond
  the care usually associated with the procedure.

#### Example of undercoding:

 Billing a lower E&M code for a more complex office visit. This causes an underfunding of the procedure performed and lost reimbursement.

The Centers for Medicare & Medicaid Services (CMS) offer guidance on coding and reporting at www.cms.gov/Medicare/Coding/ICD10/Downloads/2016-ICD-10-CM-Guidelines.pdf.



# Find quarterly formulary updates online

Humana – CareSource no longer mails quarterly Medicaid formulary updates. The information is now posted on our website. You can find Humana – CareSource pharmacy information at **CareSource.com/ providers/kentucky/medicaid/patient-care/pharmacy**.

Drug coverage information for our Medicaid formulary is also available on ePocrates, a medical application you can download to your mobile device. Find out more at **www.epocrates.com**.

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.

# Encourage well care for adolescents

Help us remind our members that well-care checkups are not just for children.
Adolescents and adults need annual preventive care exams.
Adolescent exams include important immunizations and Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services. Be sure to include appropriate well-care codes and include all aspects of the EPSDT services provided when submitting claims.



### Report fraud

You have a choice when calling us to report fraud, waste and abuse. You may choose to identify yourself or remain anonymous.

You can anonymously report fraud, waste or abuse to the Humana – CareSource Special Investigations Unit using one of the following methods:

- Calling 1-855-852-7005 and selecting the menu option for reporting fraud
- Writing a letter or completing the Fraud, Waste and Abuse Reporting Form at CareSource.com/documents/ky-fraudwaste-and-abuse-reporting-form and sending it to:

Humana – CareSource Attn: Special Investigations Unit P.O. Box 1940 Dayton, OH 45401-1940 If you choose to remain anonymous, we will not be able to call you back for more information; so, please leave as many details as possible, including names and phone numbers. Your report will be kept confidential to the extent permitted by law.

The following reporting options are not anonymous:

- Faxing: 800-418-0248
- Emailing: fraud@caresource.com

### Get reimbursed for providing SBIRT services

#### What is SBIRT?

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

- 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 referrals to brief therapy or additional treatment to patients who screen in need of additional services

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

#### Can I get reimbursed for providing SBIRT services?

**Yes.** The following provider types are eligible for reimbursement under Kentucky Medicaid\*:

- Advanced practice registered nurses or licensed clinical psychologists
- Physicians (both M.D. and D.O.)
- Licensed master's-level associates and physician assistants in a behavioral health outpatient facility
- Behavioral health inpatient facility

\* Source: http://www.chfs.ky.gov/NR/rdonlyres/940E5B23-2E77-4375-8171-9C89F53A9E26/0/BehavioralHealthOutpatientFeeScheduleEffectiveJuly12015.pdf

Use payable code 99408 for billing.

### Spread the Word About Drug Take-Back Day

#### **Help Humana – CareSource spread the word.**

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



# Find opportunities to perform well-child checkups

Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services play a key role in preventive care for the Medicaid population. Humana – CareSource members should receive well-child checkups at specific ages from birth through age 20. These visits include immunizations, blood lead screenings, substance use treatment or other services as needed.

School sports physicals are a great time to perform well-child checkups, as they may be one of the few opportunities to do so throughout the year. You can also perform checkups during an acute-care visit. Please bill with appropriate well-child exam codes and include all aspects of the EPSDT services you provided. These include medical and family history, a physical exam, immunizations (as needed), review of medications and appropriate safety and prevention guidance.

For more information regarding well-child exam frequency, immunization schedules and proper bill coding and procedures, please review the Humana – CareSource provider manual at CareSource.com/providers/kentucky/medicaid/plan-resources/provider-manual



### Curb opioid overdose deaths with naloxone

Death rates due to drug overdose continue to climb at alarming rates. We encourage the use of nasal naloxone hydrochloride by loved ones and first-time responders to potentially help reverse an opioid overdose. Humana – CareSource covers these items for our members. **No prior authorization is required.** 

#### **Prescriptions**

- Narcan nasal liquid
- Naloxone HCl 1 mg/ml 2 ml prefilled luer-lock needleless syringe
- Quantity #2 NDC #76329-3369-01 and intranasal mucosal atomizing device
- Quantity #2 NDC #51927-8358-00

#### Billing codes for kit as medical benefit

Naloxone injection J2310/Atomizing device S8100 with modifier KX

For more information about the spectrum of behavioral health services we offer to support our members, please visit our website at: **CareSource.com/providers/kentucky/medicaid/patient-care/behavioral-health** 

### **CLINICAL NEWS**

### Control HbA1c for members with diabetes

Diabetes is a chronic disease that affected 9.3 percent of Americans (29.1 million people) in 2012. When looking at the Kentucky Medicaid population, the extent of the problem is more serious. According to the Kentucky Diabetes Report, 18 percent of the adult Medicaid population was diagnosed with diabetes in 2010 – a rate nearly twice as high as the overall Kentucky rate of 10 percent.

The importance and benefits of HbA1c control as part of a comprehensive management of diabetes for your patient is well documented, yet controlling HbA1c is not simple. It requires the coordinated efforts of members, providers and health care organizations. This means patients receiving appropriate clinical care from a provider who understands standards of diabetes care, combined with individual responsibility of the person with diabetes for complying with the plan of care and making changes in choices and behaviors.

Please visit CareSource.com/providers/kentucky/medicaid/ patient-care/clinical-guidelines to get more information about the current standards of care along with expected treatment outcomes and practical strategies to improve the processes of diabetes care for those with diabetes.

Source: Kentucky Diabetes Report to the LRC KRS 211.752. (2013). Frankfort, KY: KY Cabinet for Health and Family Services [accessed 7/20/2015]. Available from: chfs.ky.gov/NR/rdonlyres/03F86F3B-93E2-4BEA-89C0-25DD9C1FB1FC/0/ReporttotheLRCFINAL1172013totheSecretary.pdf





# Emphasize postpartum care for pregnant members

Timing is crucial when it comes to postpartum care. Please remind your patients that they should see you for a routine postpartum care visit within three to eight weeks after delivery. If your patient had gestational diabetes, the American College of Obstetricians and Gynecologists recommends you administer a blood glucose test at the postpartum care visit.

Earlier postpartum visits may be clinically warranted in some situations. Please note that Humana – CareSource covers both cesarean section follow-up visits and postpartum care visits.

# Promote blood lead level screenings

It is important that children have their blood lead level tested if they have not been previously tested. We encourage members to be tested at 12 months and two years old. Remember, filter paper testing is an accepted method to obtain blood lead levels and is covered by Humana – CareSource.



# Update to member rights and responsibilities statement

An update to the Humana – CareSource member rights and responsibilities statement includes a change to Indian Health Service, Tribally Operated Facility Program and Urban Indian Clinic (I/T/U) health care providers.

The new statement clarifies that eligible members may receive services from participating I/T/U providers or I/T/U primary care providers if they are part of the Humana – CareSource network.

See our website for the full list of member rights and responsibilities. Go to CareSource.com/members/kentucky/medicaid/member-information/rights-and-responsibilities/.

# Check us out Online

### Find more member and provider information online

The most up-to-date provider and member information is available at **CareSource.com**. If you do not have access to the internet, contact provider services for assistance at **1-855-852-7005**.