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July 2014

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MedSolutions program expanded to Fallon MassHealth members

Effective September 1, 2014, we will expand our MedSolutions program for high-tech, outpatient radiology to our MassHealth (Medicaid) membership. MedSolutions has partnered with Fallon Health to administer a program for specialty radiology management for most of our other product lines since January 2010.

The program applies to outpatient MRI/MRA, CT/CTA, nuclear cardiac imaging (NCM) and PET imaging studies. The process to obtain prior authorization for specialty radiology services for Fallon MassHealth members will be identical to the process for all other Fallon lines of business.

Request authorization number:

Online: medsolutionsonline.com

Phone: 1-888-693-3211, 8 a.m. to 9 p.m.

Please have patient demographic information, including health plan member ID and date of birth and the

patient's current diagnosis.

Fax: 1-888-693-3210

Fax forms are available at

medsolutionsonline.com or by calling their Customer Service Department at 1-888-693-3211. When faxing prior authorization forms, please ensure that the case number is included on the fax reference page.

If you have any questions, please call Provider Relations at 1-866-275-3247, prompt 4. ■

Doing business with us

Quit to Win community group closings

As of May 2, 2014, Fallon Health closed all community-based Quit To Win groups located at Worcester Senior Center, Reliant Medical Groups in Auburn and Leominster, and at Heywood Hospital in Gardner.

We have restructured our Quit to Win program to be able to accommodate more of our members who wish to quit smoking through group conference calls, one-on-one phone coaching and time-limited, community-based programs within our service area. (Times and locations will be announced at a later date.)

Fallon members may contact Quit to Win at QuitToWin@fchp.org for texting message support, information on conference calls, or eligibility for the phone coaching program. Non-members may also contact the Massachusetts Smokers' Helpline at 1-800-784-8669 or makesmokinghistory.org. ■

NaviCare prior authorization notices

No PA for skilled home health care services

Effective February 1, 2014, NaviCare does not require prior authorization for skilled home health care services (skilled nursing; physical, occupational and speech therapies; medical social work; and home health aide) from contracted home health care providers.

New fax number to request prior authorization

Effective immediately, the fax number to send prior authorization requests for NaviCare members is 1-508-368-9822. ■



Testing Wisely - EMG and axial pain



In this edition of our Testing Wisely series, we are profiling a Choosing Wisely® recommendation from the North American Spine Society:

"Don't use electromyography (EMG) and nerve conduction studies (NCS) to determine the cause of axial lumbar, thoracic or cervical spine pain.

Electromyography and nerve conduction studies are measures of nerve and muscle function. They may be indicated when there is concern for a neurologic injury or disorder, such as the presence of leg or arm pain, numbness or weakness associated with compression of a spinal nerve. As spinal nerve injury is not a cause of neck, mid back or low back pain, EMG/NCS have not been found to be helpful in diagnosing the underlying causes of axial lumbar, thoracic and cervical spine pain."

At Fallon Health, we applaud the Choosing Wisely campaign and the work of the contributing societies, and we routinely review their recommendations against actual utilization in our network.

Although we have a highly efficient network, a review of claims for the prior 12-month period showed that, contrary to the above recommendation, EMG does get ordered for axial pain. There may be medical reasons why these tests were ordered outside of the guidelines; nonetheless, the delivery of such services outside of the recommended parameters suggests at least some opportunity for improvement.

As stewards of health care dollars with an equally strong interest in promoting quality care for our members, we hope that this information encourages a conversation between physicians and patients regarding using medical testing in a wise and effective manner.

Choosing Wisely is a campaign from the ABIM Foundation. Visit choosingwisely.org to get the latest on new recommendations. To learn more about the Choosing Wisely campaign in Massachusetts visit choosingwiselyma.org.



FTC: An interview with Dr. Carter-Henry

Lisa Price-Stevens, M.D. (right), Medical Director of Fallon Total Care[™], recently interviewed Stephanie Carter-Henry, M.D. (below), a family practitioner and Education Director with Hahnemann Family Health Center in Worcester. Dr. Carter-Henry has participated in Fallon Total Care (FTC) since its inception.



FTC is a One Care health plan for individuals with disabilities who are 21 to 64 years old, are beneficiaries of both Medicare and MassHealth and live in our service area of Hampden, Hampshire and Worcester Counties. FTC is a coordinated care program with no cost to members.

Dr. Price-Stevens: Can you tell me a little about yourself and your practice?



Dr. Carter-Henry: I'm a graduate of the UMass education system through and through. I trained at UMass Medical School and completed my Family Medicine residency at the Barre Family Health Center.

I then joined the faculty at the Hahnemann Family Health Center to continue my work with underserved populations in an integrated setting that encompasses behavioral health. My clinical practice covers the full spectrum of family medicine.

Dr. P-S: Our FTC team members say they enjoy working with you. Can you tell me more about your participation in several of our Interdisciplinary Care Team (ICT) meetings?

Dr. C-H: The feeling's mutual! I think it's wonderful to have this structure that supports my patients who are FTC members. These patients have significant medical, behavioral and social challenges that affect their health, access to care, navigation of systems and comprehension of care. It's invaluable to work with a team that is dedicated to care coordination and invested in the patient's health progress.

I most recently participated in a team meeting that included a patient and his mother. This is the first time I feel that we're heading in a sustainable direction with this patient—giving the right services, at the right time with the right support.

Dr. P-S: As a provider, what are the benefits of having your patient involved in an ICT model?

Dr. C-H: FTC serves vulnerable individuals who are generally high utilizers of care and who have poor health literacy and health outcomes, in addition to significant co-morbidities, which add a level of complexity that is well supported with a team-based approach.

The ICT care model gives my FTC patients access to services that are essential to succeeding with their health goals. It connects them to a network of health care professionals who are more aware of available resources and who can assist them in navigating the system to access these resources.

Dr. P-S: What are the benefits to a provider who is involved in an ICT care model?

Dr. C-H: Collaboration and support are clearly the foundation for where we need to go in medicine. However, at the practice level, strains on time, resources and scheduling make it difficult to get the right people together at the same time to coordinate a patient's care. The FTC team is flexible and willing to accommodate difficult schedules so that these meetings can happen. Also, the ICT meeting time is reimbursable for the provider, which shows a dedication to value and patient care that's not universally embraced.

Dr. P-S: How would you advise providers who haven't participated in an ICT model of care like Fallon's, or who may be hesitant to participate?

Dr. C-H: My experience so far is that the Fallon ICT model delivers a team that's committed to improving the health of these high-risk patients through care management, education, nursing and social services support. Providers and their staff are relieved of finding appropriate resources, while having the peace of mind that patients are actually receiving better care.

Dr. P-S: Thank you! We're pleased to have you on our team, and your patients are very lucky to have you. Do you have any last thoughts that you'd like to share?

Dr. C-H: I've seen good success so far with FTC's interdisciplinary team approach and look forward to more participation! I think this model of care is clearly the future of primary care and hope it'll eventually be embraced for all populations.

Dr. Lisa Price-Stevens invites other providers to share with us their Fallon Total Care experiences as we continue this Connection series. To arrange an interview, please contact Dr. Price-Stevens at 1-508-368-6323.

Fallon Information Center Provider Speaker Series and more

If you're in the Central Mass. area, stop by to visit us or encourage your patients to drop in for a class or health screening at our Information Center in the White City Shopping Center, on Route 9 in Shrewsbury. We'd love to assist you!

This summer, we continue to offer blood pressure screenings and two types of yoga programs. Plus, we're continuing our *Provider Speaker Series*. Lisa Price-Stevens, M.D., Medical Director for Fallon Total CareSM, will hold separate talks on **Family health history and you** (July 11 and Aug. 11) and **Communicating with your doctor** (July 14 and Aug.8). Sarika Aggarwal, M.D., Chief Medical Officer of Fallon Health, will discuss **Preventing Lyme disease** (July 18 and Aug. 18). Please pre-register by calling 1-866-209-5073 (TRS 711). For updates, visit fallonhealth.org/infocenter.

For more details, please see our article in *Connection* online.

Fallon promoting health in Zip Trips stops

We're partnering with the FOX25 Zip Trips broadcasts to promote our mission, *making our communities healthy.* Every Friday morning (6 a.m. to 10 a.m.) through August, Fallon will be visiting a new community in Massachusetts with our TV hosts and doing a special health segment on-air.

For more details, please see our article in Connection online.



Reminder: HITECH compliance deadline for business associates

HIPAA's Privacy and Security Rules, as modified by the HITECH Act, apply to Fallon Health as a "covered entity," and to its vendors, as "business associates." We want to remind you that the compliance date for business associates is September 23, 2014—a date that is rapidly approaching. In addition, the accelerated movement to use electronic health records provides an opportunity to update policies, procedures and employee training regarding the legal requirements, risks and security vulnerabilities of ePHI.

If you have questions about Fallon Health's privacy policies or your role as a business associate, please contact us at Compliance@fchp.org. You may also report a concern anonymously through our Compliance Hotline at 1-888-203-5295.



Disease Management Program reinforces treatment plan

The Fallon Health Disease Management Program is a proactive, patient-centered program for individuals diagnosed with chronic diseases. It reinforces standards of care by providing health education, health coaching, behavioral change and self-management skills. We work toward empowering members to take a more active role in improving and maintaining their health.

We welcome referrals for your patients, our Fallon members, to our Disease Management Program and look forward to working with you. For more information or to make a referral, please call our team at 1-800-333-2535, ext. 69898, Monday through Friday from 8:30 a.m. to 5:00 p.m. You also may use our online Disease Management referral form at fallonhealth.org/providers/ medical-management/forms. ■

Access to complex case management

Fallon Health has many avenues for members to be considered for our case management services including, but not limited to, the following referral sources: member/family, practitioner, health information line (Nurse Connect), facility discharge planner, community resources and the Fallon utilization management process.

As a provider, you may refer members to Fallon's complex case management programs by calling 1-800-333-2535, ext. 78002, or using our online Case Management referral form at fallonhealth.org/providers/medical-management/forms. Thank you for your referrals.



NaviCare reports high member satisfaction

Fallon Health is proud to report that our 2013 yearend member satisfaction rate is 98.3% for NaviCare HMO SNP, our Special Needs Plan for people over the age of 65 who have MassHealth Standard and may or may not have Medicare. (Our NaviCare SCO product is for those who have MassHealth Standard only.)

The result is based on our ongoing Annual Satisfaction Survey, and reinforces the success of the NaviCare model of care. In the survey, 99.7% of responding members reported that the program has made a positive difference in their overall quality of life, and 100% of members surveyed reported their willingness to recommend the program to family or friends.

To refer an elder patient to this program, call 1-877-255-7108. For an overview, visit navicare.org, or call now for more details. ■

MassHealth providers

Urgent care centers offer prompt and convenient service

Urgent care centers are clinics that offer another care option for patients instead of going to an emergency room for common urgent-health issues. Recently, we mailed our MassHealth members a letter about these options, along with a list of urgent care centers.

When you can't see patients yourself, we encourage you to refer our members to urgent care locations when appropriate—for minor injuries; fever or flu-like symptoms; sprains and strains; coughs, colds and sore throats; ear infections; and rash or other skin irritations.

For more information and a list of urgent care centers available to Fallon MassHealth members, please see our article in *Connection* online.

Learn more about Fallon wellness programs

At Fallon Health, we recently streamlined and repackaged our many health and wellness programs and benefits under the umbrella name, The Well. Visit our newly designed web page, fallonhealth.org/thewell, which is a one-stop online resource to tap our many programs and services for people of all ages and health status.

One program featured in The Well is My Healthy Health Plan. This is a web-based wellness program that financially rewards many of our adult commercial plan members for taking a health assessment and participating in a customized action plan that may include regular health coaching, wellness workshops, interactive tools and more.

Read more about The Well and its many programs in our article in *Connection* online.



With an Rx, our members can pay less for the same acid relief

We've recently reminded Fallon Health members that they can get certain over-the-counter acid relief medication at their local pharmacy for a \$5 copayment* if they have a prescription from their doctor.

We cover prescriptions for up to 42-tablets of Prilosec OTC®, Prevacid® 24HR and generic overthe-counter omeprazole and lansoprazole, all proton pump inhibitor (PPI) medications that have the same dosage as their brand-name counterparts.

Fallon has three prescription PPI drugs on its formulary (list of covered medications) that have higher tier-3 or tier-4 copayments. These are Acipehx® and Nexium®, which require you to submit a prior authorization request to us, and Dexilant®, which does not require prior authorization.

* Commonwealth of Massachusetts (GIC) members have a \$10 copayment for covered prescription over-the-counter PPI medication. MassHealth member copayments are \$3.65.

High cost of new hepatitis C drug calls for careful treatment

Since its approval by the Food and Drug Administration last December, the new hepatitis C pill from Gilead Sciences Inc., called Sovaldi®, has drawn a lot of media attention for its effectiveness and cost. At \$1,000 a day, the cost of Sovaldi's 12-week treatment protocol is \$84,000.

More than 3 million Americans have the viral infection known as hepatitis C. The standard therapy for hepatitis C genotype 1 (the most common type in American patients) has been a 48-week regimen of weekly interferon injections along with one or two oral antiviral drugs (e.g., ribavirin). Due to the required self-injection and common side effects (fatigue, depression, nausea, etc.), individuals often refuse or stop treatment.

Currently, Sovaldi promises to cure 90% of its targeted patients and has no competition. Analysts predict Sovaldi could ring up \$5 to \$9 billion in U.S. sales this year if current prescription patterns hold.

Fallon Health's Vice President of Clinical Programs, Leslie Fish, Pharm.D., explained in a March 31 Wall Street Journal article on Sovaldi, that "there's an enormous price tag" but the drug is too effective to try to restrict access. Instead, Fallon is working with doctors to make sure that members who are given prescriptions don't skip out on treatment.

Fallon is reaching out to many network physicians who treat hepatitis C patients to review our protocol. We do require a prior authorization for any hepatitis C drug therapy.

Due to the high cost of the medications and regimens, it's most important to select members who are prepared and motivated to start treatment. Therefore, in addition to the clinical guidelines, we require that a member's behavioral habits assessment be included with the prior authorization request in order to determine if the therapy is right for him/her and to help the patient succeed.

Thank you for working with us to ensure that these medications are prescribed appropriately to patients and their therapies carefully monitored.

If you'd like additional information, please call Provider Relations at 1-866-275-3247, prompt 5.



Tips for documenting and coding a CVA

Because a cerebrovascular accident (CVA) is an acute event, it should not be documented as an active diagnosis for prolonged periods of time. Once the patient is discharged from the hospital for an acute CVA, it's no longer an "acute CVA" but rather a "history of" CVA (V-code). However, the sequelae, or what ICD-9-CM calls "late effects" of a CVA, should be documented and coded every time they are assessed (V-codes).

To be compliant with ICD-9-CM, providers and coders should be aware of the coding guidelines for cerebrovascular disease. There are different types of strokes: ischemic, embolic and hemorrhagic. Provider documentation should indicate the type of stroke:

- Cerebral infarction or cerebrovascular accident (CVA), also called a stroke, is assigned to ICD-9-CM code 434.91.
- Provider documentation should state if the CVA is caused by an occlusion, narrowing or stenosis of a precerebral artery. A code from the ICD-9-CM category 433 is assigned in these instances.
- Acute, but ill defined, cerebrovascular disease is assigned to ICD-9-CM code 436 and applies to apoplexy, apoplectic:
 - Not otherwise specified (NOS)
 - attack
 - cerebral
 - seizure
 - cerebral seizure

New coding resource: Fallon Health has created a laminated Provider Pocket Tool with coding and documentation tips to assist you with avoiding the most common diagnoses documentation and coding errors. If you'd like a Provider Pocket Tool, contact your Provider Relations Representative at 1-866-275-3247. ■

Code updates

Effective September 1, 2014, the following code will require plan prior authorization for all lines of business.

Code	Description
19366	Breast reconstruction with other technique

Effective July 1, 2014, the following codes no longer require plan prior authorization.

Code	Description	
15777	Implantation of biologic implant (e.g., acellular dermal matrix) for soft tissue reinforcement (i.e., breast, trunk) (List separately in addition to code for primary procedure.)	
21555	Excision tumor, soft tissue of neck or thorax; subcutaneous	
21557	Radical resection of tumor (e.g., sarcoma), soft tissue of neck or anterior thorax; less than 5 cm	
25075	Excision, tumor, soft tissue of forearm and/or wrist area; subcutaneous	

Effective September 1, 2014, the following code will no longer be separately reimbursed.

Code	Description
38204	Management of recipient hematopoietic progenitor cell donor search and cell acquisition ■



Payment policy updates

Payment policies this issue (Fallon Health only)

Revised policies - effective September 1, 2014

The following policies have been updated; details about the changes are indicated on the policies. Go to fallonhealth.org/providers/medical-management/payment-policies.

- Anesthesia Payment Policy Updated the codes in the policy.
- Nurse Practitioner Payment Policy Updated the policy about acting as a PCP for NaviCare members.
- Radiology/Diagnostic Imaging Procedures Payment Policy Updated referral/prior authorization discussion. MedSolutions prior authorization will apply to members enrolled through MassHealth.
- Vaccine Payment Policy Updated the codes in the policy.

Have you seen your

CONNECTION?

Please pass this along to the next person on the list.

Date received	

Please route to:

- Office manager
- Physician
- Billing department
- Receptionist
- Referral site
- Other

Get connected

Connection online July 2014

Your online supplement to *Connection* at fallonhealth.org/providers/connection-newsletter contains:

- Payment policy updates and links
- MH: Urgent care centers as alternatives to ER
- Fallon Information Center Provider Speaker Series
- Learn more about Fallon's health and wellness programs
- Fallon promoting health at FOX25 Zip Trips stops

Connection is a bimonthly publication for all Fallon Health ancillary and affiliated providers. The next copy deadline is July 3 for our September 2014 issue.

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Questions?

1-866-275-3247 – Fallon Health 1-855-508-4715, press 4 – Fallon Total Care