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Greetings from HPSM's New Provider Services Director

Hello, I'm Colleen Murphey, HPSM's new Provider Services Director. I joined the Health Plan in October, and am incredibly excited to take on this new role serving our community and supporting you as you care for our members. As I look forward to the year ahead, the Provider Services team and I will be focused on:

- Understanding your clinical and organizational priorities
- Making it easier to work with HPSM so you can focus on delivering exceptional care
- Expanding our network of providers to make sure we are able to meet our members' healthcare needs
- Communicating Provider Services' strategic priorities, and working together with you to achieve them

I look forward to meeting you in the coming months! In the meantime, I encourage you to email me at Colleen.Murphey@HPSM.org with any questions or simply to say hello.

Sincerely,

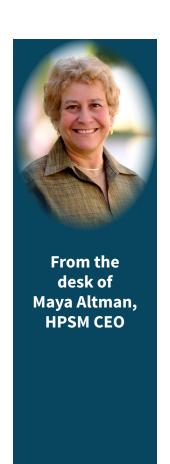
Colleen Murphey **HPSM Provider Services Director**



Colleen Murphey

Prior to HPSM, I spent a decade working with healthcare providers—as a consultant for McKinsey and The Advisory Board Company, and as an entrepreneur advising healthcare startups in the U.S., China and India. I received my M.B.A. in Healthcare Management from the Wharton School of Business and my B.A. in Human Development from the University of Chicago.

While my career has taken me to many places, my family and I are delighted to have put down roots in the Bay Area. I originally hail from a region of rural Minnesota that relies heavily on Medicaid, so providing excellent care for the underinsured is a deeply personal mission for me.



HPSM Earns NCQA Accreditation

In September, the National Committee for Quality Assurance (NCQA) awarded HPSM's Medi-Cal program Interim Accreditation status. We pursed NCQA Accreditation not because it was required of us, but to better serve our members and providers. I'm proud to announce that undergoing NCQA's rigorous accreditation process has accomplished this by making HPSM a more efficient and effective health care organization.

Basically, NCQA accreditation is the health care industry's "seal of approval" certifying that HPSM meets the highest quality standards. NCQA measured HPSM against those standards by surveying our performance in six key areas. The areas that most impact our providers include Quality Improvement (including Care Coordination), Utilization Management (including Pharmacy), Credentialing and Network Management.

HPSM is already engaged in pursuing a Full Survey. We expect to know whether we attain this status in spring 2019. We will update you on any major developments along the way.

NCQA NCQA

HEALTH PLAN

INTERIM

Maya Altman, Chief Executive Officer, HPSM ► Learn more about NCQA Accreditation at www.ncqa.org.

5210—Encourage Healthy Habits Every Day

The "5210" program is a nationwide initiative that encourages healthy eating and daily exercise. HPSM has free 5210 posters that make the program's message easy for people to understand and remember. Order some for your office—they make great conversation starters when you want to talk with your patients about developing healthy habits!

To order posters, contact HPSM's Health Education Department at 650-616-2165 or HealthEducationRequest@hpsm.org.



HPSM is Updating Our Primary Care Payment Model and Performance Measures

In July 2018, HPSM will introduce new payment models and updated performance metrics to recognize and further drive the delivery of highquality care for our members. Throughout 2017, we have undertaken an extensive review process to update our performance program metrics and payment methodology. As part of this process we sought input from providers and clinic staff, experts from other health plans, research centers and consulting groups. We are collaborating to rethink how the Health Plan can best support providers in providing highquality healthcare to patients.

Based on provider input and emerging best practices across the healthcare industry, the Health Plan is shifting our approach to "pay for performance." We are moving from incentivizing process metrics to rewarding achieved outcomes, and moving from a fee-forservice payment structure to one of benchmarking and improvement thresholds. We are rethinking how we look at access to care, and what constitutes true "patient engagement."

Starting in 2018, primary care providers will have the opportunity to opt in to one of

several different performance program tracks. A critical goal of this program is flexibility: allowing providers to choose the approach that makes the most sense for their practice.

As we look to future years of the program, HPSM is committed to building in meaningful evaluation – and adjustment – capabilities, so that we continue to evolve the way that we support and reward excellent quality of care.

If you would like to learn more about this program or help shape our approach, please email our Primary Care Program Coordinator, Kati Phillips, at kati.phillips@hpsm.org.

HPSM is Moving All Providers to EFT/ERA on January 1, 2018

Remember: on January 1, 2018, HPSM will move all providers from paper checks and Remittance Advices to Electronic Fund Transfer (EFT) and Electronic Remittance Advices (ERA). With these convenient services, you get paid faster and have 24/7 access to your payment records. If you haven't enrolled yet, it's easy—here's how:

Contact Provider Services at **650-616-2106** or psinquiries@hpsm.org.

OR

Download and complete the EFT/ERA Authorization Form at https://www.hpsm.org/documents/ERA-EFT Authorization Form.pdf. Then send it to us at the fax or email address listed on the form.

Benefits of EFT/ERA

- *EFT is fast, secure and reliable:* Money is deposited directly into your bank account, so you get paid faster
- *ERA saves time:* View electronic RA files on your computer or phone anytime through our secure web portal
- EFT & ERA improve compliance: Digitally automating the payment process (instead of manually matching paper checks to paper RAs) eliminates errors



How to Serve Seniors and People with Disabilities

#3 in HPSM's QI Toolkit Spotlight series

In the Fall 2016 issue of HealthMatters MD, we introduced HPSM's Provider Quality Improvement (QI) Toolkit and said we'd spotlight specific Toolkit items in subsequent newsletters. In this issue, we focus on the "Seniors and Persons with Disabilities" module—specifically some tips for providing top-quality service to these populations.

Seniors and people with disabilities are, first and foremost, people. They do not define themselves by their age or condition, and prefer to be treated just like everyone else. On the other hand, there are times when it is appropriate to extend a helping hand to a senior or person with a disability.

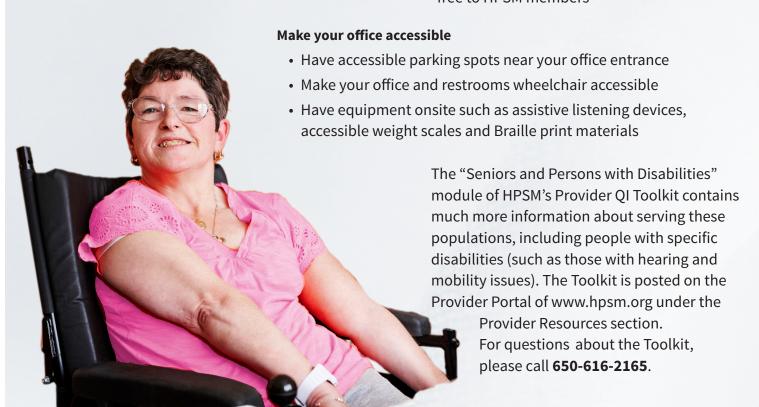
Knowing what kind of help to offer and when to offer it is the key to providing high-quality service. Here are some ways that you and your staff can make seniors and people with disabilities feel welcome at your office.

Treat people like people

- Always respect people's dignity, individuality and right to independence
- Ask before you help: not everyone needs or wants help
- Focus on the person, not their age or disability: don't bring it up unless it is relevant to the discussion

Communicate naturally

- Speak just as you would with anyone else: don't talk slower or louder (unless asked to)
- Speak directly to the senior or person with a disability rather than their companion
- Don't interrupt someone who has a speech impediment: and if you can't understand them, don't pretend you do
- Schedule a Sign Language Interpreter if needed: HPSM provides this service for free to HPSM members



The NAL may have a new phone number, but it's still:

- Toll-free
- Open 24/7 (including holidays)
- Staffed by Licensed Registered Nurses (RNs)

New Phone Number for Nurse Advice Line

HPSM's Nurse Advice Line (NAL) has a new phone number:

1-833-846-8773 (1-833-84-NURSE)

Please update the NAL phone number in your contacts list and any office/clinic materials you give to HPSM patients. HPSM has notified our members of the new NAL number by mail, and we are updating our member communication materials.

The Department of Managed Health Care requires contracted HPSM providers to have 24/7 telephone triage services to which they can refer our members. The NAL fulfills this crucial requirement, and we encourage you to use it. If you have office-based triage services already in place during business hours, you may choose to use HPSM's NAL for after-hours and weekend calls.

For questions about HPSM's NAL, please contact Provider Services at **650-616-2106**.

HPSM's FWA Special Investigations Unit

As part of HPSM's ongoing efforts to prevent Fraud, Waste and Abuse (FWA), we have launched a new program to identify potential FWA violations led by a dedicated Special Investigations Unit (SIU).

The SIU uses a number of resources to detect, prevent and remediate FWA—including software that analyzes providers' remittances to identify potentially problematic billing and utilization practices. The program assigns a risk score between 1 and 1000 (with 1000 being the highest risk) for aberrations in various issues such as upcoding, unbundling, modifier usage and billing frequency.

After a potential FWA issue is flagged, the SIU begins the investigation process, which may include requests for medical records and information, as well as contact with regulatory agencies (such as the California Department of Justice, Department of Health Care Services, and Centers for Medicare and Medicaid Services). The SIU carefully considers providers' feedback and works closely with HPSM's medical directors, senior management and employees in other departments to satisfactorily resolve any issues.

If you want to learn more about HPSM's FWA efforts, you may reach out to our Compliance Investigator, Frank Arteaga, by emailing Frank.Arteaga@hpsm.org.

HPSM has a contractual and fiduciary responsibility to prevent, detect and correct potential and actual FWA issues. If you are contacted by the SIU, please cooperate with HPSM to resolve the issue quickly and appropriately.

№ Join the fight against FWA

HPSM is financed by taxpayers, and FWA depletes the public funds we are entrusted with to keep our members healthy. You can help safeguard these financial resources—and our members' health—by calling our Compliance Hotline at **1-800-826-6762** if you suspect FWA violations or have any questions about FWA.

Watch Out For Potential Quality Issues (PQIs)

A PQI is a suspected provider performance, clinical care or outcome of care issue that requires further investigation to determine if an actual quality of care concern exists. Referrals for PQI investigations can come from HPSM staff or members, contracted or non-contracted providers and their staff, or any member of the community (such as a member's family or friend). HPSM also identifies PQIs by reviewing:

- Complaints, grievances and appeals
- Concurrent, prospective and retrospective utilizations
- · Claims and encounter data
- Care coordination reports
- · Medical record audits

Some examples of PQIs include:

- Delays in obtaining referrals
- Rude behavior by clinical providers or staff members
- Inadequate assessment of patients
- · Complication in the delivery of a child
- · Unexpected death of a patient

When a PQI is identified, a Quality Improvement Nurse conducts an initial clinical review, investigates and then forwards the case to a Medical Director for case levelling and corrective action plan requests if needed. We ask the provider for the member's medical records and their response to the PQI to get their side of the story.

To report a PQI, please use the PQI referral form available on the HPSM website, or contact us at:

Phone: 650-616-2170Fax: 650-616-8235

• Email: PQIReferralRequest@hpsm.org

Remind Your Patients to Get a Flu Shot

It's flu season, and a flu shot can keep your patients from getting sick. According to the Centers for Disease Control (CDC), it's best to get vaccinated by November but getting the shot in January or even later can still be beneficial. So ask your patients if they've gotten their flu shot this year, and if they haven't, encourage them to get one.

While some people just need a reminder, others may be hesitant to get a flu shot. Solid scientific evidence supports the flu vaccine's health benefits, but many people still believe myths and misinformation that stoke their fears. Your patients see you as a trusted medical authority—so if you say the flu shot is safe and effective, they will be more likely to get one.



The Centers for Disease Control (CDC) reported that **only about 46 percent** of the U.S. population (six months and older) has gotten vaccinated during the 2016-17 flu season

https://www.cdc.gov/ flu/fluvaxview/coverage-1617estimates.htm#age-group-all

Got Patients Turning 65? Refer them to HPSM's CareAdvantage Plan

If you have Medi-Cal patients who are turning 65, they may be eligible for HPSM's CareAdvantage Cal Medi-Connect healthcare plan. CareAdvantage includes everything that your patients' Medicare and Medi-Cal benefits provide plus:

- Unlimited taxi rides to approved medical appointments
- Prescription drug coverage with no to low co-pays
- Vision care, including eye exams and money towards eyewear

CareAdvantage also benefits providers:

- Reimbursement rates starting at 80% of the Medicare fee schedule plus 10% of the Medi-Cal fee schedule
- No annual deductible from your claim payments
- No referrals required for outpatient services
- A single point of phone contact for both Medi-Cal and CareAdvantage

If you decide that CareAdvantage CMC is a good fit for a patient, ask them to call an HPSM licensed CareAdvantage CMC Sales Representative at **1-888-252-3153** or **650-616-1500**. Interested members can also learn more about CareAdvantage CMC online at www.hpsm.org/careadvantage/join.aspx.

Make a New Year's Resolution to Help Your Patients Quit Smoking

It's the start of a brand new year, and people are ready to make some healthy lifestyle changes. That makes January a perfect time for you to proactively encourage your patients to quit smoking (and other tobacco products). As a health care provider, you have a special role in your patients' health. Here's how you can help patients quit:

- Refer patients to support resources—The
 California Smokers' Helpline provides free
 services, training and materials to help people
 quit. You can refer patients by filling out a form
 at nobutts.org/helpline-referral-options or
 have them contact the Helpline directly.
- Accentuate the positives—Going smoke-free
 has a wide range of immediate and long-term
 health benefits, from younger-looking skin to
 a healthier heart and lungs. Visit smokefree.
 gov/quitting-smoking/reasons-quit/benefitsquitting for details.
- Prescribe FDA-approved tobacco cessation medication—HPSM covers all of these for adults who use tobacco products.

Patients can visit nobutts.org or call the helpline at 1-800-NO-BUTTS (1-800-662-8887)weekdays from 7 a.m. to 9 p.m. and
Saturdays from 9 a.m. to 5 p.m.

 Spanish: 1-800-45-NO-FUME (1-800-456-6386)

• Chinese: 1-800-838-8917

Korean: 1-800-556-5564

• Vietnamese: 1-800-778-8440

 Tobacco Chewers: 1-800-844-CHEW (1-800-844-2439)



