



Caring for **adolescents**

Growing into adulthood is a time of great transition—including changes in healthcare needs. Sunshine Health supports members of all ages getting the care they need.

Parents and providers should discuss whether adolescents and teens are seeing the right doctor. For example, children who are seeing pediatricians may need to switch to an adult doctor. Talk with parents. You can help ensure that there are no breaks in a child's care. It's important for children to see their doctor at least once a year.

Sunshine Health is required to provide information about how it can help members who are reaching adulthood choose an adult primary care practitioner. Members who need help finding the right doctor or making appointments can call our Customer Service staff at **1-866-796-0530**.

REMINDER:

Submit medical records

To help us process authorization requests accurately and efficiently, please submit sufficient medical information to justify the request and allow for timely processing. Submitting insufficient medical records can cause processing delays and increase the risk for denials.

If you have questions or concerns about the type of medical information required, contact our Medical Management Department at **1-866-796-0530**.

DISEASE MANAGEMENT SUPPORTS HEALTHY OUTCOMES

As part of our medical management and quality improvement efforts, we offer members disease management programs.

A major goal of our disease management program is to support the member's ability to self-manage chronic conditions. We strive to achieve this by ensuring that referrals are made to the proper providers, providing health education, promoting coordination among providers and encouraging adherence.

Learn more about our disease management services at www.sunshinehealth.com or by calling **1-866-796-0530**.

A shared agreement

Member rights and responsibilities cover members' treatment, privacy, and access to information. We have highlighted a few below. There are many more and we encourage you to consult your provider handbook to review them.

Member rights include, but are not limited to:

- Receiving all services that we must provide
- Assurance that member medical record information will be kept private
- Being able to ask for, and get, a copy of medical records, and being able to ask that the records be changed/corrected if needed

Member responsibilities include:

- Asking questions if they don't understand their rights
- Keeping scheduled appointments
- Having a member ID card with them
- Always contacting their primary care physician (PCP) first for nonemergency medical needs
- Notifying their PCP of emergency room treatment



We help moms Start Smart

Start Smart for Your Baby® (Start Smart) is our special program for women who are pregnant. We want to help women take care of themselves and their babies every step of the way. To take part in this program, women can contact Member Services at **1-866-796-0530**. As soon as you confirm a patient's pregnancy, submit a notification of pregnancy (NOP).

Case managers connect the dots

Case managers are advocates, coordinators, organizers, and communicators. They are trained nurses and practitioners who can support you and your staff, as well as your patients.

Support and communication

Their goal is to promote quality, cost-effective outcomes by supporting patients and their caregivers. They are often assigned by the health plan to a member when the member's condition needs complex coordinated care that the member may not be able to facilitate on his or her own.

A case manager connects the member with the health care team by providing a communication link between the member, his or her primary care physician, the member's family and other health care providers, such as physical therapists and specialty physicians.

On your team

Case managers do not provide hands-on care, diagnose conditions or prescribe medication. The case manager helps a member understand the benefits of following a treatment plan and the consequences of not following the plan outlined by the physician. In this way, they become the eyes and ears for the healthcare team, and a resource for physicians, the member and the member's family.

Our team is here to help your team with:

- Non-compliant members
- New diagnoses
- Complex multiple co-morbidities

Providers can directly refer members to our case management group. Providers may call **1-866-796-0530** for additional information about the case management services offered by Sunshine Health.



Access and availability

The availability of our network practitioners is essential to member care and treatment outcomes. We evaluate the performance in meeting these standards and appreciate you working with us to accommodate our members' clinical needs. In order to ensure appropriate care, we have adopted the geographic accessibility standards below.

GEOGRAPHIC ACCESSIBILITY TO:	DISTANCE FROM MEMBER RESIDENCE	GOAL MET ?
Primary care physician(s):	Within 30 minutes/20 miles	Yes
OB/Gyn(s)	Within 50 minutes/35 miles	Yes
High-volume specialist(s)	Cardiology: within 50 minutes /35 miles Allergy/immunology: within 80 minutes/60 miles Pulmonology: within 60 minutes/45 miles Endocrinology: within 100 minutes/75 miles	Yes

Thank you for complying with this assessment and providing the highest quality care for our members.

Updates to our pharmacy coverage

Sunshine Health is committed to providing high-quality, appropriate, and cost-effective drug therapy to its members. We utilize the AHCA Preferred Drug List (PDL) for our Medicaid members.

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 provider relations at **1-866-796-0530**. You can also view the PDL online at www.sunshinehealth.com.

BEHAVIORAL HEALTH: POST-DISCHARGE APPOINTMENTS

Do you have a patient who was recently hospitalized for a behavioral health condition and is having difficulty arranging a post-discharge appointment? Let us help. Outpatient follow-up within 7 days of discharge—as well as another visit within 30 days of discharge—is vital to an individual's recovery. It is an opportunity to support their transition back into the community and to ensure they are taking prescribed medications correctly.

We have staff who will work with you to encourage the appropriate follow-up care. If you're an outpatient provider and you cannot meet the appointment needs of these discharging members, or if you have more

availability than is being utilized, contact your Sunshine Health's Provider Partnership Manager to let them know.

Sunshine Health will continue to work diligently with our facilities, outpatient providers and members to help schedule these valuable appointments. Here are some ways we can assist:

- Scheduling support for follow-up appointments within the 7-day and 30-day time frames
- Appointment reminder calls to members
- Member transportation assistance

HEDIS SPOTLIGHT:

Antidepressant medication management (AMM)

The HEDIS AMM measure includes two sub-measures:

- 1. Antidepressant medication management (acute phase).** Percent of health plan members 18 years and older with a diagnosis of depression who were treated with an antidepressant medication and remained on the medication for at least 12 weeks.
- 2. Antidepressant medication management (continuation phase).** Percent of members 18 years and older with a diagnosis of depression who were treated with an antidepressant medication and remained on the medication for at least 6 months.

Depression is the most common form of mental illness, affecting about 6.9% of American adults. Antidepressants have a significant role in treatment plans, but patient adherence is a notable challenge.

Make adherence a priority among patients who have been prescribed antidepressants. Ask patients to discuss side effects should they arise. Suggest patients track their feelings with a simple notation on their calendar—a plus or minus mark, a smiling or frowning face. At their next appointment, review overall trends along with medication compliance. For many patients, feeling involved in their treatment program can encourage adherence.



Asthma education: Go back to basics

A comprehensive medication plan is critical in order to successfully manage asthma. If patients are struggling to control their asthma symptoms, try discussing the basics: Ask them if they understand when and how to take their everyday maintenance medication, their quick-relief medication and any nebulizer medications.

Also, take advantage of these online resources to help educate your patients and their caregivers:

1. The American Lung Association's (ALA) free interactive online course, "Asthma Basics," at www.lung.org/lung-health-and-diseases/lung-disease-lookup/asthma/asthma-education-advocacy/asthma-basics.html.
2. Lungtropolis®, an interactive website and game developed by ALA specially designed for children, at www.lungtropolis.com.
3. The CDC's asthma resources for schools and childcare providers, which features a video series on how to use an inhaler, at www.cdc.gov/asthma/schools.html.

ASTHMA HEDIS MEASURES

Medication management for people with asthma: Members ages 5 to 85	Two measures reported: 1. Members remaining on asthma controller medication for at least 50% of their treatment period. 2. Members remaining on asthma controller medication for at least 75% of their treatment period.
Codes	ICD-10: J45.20, J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901, J45.902, J45.909, J45.990, J45.991, J45.998



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