

CONNECTIONS

A Provider's Link to AmeriHealth Caritas District of Columbia

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Winter newsletter welcome message

Welcome to the winter edition of Connections — our newsletter for AmeriHealth Caritas District of Columbia (DC) providers. In this edition, we are excited to share with you many great resources to help you provide the best care to your patients.

Letter from Dr. Patchen, MedStar Hospital, on broadening providers' approach to maternal care

The District of Columbia has nearly universal health coverage, yet our community also suffers from some of the most devastating maternal and child health outcomes in the United States — and the world. Far too many women are at risk of dying or experiencing significant, even life-threatening conditions, during and after pregnancy. When thinking about these statistics as a single health care provider, the work we need to accomplish on behalf of women and their children may feel overwhelming. Yet as a community of caregivers and in partnership with organizations like AmeriHealth Caritas DC, we can change lives and health outcomes. Fortunately, the solutions are not all complex and difficult — many of them start with us and can be implemented directly and timely. Other supports may be facilitated through our collaboration to better serve our patients in a way that integrates our care more deeply within the context of their lives.

For the past two decades, I have worked and lived in D.C. I've strived to deliver patient-centered care, focusing on the reproductive and sexual health of adolescents. I currently provide these services directly to students enrolled in two District public schools, Roosevelt and Anacostia high schools.

As a practitioner, I understand the incredible demands and limitations that are placed on us when delivering care. The pressure to see many patients quickly, the complexities of a changing health care system, and challenges associated with supporting our patients with addressing their health needs are just a few examples. Despite these difficulties, we are in a position to educate, heal and inspire — all of which starts when we focus on listening, individualizing care to where our patients are at the moment, and recognize that developing trust is foundational to delivering high-quality, safe care. Our training tends to focus on diagnostic differentials, lab values, medications, and technical skill. Often there is comparatively little intentional training on communication, which may be the key to engaging patients. And, as we all quickly recognize, achieving excellent outcomes requires successful engagement. In health care, providers are not always socialized professionally to listen, and yet that is often the key to our success.

Having worked and lived in DC for so long, I now find myself in a position where I am connected with generations of women within families. Caring for connected generations of patients is incredibly meaningful because women are not only open and forthcoming about the most intimate and difficult parts of their lives, but also their joyful victories. This is possible only because of the trust we have built over time.

Excellence in technical skill and a rich fund of knowledge is necessary to provide exceptional health care during the perinatal period; I also believe it to be insufficient. Listening is key to providing safe, high-quality, effective care. Women need to feel they are safe to engage in an honest conversation, and we as providers need that honest conversation in order to be effective in our role. Asking questions that allow women to share their narrative opens the door to this process.

AmeriHealth Caritas DC is committed to providing access to the best quality care to our patients and has been collaborating with providers, social services, and other stakeholders to address D.C.'s maternal health needs. We know this starts with connecting AmeriHealth Caritas DC providers with the best resources and supports to help care for their patients. Throughout this newsletter, you will find information on programs and resources designed to help you give your patients the care they need to be the best version of themselves. I encourage you to contact AmeriHealth Caritas DC at 202-408-2237 for more information on enrolling your patients in these maternal health programs or obtaining copies of these resources for your office.

It is a pleasure to serve alongside each of you and continue to provide our patients with the best care possible.

Sincerely,

Loral Patchen, Ph.D., CNM, IBCLC Vice Chair of Obstetrics and Gynecology Executive Director, Teen Alliance for Prepared Parenting MedStar Washington Hospital Center

Meds Made Easy medication adherence program helps your patients stay on top of their medication schedules

Medication nonadherence is widely recognized as a common and costly problem. <u>Approximately 30% to 50%</u> of U.S. adults do not adhere to long-term medication routines, leading to an estimated \$100 billion in annual costs caused by preventable, and possibly serious, health problems.

AmeriHealth Caritas DC created Meds Made Easy, a medication adherence program offered through participating independent pharmacies, to alleviate this problem by eliminating barriers for enrollees who may experience challenges in keeping up with their medication refills.

We partner with three local pharmacies to make it easier for qualifying patients to have all their prescribed medications delivered to them each month, thereby eliminating the hassle of travel and wait times at the pharmacy.

Meds Made Easy offers the following services:

- Medication reconciliation and synchronization: All the
 patient's prescribed medications are refilled on the same day
 each month to reduce the patient's trips to the pharmacy
- Medication prepacking (optional): Personalized medication is packaged in easy-to-use blister packs, helping to ensure your patients know the right medications to use at the right time
- Health education regarding medications and disease management
- Door-to-door medication delivery

Working to ensure your patients receive their medication on time each month improves their ability to manage their health and chronic conditions and contributes to the improvement of their overall care continuum.

If you have a patient who you think would benefit from this program, offered at no cost to them, please call us at **1-877-759-6224** and we will contact the patient to obtain their consent and enroll them into the program. Your patients may also refer themselves to the program by calling **1-877-759-6224**.

Please contact your Provider Network Management Account Executive or Provider Services to learn more about Meds Made Easy at 202-408-2237 or 1-888-656-2383.



Dental updates

Value-based incentive program available to participating primary dental care providers (PDPs)

AmeriHealth Caritas DC created the PerformPlus® value-based compensation program for participating PDPs who provide primary dental services to AmeriHealth Caritas DC enrollees.

The program is founded on the following performance components:

- Healthcare Effectiveness Data and Information Set (HEDIS®) measures
- Quality metrics
- HEDIS human papillomavirus (HPV) vaccination rates
- Low-acuity nonemergent emergency room (ER) rates

Incentive compensation, in addition to a practice's base compensation, is paid to those PDP groups that outperform peers in the defined components. This program features a unique reimbursement model intended to reward providers for delivering high-quality and cost-effective care.

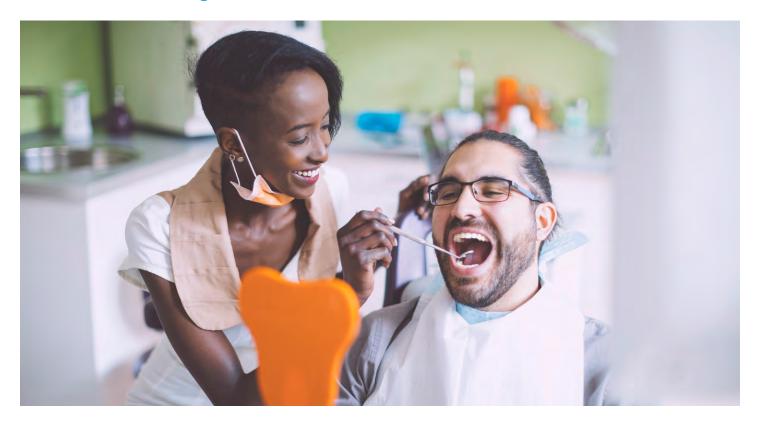
The AmeriHealth Caritas DC executive team would like to thank our top 11 provider groups of 2018 – 2019 for providing amazing care to our enrollees:

- Caroline Larosiliere, DDS & Associates PA
- Children's Hospital
- Dental Dreams PLLC
- Hero Dental of Washington DC

- IB Dental II PC
- Kool Smiles DC PC
- Mary's Center For Maternal and Child Care Inc.
- Animar Dental Spa

- Sharmin Dental Clinic PC
- The Washington Dental Healthcare Center
- Unity Health Care Inc.

For more information about the program, please contact Darin Hutchins, Provider Network Management Account Executive, at **202-326-8921**.



Dental updates

Incorporating dental sealants into new patient exams

Have you considered placing dental sealants during new patient exams? Our "Same-Day Sealant Workflow" is coming soon to the AmeriHealth Caritas DC dental provider webpage. In the meantime, here are some questions to think about:

Why should you implement?

- Prevents chronic oral health disease
- Increases sealant measure
- Staff performs top-of-licensure scope

 Reduces need for additional appointments, which could help avoid no-show appointments

How can you incorporate sealants into new patient exams?

- Create ready-to-go sealant kits
- Establish protocols and workflows to place sealants during new patient exams

 Implement daily huddles to enhance communication and evaluate schedule for patients who may be eligible for sealants

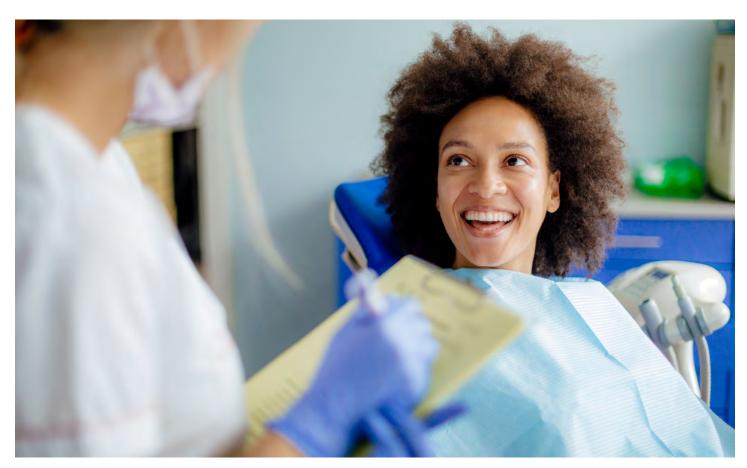
What outcomes are most likely?

Increased productivity

• Enhanced patient concept of prevention

Dental treatment during pregnancy is both safe and effective

According to the American College of Obstetricians and Gynecologists' *Committee Opinion on Oral Health Care During Pregnancy*, oral health is key to overall health and well-being and should be maintained during pregnancy and throughout a woman's life. Preventive, diagnostic, and restorative dental treatment during pregnancy is both safe and effective in improving oral health.



Primary care update

The eyes are a window to the soul. But as a primary care provider (PCP), you know that periodic wellness eye exams reveal so much more.

The latest in a growing list of what can be detected during an eyeexam includes:

- Diabetes blurry vision from blood sugar fluctuation
- **Hypertension** damaged blood vessels
- High cholesterol —
 buildup on the cornea;
 plaques clogging
 arteries in the eye
- Multiple sclerosis sudden vision loss; change of optic nerve's color or appearance

- Sexually transmitted infections — unresolved pinkeye and other signs (syphilis, chlamydia, herpes)
- Thyroid disease dry eye, muscle stiffness, bulging eyes (Graves' disease)
- Lupus and other autoimmune disorders uveitis (red, swollen eyes)
- Cancers lymphoma, leukemia, ocular melanoma, and basal cell carcinoma

It's important that, as you monitor the overall health and wellness of our enrollees, you encourage them to schedule their routine eye exams and ask them about outcomes during their next visit. It is well recognized that healthy eyesight promotes early childhood learning, success in school, and good behavior, but it's not only children and eyeglass wearers who benefit from periodic routine eye exams.

When should patients get a complete eye exam?

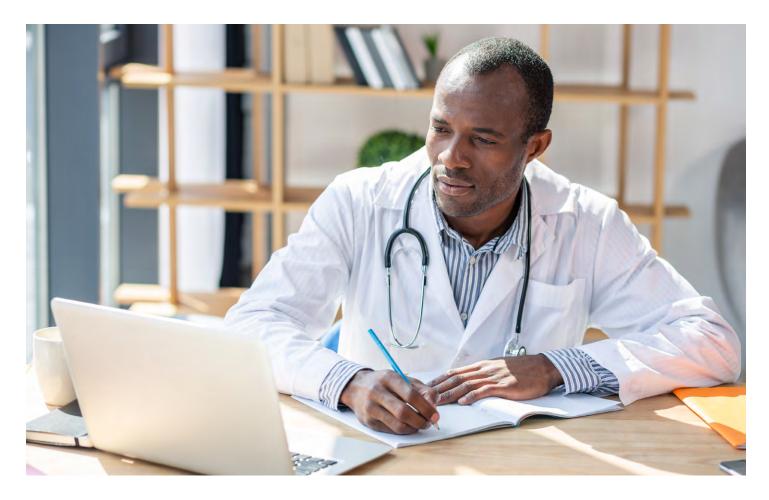
If a patient is risk free or asymptomatic, the American Optometric Association (AOA) recommends the <u>following exam frequency</u> for children and adults:

- Age 6 months
- Age 3
- Age 6, before first grade
- Ages 6 to 60, every two years

AmeriHealth Caritas DC provides our Medicaid enrollees with annual routine exams and eyeglasses for children under age 21 and biennial routine exams and eyeglasses for adults beginning at age 21. Routine eye exams are especially important for school-age children, whose learning can be affected by vision issues, and for older patients, who are more likely to develop diabetes, macular degeneration, glaucoma, and cataracts.

Please talk with your patients about the importance of eye exams as part of their total wellness program.





Behavioral health spotlight: Online trainings for screening and treatment are available now

As a part of AmeriHealth Caritas DC's ongoing effort to support integrated care, we have created online trainings to assist providers in improving the quality of behavioral health screenings and treatments for our enrollees.

Under the Provider Education and Training section of our website, you can now find trainings on:

- Attention deficit hyperactivity disorder
- Anxiety disorders
- Depression
- Opioid use disorder

More information on what is included in each training is provided below. The following additional resources are also available to you:

- In-person, on-site behavioral health training from a clinical educator. (Contact your Provider Network Management Account Executive if you are interested.)
- Our <u>Behavioral Health Provider Toolkit</u>
- Other e-learning modules in this series: Depression and anxiety disorders training modules are available now, and additional modules are in development.

If you have any questions, please contact your Provider Network Management Account Executive.

Behavioral health spotlight: Online trainings for screening and treatment are available now

Attention deficit hyperactivity disorder (ADHD)

ADHD is one of the most common neurodevelopmental disorders of childhood, and most children and adolescents who are diagnosed with ADHD will continue to experience ADHD symptoms during adulthood. More than 6 million American children between the ages of 4 and 17 have been diagnosed with ADHD. Additionally, it is estimated that 4% of adults are diagnosed with ADHD. Adults with ADHD can experience unstable relationships, poor work or school performance, low self-esteem, and other problems.

Our <u>ADHD e-learning module</u> includes a review of symptoms and suggestions about how to incorporate evidence-based screening tools and appropriate follow-up treatment into your practice.

Upon successful completion of this training, you should be able to:

- Describe ADHD
- Identify the symptoms of ADHD
- Explain how ADHD is diagnosed
- Identify evidence-based tools to screen for ADHD
- Identify age-appropriate treatments for ADHD
- Describe the HEDIS measures for ADHD

Please let us know you have completed the <u>ADHD e-learning</u> training module by clicking the Attestation Form link at the end of the training and completing the brief survey.

Anxiety disorders

Anxiety disorders, such as generalized anxiety disorder, phobias, and panic disorders, <u>are some of the most common behavioral health conditions</u>, and we recognize that PCPs act as the front line in screening and treating these conditions.

Accordingly, the <u>anxiety disorders e-learning module</u> is an overview for providers, including a review of symptoms and how to incorporate an evidence-based screening tool and appropriate follow-up treatment into your practice.

Upon successful completion of this training, you should be able to:

- Describe anxiety disorders
- Explain the differences between anxiety and anxiety disorders
- Identify the types of anxiety disorders
- Describe the symptoms of anxiety disorders

- Use screening tools to measure and assess anxiety disorders
- Describe methods to treat anxiety disorders
- Locate AmeriHealth
 Caritas DC resources
 and support available,
 including our <u>Behavioral</u>
 Health Provider Toolkit

Please let us know you have completed the <u>anxiety disorders e-learning training module</u> by clicking the **Attestation Form** link at the end of the training and completing the brief survey.



Behavioral health spotlight: Online trainings for screening and treatment are available now

Depression

AmeriHealth Caritas DC designed the <u>depression e-learning</u> <u>module</u> to give you an overview of depression and how to incorporate evidence-based screenings and appropriate follow-up treatment into your patient's care.

Upon successful completion of this training, you should be able to:

- Define depression
- · Recognize and screen for depression in patients
- Measure the severity of depression using the Patient Health Questionnaire 9 (PHQ-9) for adults and the PHQ modified for adolescents (PHQ-9A)
- Identify ways to treat depression
- Recognize the HEDIS Antidepressant Medication Management (AMM) measure
- Locate AmeriHealth Caritas DC resources and support available, including our <u>Behavioral Health</u> <u>Provider Toolkit</u>

Please let us know you have completed the <u>depression e-learning training module</u> by clicking the **Attestation Form** link at the end of the training and completing the brief survey.



Opioid use disorder (OUD)

In 2018, an estimated 2 million Americans age 12 or older had an OUD. Currently, two out of three drug overdose deaths involve an opioid. The OUD e-learning module is a self-guided learning experience providing up-to-date information on the opioid epidemic.

The curriculum includes:

- An overview of OUD
- Current U.S. statistics on the opioid epidemic
- The impact of the epidemic on Medicaid recipients
- The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5™) criteria for substance use disorders
- The Centers for Disease Control and Prevention (CDC) guideline for prescribing opioids for chronic pain
- Information about evidence-based practices such as:
 - Medication-assisted treatment (MAT)
 - Cognitive behavioral therapy (CBT)
 - Screening, Brief Intervention, and Referral to Treatment (SBIRT)
 - Motivational interviewing
 - Peer support services
- The HEDIS® measures for OUD
- Resources and support available to you and your practice

Please let us know you have completed the <u>OUD e-learning</u> <u>training module</u> by clicking the <u>Attestation Form</u> link at the end of the training and completing the brief survey.

AmeriHealth Caritas DC PCP Quality Enhancement Program

The Primary Care Provider Quality Enhancement Program (PCP QEP) is designed to reward PCPs for the hard work they do to improve our enrollees' health. These value-based incentive payments are based on the performance of each provider's group practice and is in addition to the practice's base compensation. The incentive payment is based on a total cost of care, risk-adjusted shared savings pool, and whether or not the provider demonstrated an "efficient use of services relative to the overall population."

So what does this really mean? Here are a few key definitions:

- Risk-adjusted trend calculation Ratio of the actual medical and pharmacy trend to the expected trend. A ratio of less than 100% indicates a lower than expected spend and a savings in medical cost.
- Efficient use of services Having an actual medical and pharmacy spend less than the expected medical and pharmacy spend in the measurement year

Providers are eligible to receive incentive compensation for improving their performance in the following areas:

- Scoring amongst the top percentile of PCPs in HEDIS measures
- Reducing potentially preventable inpatient visits (PPA), low-acuity nonemergent emergency department visits (LANE), and all-cause readmissions within 30 days of a prior admission (PPR)
- Scoring amongst the top percentile in a satisfaction survey

The PCP QEP manual is <u>available online</u>.
Please feel free to reach out to Rebecca Landucci at <u>rlanducci@amerihealthcaritas.com</u> or your Provider Network Management Account Executive for a copy or more information.



- 1. MetroBest Clinic received the highest percentage of the total program payout by having both efficient use of services and favorable risk-adjusted trend, as well as an Elite Tier rating for meeting their HEDIS targets for PPR.
- 2. Elaine Ellis Center of Health had the second highest percentage of total payout by having both efficient use of services and favorable riskadjusted trend. Elaine Ellis met the Elite Tier target for PPA and Premium Tier target for PPR.
- 3. Children's Medical Care Center had the third highest percentage of total payout by having both efficient use of services and favorable riskadjusted trend. They hit the Elite Tier target for PPA.

Keep up the good work!

Important reminders and updates

Translation services

AmeriHealth Caritas DC provides language services for our enrollees who do not speak English at no cost to enrollees.

Services are provided in the following forms:

- On-site interpreter services at your office
- Bilingual Spanish- and Amharic-speaking representatives in our Enrollee Services department
- A language line for interpretation over the phone in more than 120 languages
- Translation of all written documents upon request

If you encounter an enrollee who needs language assistance or wants to file a complaint about language access services, contact Enrollee Services. For Medicaid enrollees, call **202-408-4720** or **1-800-408-7511**. For Alliance enrollees, call **202-842-2810** or **1-866-842-2810**.

Transportation benefits for enrollees



Postpartum visits window has changed

The National Committee for Quality Assurance (NCQA) has changed HEDIS specifications for postpartum visits. The time frame has changed from 21 – 56 days to 7 – 84 days.

Enrollee Rights and Responsibilities are available online

You can read the Enrollee Rights and Responsibilities and **Notice of Privacy Practices** online at any time or by request.

Formulary updates

The most current formulary information for AmeriHealth Caritas DC enrollees can always be found in our <u>online</u> <u>searchable drug formulary</u>.

Know your credentialing and recredentialing rights

During the credentialing and recredentialing processes, all providers have the right to:

- Review their credentialing information, with the
 exception of references, recommendations, and
 peer-protected information obtained by the plan.
 When a discrepancy is identified between an
 application and other sources, the Credentialing
 department will contact the provider for clarification.
- Correct erroneous information
- Inquire about the status of credentialing or recredentialing applications
- Receive notification within 60 calendar days of the credentialing committee's decision
- Appeal any credentialing or recredentialing denial within 30 days of receiving written notification of the decision

Questions regarding the status of a credentialing application may be directed to the AmeriHealth Caritas DC Credentialing department at **1-877-759-6186**.



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