

SUMMER 2012



## Utilization Management

**U**tilization management (UM) is the process of evaluating and determining coverage for and appropriateness of medical care services, as well as providing needed assistance to the clinician or patient, in cooperation with other parties, to ensure appropriate use of resources.

### UM CRITERIA

We have adopted utilization review criteria primarily developed by McKesson InterQual Products. Criteria are refined by specialists representing a national panel from community based and academic practice. They are updated with appropriate involvement from physician members of our Quality Improvement Committee.

Criteria cover medical and surgical admissions, outpatient procedures, referrals to specialists and ancillary services. InterQual is utilized as a screening guide and is not intended to be a substitute for practitioner judgment.

Providers may obtain the criteria used to make a decision on a specific member by contacting us at 1-866-796-0530.

### HOW DECISIONS ARE MADE

Utilization review decisions are made in accordance with currently accepted medical or healthcare practices, taking into account special circumstances of each case that may require deviation from the norm stated in the screening criteria. We make UM decisions based on appropriateness of care and existence of coverage. We do not reward practitioners or other individuals for issuing denials of coverage, services or care.

### CONTACT US

Sunshine Health's Utilization Management operates between 8 a.m. and 5 p.m., Monday through Friday. If needed, clinical staff are available after business hours to discuss urgent UM issues. Please call 1-866-796-0530.

## WHAT IS HEDIS?

HEDIS—the Healthcare Effectiveness Data and Information Set—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 more than 90 percent of America's health plans to measure performance on important dimensions of care and service.

Sunshine Health reviews HEDIS rates on an ongoing basis 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 in the summer every year.

In this issue, please review the HEDIS measures related to pediatric preventive care and lead testing, featured on page 2.



### LEARN MORE:

To get a printed copy of the most current PDL, which includes the procedures for prior authorization and other guidelines such as step therapy, quantity limits and exclusions, please call the Provider Services Department at 1-866-796-0530.

You can also view the PDL online at [www.sunshinestatehealth.com](http://www.sunshinestatehealth.com).

**If you need a paper copy of anything in this newsletter or on our site, please call 1-866-796-0530.**

## Time for Lead Testing?

Spot the signs of higher-risk kids. Studies conducted by the US General Accounting Office during the 1980s and 1990s revealed that children eligible for Medicaid were at increased risk for lead exposure and that children living in poverty had higher levels of lead exposure than those who were not living in poverty. Thus, it follows that lead testing before age 2 is part of the HEDIS measures for Medicaid recipients. Please test all children under age 2 for lead exposure.

Two common methods of screening children for lead poisoning are currently in use. The venous method is a more accurate way to measure lead in blood, but capillary screening—or finger or heel stick—may be an easier way to screen young children.

- If a Medicaid-eligible child ages 1 to 2 meets any one of the following CDC-recommended criteria, he or she is considered at higher risk for elevated blood lead levels (BLLs) and should be screened:
- Parent or healthcare provider suspects the child to be at risk for lead exposure.
  - Child has a sibling or frequent playmate with an elevated BLL.
  - Child is a recent immigrant, refugee or foreign adoptee.
  - Child's parent or principal caregiver works professionally or recreationally with lead.
  - A household member uses traditional, folk or ethnic remedies or cosmetics or routinely eats food imported informally from abroad.
  - Child's family has been designated at increased risk for lead exposure by the health department due to local risk factors (e.g., resides in high-risk ZIP code).

## For the Health Of Families

Prepare your patients to make smart preventive health choices.

Thanks to the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program and others like it, many children and adolescents have benefited from improved health and developmental gains.

The preventive services EPSDT offers are comprehensive, and navigating the schedule of screenings and checkups can be tricky for parents and guardians. That's where you can help. Communicate the value of preventive care to families, reminding them of specific services to use—and when to schedule them.

Health education and counseling of families about preventive health measures is a required component of EPSDT.

### The Value of Vaccination

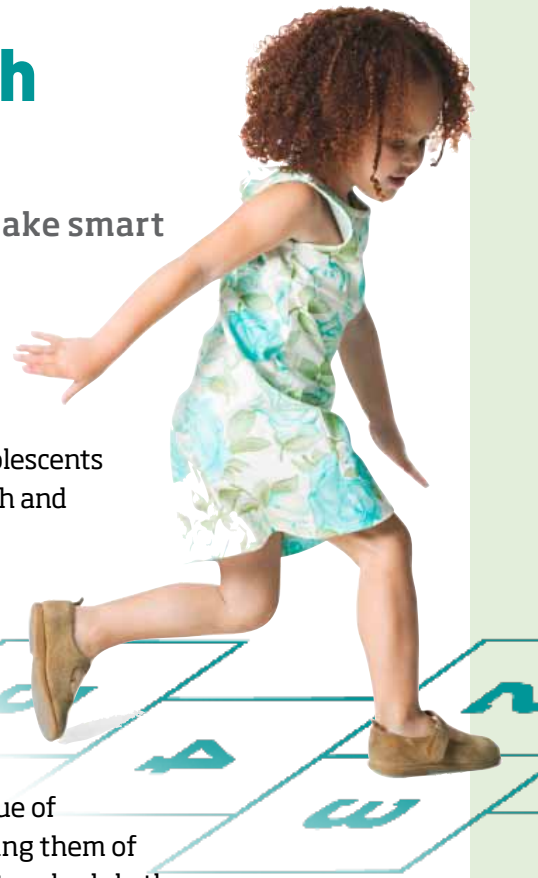
Discuss with new parents the rigorous immunization schedule that starts at their baby's birth. When faced with patients or family members who are wary about vaccinations, listen to their concerns and explain why the shots are recommended.

According to research, there's a good chance that your advice will be followed. A study led by the director of the Child Health Evaluation and Research Unit at the University of Michigan surveyed 1,552 parents of children ages 17 and younger about vaccines. Published in *Pediatrics*, the survey results showed that 76 percent of parents say they trust their child's doctor a lot, 26 percent say they trust other healthcare providers and 23 percent say they trust government vaccine experts/officials.

### Attending to Teens

Remind parents and adolescents that recommended vaccinations and preventive care continue through the college years. Also, allow for time to talk with your teen patients without parents in the room.

Set the tone for this conversation by clarifying what information you share with parents and explaining your role and goals. If a young person seems hesitant to speak with you, you may wish to consider offering the option of seeing another provider.



## RECOMMENDED CHILDHOOD AND ADOLESCENT IMMUNIZATION SCHEDULE

Below is the recommended shot schedule to help keep children healthy and prevent serious disease. **It is important to follow this schedule.** In the event a child has missed shots, an additional catch-up schedule has been noted. **Print this page and display it in your office to help educate patients.**

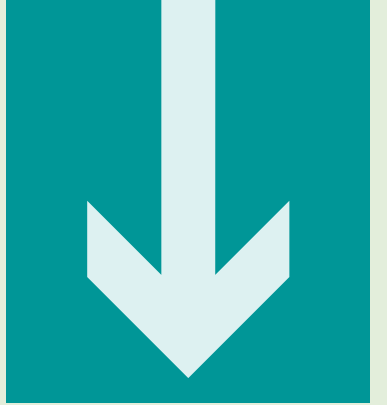
Vaccine	Birth	1 mo.	2 mos.	4 mos.	6 mos.	12 mos.	15 mos.	18 mos.	19-23 mos.	24 mos.	2-3 yrs.	4-6 yrs.	7-10 yrs.	11-12 yrs.	13-14 yrs.	15 yrs.	16-18 yrs.
Hepatitis A						Hep A (2 doses)					Hep A Series						
Hepatitis B	Hep B	Hep B			Hep B								Hep B Series				
Rotavirus			RV	RV	RV												
Diphtheria, tetanus, pertussis			DTaP	DTaP	DTaP		DTaP					DTaP		Tdap		Tdap	
Haemophilus influenzae type b			Hib	Hib	Hib		Hib										
Pneumococcal			PCV	PCV	PCV		PCV					PPSV					
Inactivated poliovirus			IPV	IPV		IPV						IPV	IPV Series				
Influenza						Influenza (yearly)											
Measles, mumps, rubella						MMR							MMR	MMR Series			
Varicella						Varicella						Varicella	Varicella				
Meningococcal											MCV			MCV	MCV		
Vaccine	Birth	1 mo.	2 mos.	4 mos.	6 mos.	12 mos.	15 mos.	18 mos.	19-23 mos.	24 mos.	2-3 yrs.	4-6 yrs.	7-10 yrs.	11-12 yrs.	13-14 yrs.	15 yrs.	16-18 yrs.

□ Range of recommended ages

□ Catch-up immunization

□ Certain high-risk groups

➔ For the latest recommended schedule of immunizations for patients up to age 18, view the next page.



# Take Time for The Teeth

**W**hile plenty of physicians may favor incorporating oral health interventions into wellness visits, few have had formal training in oral health. Nevertheless, the health of a patient's mouth can reveal a great deal about their lifestyle and their overall medical condition.

Take a moment in your wellness appointments to check your patient's mouth and make the appropriate referral if needed. Doing so will benefit the individual's care and may prevent an unnecessary visit to the emergency room.

The American Dental Hygienists' Association recommends the following to physicians:

- **Ask patients whether they have issues with their teeth and gums. Determine when they've last seen a dentist.**
- **Review the patient's medications, keeping in mind that certain drugs cause side effects such as dry mouth, which can lead to dental caries, periodontitis and other oral complications.**
- **Consider quality-of-life concerns such as poor nutrition and depression that may exist along with severe dental issues.**
- **Remind patients who have dentures to submerge them in water or a denture-cleaning solution to prevent drying when not in use.**

## The Whole Patient

Do you have patients who are struggling with depression, stress, substance abuse or other behavioral health conditions? We have resources available to help them. You can refer Sunshine Health members to these services by calling Cenpatico (Behavioral Health) at 1-866-796-0530.



## 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
- Use our claim auditing software when a procedure code is in question
- 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.

## Thank You For Your Feedback

We value our contracted network of providers. We recognize the service and commitment you provide our members, and we welcome your feedback in our annual practitioner satisfaction survey. After all, your satisfaction contributes to the satisfaction of our members.

If you took part in the 2011 survey, thank you. Sunshine Health is reviewing the results and applying it to our list of priorities for the year ahead. Below are key learnings from the survey results.

Physicians report that Sunshine values their input and recommendations, encourages and supports provider participation in QI activities, and covers and encourages preventive care and health wellness. Other areas of increased satisfaction are:

- ➔ Availability to request authorizations by phone, fax, or web portal
- ➔ Timeliness of resolution requiring Medical Director intervention
- ➔ Alternative care and community resource options offered by Case Managers
- ➔ Call Center/Provider Services Staff
- ➔ Provider Relations
- ➔ Continuity/Coordination of Care