provider **report** Sunshine STATE"

FALL 2012



We Are Committed to Quality

A variety of initiatives support our ongoing effort to improve the care and services provided to our members.

he scope of Sunshine Health's Quality Improvement (QI) Program is comprehensive. It addresses the quality and safety of clinical care and services provided to our members, including medical, behavioral health, dental and vision care.

The QI Program is run by Sunshine Health's Medical Director, the Quality Improvement Director and the Quality Improvement Committee. We incorporate all demographic groups, care settings and services in our quality initiatives.

Sunshine Health's primary quality improvement goal is to improve members' health through a variety of meaningful activities implemented across all care settings, aimed at improving quality of care and services delivered.

The QI Program includes planning, implementing and monitoring of programs. It monitors several metrics and includes the following initiatives:

- Investigation and tracking of risk management and potential quality of care complaints.
- Ongoing monitoring of key performance measures (well-child visits and immunizations, pregnant women receiving early and regular care, health tests such as chlamydia screenings, mammograms, lead screenings, etc.).
- Ensuring members with chronic conditions like diabetes and asthma are getting recommended tests and appropriate medications for their condition.
- Conducting member satisfaction surveys regarding the healthcare and services they are receiving.
- ➔ Provider feedback via surveys, structured committees and direct feedback.
- Monitoring utilization management effectiveness.
- → HEDIS data reporting.

You and your staff may learn more about our Quality Improvement Program by calling **1-866-796-0530.**

SYMPTOM CHECK

There are many potential causes of inflammation of the pharynx, including colds, flu, sinus drainage and environmental irritants. With infectious pharyngitis, however, the mucosa of the pharynx becomes inflamed after invasion by either a virus (as with mononucleosis) or a bacterium (as with strep throat).

Kick off an educational effort in your office to stave off unnecessary office visits by patients. Distribute a checklist of causes, symptoms and treatments of these seasonal symptoms through your on-hold phone messaging, your practice website, posters in your waiting room as well as community newsletters. List red flag symptoms that indicate it's time to call for medical help. Include a reminder that antibiotics are reserved for cases such as strep throat, which is detected only by testing.

Encourage patients-particularly parents of younger patients-to call your office promptly if they observe this cluster of symptoms indicative of strep throat:

- → Sore throat but no cough
- → Fever
- Red tonsils streaked with white exudate
- → Swollen lymph nodes

How to Reach Us: Provider Services are available Monday through Friday, 9 a.m. to 5 p.m., by calling 1-866-796-0530.

Get It On Paper: If you would like a paper copy of anything in this newsletter or on our site, please call **1-866-796-0530.**

Measuring Performance

The Healthcare Effectiveness Data and Information Set (HEDIS) is a set of standardized performance measures, updated and published annually by the National Committee for Quality Assurance (NCQA).

HEDIS provides purchasers and consumers reliable information to compare the performance of healthcare plans. It's a tool used by the majority of America's health plans to measure performance on important dimensions of care and service.

Sunshine Health regularly reviews HEDIS rates and continually looks for ways to improve our numbers, as part of our commitment to providing access to high-quality and appropriate care to our members. Final HEDIS rates are reported to NCQA and state agencies every summer.

Please review the HEDIS measures related to women's health screenings, on this page.



Total Health for Women

s a part of your office visits with female patients, consider adding a question to determine how recently they received routine cancer screenings and other necessary screening tests and immunizations. Office visits provide a good opportunity to discuss the importance of these tests, explore the patient's concerns or misunderstandings related to screenings, and ensure patients are following the correct screening guidelines based on their family and medical history.

The U.S. Preventive Services Task Force (USPSTF) recommends that women be screened for cervical cancer using a Pap smear (cytology) every three years starting at age 21. The USPSTF recommends against screening women under 21.

Sunshine Health utilizes the American Cancer Society's recommendation that women ages 40 and over should receive annual mammography and women at high risk should talk with their doctors about when screening should begin based on their family history.

The USPSTF suggests that women of average breast cancer risk should have a mammogram every two years beginning at 50 through 74. The decision to begin screening before 50 should be an individual one and take patient's individual history into account.

We can't improve our scores without your help! Sunshine Health examined compliance with these two screenings. Please advise your members to get the screenings listed below. The chart below demonstrates our HEDIS 2012 outcomes:

SCREENINGS	SUNSHINE HEALTH 2011	NATIONAL HEDIS AVERAGE*
Breast cancer	Reform: 48.24% Non-Reform: 38.34	50.0%
Cervical cancer	Reform: 54.76% Non-Reform: 45.33%	64.8%

*The National HEDIS average is the average of all health plans that report HEDIS results nationwide.



Clinical Practice and Preventive Health Guidelines

Let our standards be your starting point for personalized patient care.

 unshine Health's preventive care and clinical practice guidelines are based on the health needs of our members and opportunities for improvement identified as part of our Quality Improvement (QI) program.

When possible, Sunshine Health adopts preventive and clinical practice guidelines that are published by nationally recognized organizations, government institutions and statewide collaborative. These guidelines have been reviewed and adopted by our QI Committee.

We encourage providers to use these guidelines as a basis for developing personalized treatment plans for our members and to aid members in making decisions about their healthcare. They should be applied for both preventive services as well as for management of chronic diseases. We measure compliance with these guidelines by monitoring related HEDIS measures and through random audits of ambulatory medical records.

Preventive and chronic disease guidelines include:

- → ADHD
- Adult preventive
- → Antepartum Fetal Testing
- → Asthma
- ➔ Major Depressive Disorder
- ➔ Diabetes

- Immunizations, including influenza and pneumococcal
- Lead Screening
- → Pediatric Preventive
- → Perinatal care
- Sickle cell

Our preventive care and clinical practice guidelines are intended to augment, not replace, sound clinical judgment. Guidelines are reviewed and updated annually, or upon significant change.

FOLLOW UP: For the most up-to-date version of preventive and clinical practice guidelines, go to **www.sunshinestatehealth.com**. A copy may also be mailed to your office as part of disease management or other QI initiatives. Members also have access to these guidelines. Call **1-866-796-0530** for more information.

PROVIDER DIRECTORY

Sunshine Health's website is a resource for members who wish to locate primary care providers, specialists, hospitals, community health centers, pharmacies and other medical facilities close to home. Just visit www. sunshinestatehealth.com and select "Find a Provider."

Members may also call Sunshine Health's Member Services at **1-866-796-0530**, from Monday to Friday, 8 a.m. to 5 p.m., for help finding a provider.

If any of your contact information has changed or is not listed accurately in our Provider Directory, call **1-866-796-0530**, from Monday to Friday, 8 a.m. to 5 p.m.

When You Speak, We Listen

In order for Sunshine Health to ensure that our providers are receiving the best service from our plan, we work with The Myers Group to conduct a confidential Provider Satisfaction Survey.

The survey asks you, the provider, to rate us on areas like how well we process claims and answer questions. It also asks about specific items such as our medical review policies and communication with you. Your feedback is reviewed closely and informs our plans for improvement.

The 2012 survey will be distributed in the mail, over the phone and online during the third quarter of 2012. Please watch for it and let us know how we are doing.

Online Access

Did you know that contracted Sunshine State Health Plan providers may save valuable time and access information online through our provider web portal? You can do the following by accessing our online portal:

- → View your member roster with Sunshine State Health Plan
- → Check eligibility for the members assigned to you
- → Obtain authorization status for members
- → Submit a request for an authorization
- → Check claim status-view all claims submitted through the web portal
- → Enter a UB claim
- → Enter an HCFA claim
- → View payments
- → Print any forms that are available for the member
- → Take advantage of training and educational materials available to providers
- → Use the CONTACT US feature, which lets providers send a message with any question he or she might have

For more information on obtaining access, please contact your provider relations representative directly, or call us at **1-866-796-0530** so we can help you get access and training.

When Are You Available?

Sunshine Health strives to ensure members have access to timely, appropriate care for all their health needs. We will work with you to establish clear standards for scheduling appointments and the length of wait times. When scheduling appointments, members should be able to get an

appointment with their primary care doctor as follows:

- ➔ For a well-care visits—within one month.
- → For routine sick visits—within one week.
- → For urgent visits—within one day.
- ➔ Emergency visits—should be performed immediately upon arrival. For office wait times, these standards should be followed:
- → Wait times for scheduled appointments should not exceed 45 minutes.
- Walk-in patients with non-urgent needs should be seen if possible or scheduled for an appointment.
- → Emergency patients should be seen immediately.

After normal business hours, all practitioners are required to provide arrangements for access to a covering physician, an answering service, a triage service or a voice message that directs members how to access emergency care.

Office Upkeep

onsistent and complete documentation in medical records is an essential component of providing quality patient care.

Participating practitioners are required to maintain uniform, organized medical records that contain patient demographics and medical information regarding services rendered to members.

COMPLETE AND SYSTEMATIC

Medical records must be maintained in an organized system that's in compliance with the Sunshine Health's medical documentation and record-keeping practice standards. These standards are intended to assist providers in keeping complete files about all our members, and are consistent with state contract requirements and industry standards.

CONFIDENTIAL

Medical records and information must also be protected from public access. Any information released must comply with Health Insurance Portability and Accountability Act (HIPAA) guidelines.

ONGOING MAINTENANCE

Records must be maintained for at least seven years from the date of service—unless federal or state law or medical practice standards require a longer retention period.

AUDITING

Upon request, all participating practitioners' medical records must be available for Utilization Management and Quality Improvement initiatives, as well as regulatory agencies' requests and member inquiries, as stated in the practitioner agreement. Periodically, Sunshine Health will conduct an onsite medical record audit of a random sampling of our members and provider offices to evaluate compliance to these standards.

You may view a complete list of record documentation standards in our provider manual, which is available online at **www. sunshinestatehealth.com**.



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