

Network **NewsBrief**

A publication for **AvMed** Providers and Staff

Summer 2018



**Closing Gaps
in Care for
Pediatric Patients**

**Lowering Your
Patients' Risk of
Diabetes**

**Postpartum
Depression-
Watch for the Signs**

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For complete details on all the current news you need to know and to download forms, please visit our website at **AvMed.org**.

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OUR COMMITMENT TO YOU

At AvMed, we believe knowledge is power. Not only do we pride ourselves on providing Members with quality, cost-effective health solutions and service excellence, we provide you with the resources to help your patients become engaged in their health care and take an active role in managing their health.

Inside you'll find important information about medication adherence, helping to close the gaps in care for pediatric patients plus lowering your patients' risk for diabetes. There's also the annual NCQA Provider Quality insert, a stand-alone guide to all the regulatory and compliance information you may want to refer to throughout the year. Please keep it for your reference.

I hope you are enjoying your summer and taking advantage of the many seasonal opportunities available to facilitate better health.

As always, we welcome your feedback. If you have any questions, suggestions or concerns, please call **1-800-452-8633** or email **Providers@AvMed.org**.

We'd love to hear from you.

Sincerely,



Ann O. Wehr, MD, FACP

Senior Vice President and
Chief Medical Officer

Population Health and
Provider Alliances

AvMed at Your Fingertips

CARE OPPORTUNITY CORNER

Closing Gaps in Care for Pediatric Patients

AvMed is committed to helping close the gaps in care for pediatric patients. Please keep in mind the following during your appointments with pediatric patients and their parents:

- Remember to initiate conversations with parents, provide vaccination information sheets and administer immunizations at the proper timeframe for children ages 2 and under, as well as for preteens and teens between their 10th and 13th birthdays.
- Vaccinations count as compliant when administered prior to the child turning 2 or 13. Vaccination recommendations from the Centers for Disease Control and Prevention (CDC) are provided through AvMed.org. Click on Providers/Provider Education/Guidelines and Standards then select Pediatric Preventive Care Recommendations and Immunizations.
- The CDC website has tools to help you start conversations and administer specific vaccines at specific timeframes. If seeing a new patient, be sure your records include vaccinations from the child's previous doctors, even if they are located outside of the country.
- Updating your pediatric patient's immunization information into Florida Shots will help manage missing immunizations and minimize record collection during the Healthcare Effectiveness Data and Information Set (HEDIS®) hybrid season each year.
- No matter the age of your pediatric patient, don't forget to discuss physical activity during well-child visits.



CDC vaccine recommendations provide additional immunizations above state minimum requirements to provide adequate protection against diseases. AvMed adopts the CDC recommendations to be compliant.

Reminder: Schedule Your Patient's Flu Shots

According to the CDC, last flu season (2017-2018) was very severe. The flu killed at least 160 children and hospitalized 105 out of every 100,000 people, hitting those older than 65 the hardest. And, in some cases, people who got flu shots still become ill, but their severity of illness was significantly less than for people who skipped the shots.

Flu shots become available as early as August 1st as the new 2018-2019 flu season begins. Schedule your patient's flu shot, as it's one of the most effective ways to prevent infection and it helps protect your patients and their loved ones.



MEDICATION ADHERENCE – STATINS

Once a patient walks out your door, it's his or her responsibility to take medications as directed. Unfortunately, many Americans are not doing that. And for people with chronic conditions, that can mean serious – and often life-threatening – problems. For example, low statin adherence is associated with more fatal and nonfatal cardiovascular events as well as a greater need for stents or bypass surgery.

Fortunately, there are some ways you can help your patients stick to their regimen. We've put together a list of common reasons that people often skip or stop taking their medicine altogether, along with responses for each one.

Reason No. 1: "I can't afford the medication."

If your patient raises concerns about a medication's price, consider prescribing a generic. Generics that impact Star measures have low or no cost share to the Member. Offering free samples are another option but should only be considered if you have enough to meet a patient's supply need for the rest of the year.

Reason No. 2: "I don't understand how this medication will help me."

Remember that your patients are not doctors. If they don't fully understand how a drug will benefit them, it's less likely they'll take it. In these cases, communication is a must: Explain to them why the drug is needed, how it will improve their health and how long they need to continue taking it. While doing so, avoid jargon and other language that may confuse them.

Reason No. 3: "I forget to take my medications."

Adherence tools like pill boxes can increase the odds of medication adherence in older patients. Younger patients may find that a mobile app or another technology makes it easier for them to maintain medication routines. There are even services like SinfoníaRx that help monitor one's therapy. Talk to your patients about these options to see which one works best for them.



For more resources on increasing medication adherence, contact AvMed's Provider Services Center at **1-800-452-8633**.



LOWERING YOUR PATIENTS RISK OF DIABETES

Diabetes Screenings Don't Measure Up

NCQA has made some adjustments to HEDIS screening requirements for Diabetes type 1 and 2 for adults age 18 to 75. Diabetics should have the following screenings at least once a year and health plans are required to report results to NCQA:

As clinicians, you can help lower that risk by utilizing key methods such as:

- Hemoglobin A1c test (considered to have poor control if >9.0%)
- Hemoglobin A1c Control <7
- Annual Retinal/Dilated Eye Exam with an eye care specialist (ophthalmologist/optometrist)
- Medical Attention for Nephropathy – Urine albumin or protein test, ACE/ARB therapy, or document evidence of nephropathy
- BP controlled (<140/90 mm Hg) * If a patient has an abnormally high Blood Pressure reading (140/90 or higher), retake the Blood Pressure and document it before they leave. If it remains 140/90 or higher take appropriate action and schedule appropriate follow up.
- Be sure to order follow up screenings if the Member's HbA1c is not controlled.



With regular screenings and wellness visits, you can help your patients catch and manage diabetes before it becomes a bigger problem. Increased body mass index (BMI) and high blood sugar puts them at a high risk of developing diabetes.

As you know, prediabetes is a health condition characterized by blood glucose levels that are higher than normal, but not high enough to be diagnosed as diabetes. Prediabetes increases the risk for type 2 diabetes, heart disease and stroke. If left untreated up to one third of people will progress to diabetes within 5 years.

As clinicians, you can help lower that risk by utilizing key methods such as:

- Screen and identify patients for prediabetes: Diabetes Risk Assessment and offering educational opportunities for patients to learn about their risk for prediabetes.
- Engage patients by starting conversations about screenings.
- Refer patients to diabetes prevention programs.
- Create feedback loops, linking the patient's progress in the diabetes prevention program back to your practice.

Patients can benefit from lifestyle change intervention.

Check out the CDC's source tools for diabetic programs at https://www.cdc.gov/diabetes/prevention/pdf/STAT_Toolkit.pdf.

WebEx ACA Coding Trainings: Earn CEU Credits

Optum, a leading information and technology-enabled health services business, offers a Documenting and Coding Chronic Conditions for Affordable Care Act Risk Adjustment class. The course can provide CEU credits for billers and coders; physicians and clinical staff may also attend.

Sessions with CEUs have been preapproved by the American Academy of Professional Coders (AAPC). In order to receive credit, attendees must be logged into the WebEx using the unique link emailed to them based on their registration information. If you're attending via telephone only, you will not be eligible for CEUs.

There is one session left, Wednesday, November 14, 2018. This session is for Participating Providers only, and there is a limit to the number of participants.



For more details and to register, visit <https://bit.ly/2KkwAvB>

Health Risk Assessments

Improving patient health is at the core of a provider's work. A Health Risk Assessment (HRA) is one way that providers can take a proactive approach toward a patient's changing health status. An HRA helps doctors' document chronic conditions and gaps in care, which can then prompt the appropriate treatment, such as inclusion in a disease management program. Not all Medicare Members require an HRA. In fact, AvMed has already identified which of your patients would benefit from completion of an HRA and provided you with a list. We encourage you to reach out to these patients and schedule an appointment as soon as possible for a thorough examination. A face-to-face visit is needed to complete an HRA; you cannot use notes from a previous appointment. To help your patients take charge of their health, talk to them about AvMed Healthyperks™. This incentives program rewards AvMed Members with gift cards for actions like



scheduling a wellness visit, getting vaccinated or undergoing a preventive screening. Refer them to [AvMed.org/Healthyperks](https://www.avmed.org/Healthyperks) to learn more about the program.



Need help with patient outreach? Providers can email Floor.Supervisor@AvMed.org for assistance with scheduling HRA appointments.

Postpartum Depression-Watch for the Signs

Continuous care is critical for a healthy pregnancy and delivery. But just as important is postpartum care: As a new mother recovers from childbirth, her body undergoes a number of changes – some of which can lead to adverse complications. HEDIS measures whether the patient has had a follow up visit with an obstetrician, gynecologist, or other health care professional within three to eight weeks after delivery.

The follow-up visit should include a postpartum pelvic exam as well as a breast examination, abdomen evaluation, and other screenings like weight and blood pressure. During this appointment, you should also look for any signs of depression in the patient. While it's normal for women to feel overwhelmed after giving birth, those feelings shouldn't last longer than a few weeks. If such feelings are persistent in a patient, then postpartum depression could be a possibility.

Some of the signs to look out for:

- Social withdrawal
- Lack of care for one's self or child
- Severe mood swings and/or anxiety
- Feelings of inadequacy

Assessing a patient's personal and family history can also help determine whether your patient is at risk



for postpartum depression (or other mental health issues). A history of depression, substance abuse, and complications during childbirth put a mother at a higher risk.

To ensure your patients take the necessary steps for postpartum care, consider the following tips:

- Send appointment reminders to new mothers
- Remind new mothers about scheduling their own wellness visits during their child's first appointment

Online Authorization Request Tool at Your Fingertips

Check out the Online Authorization Request Tool available within your provider portal at AvMed.org. This convenient tool allows you to complete Medical Prior Authorization requests online and submit supporting clinical documentation electronically. Most of it is auto-populated, making the process quick and easy to complete. You can find the "e-Auth" Tool on the Provider portal for all Physicians and Group Practices and can be accessed with three simple steps.

1 - Log on to AvMed.org

2 - Sign into the provider portal with your user name and password

3 - Select "Medical Prior Authorization Request" to submit your online request form



If you do not know your user name or password or you need any assistance, please call AvMed's Provider Services Center at **1-800-452-8633**.

WE WELCOME YOUR FEEDBACK

We are committed to having the best Provider network and encourage you to give us your feedback and suggestions. Let us know about your experiences with quality improvement studies, practice guidelines or any other AvMed practice or interaction.

We are always looking for more efficient, effective and above all, quality-driven ways to service our Providers, Practitioners and Members.

If you would like to participate more directly in our Quality Improvement Program or would like information about the program, including progress toward our goals, email us at **Providers@AvMed.org** or call the Provider Services Center at **1-800-452-8633**, Monday-Friday, 8:30 am-5 pm, excluding holidays.

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Use our centralized toll-free number to reach several key departments at AvMed.

PROVIDER SERVICES CENTER
1-800-452-8633

- AvMed Link Line, press one (1). Use this option to verify Member eligibility and limited benefit information, or confirm and request authorizations.
- Claims Service Department, press two (2). Use this option to verify status of claims payment, reviews, and appeals.
- Provider Services Center, press three (3). Use this option for questions about policies and procedures; to report or request a change in your panel status, address/phone; covering physicians; hospital privileges; tax ID and licensure; or any other service issue.
- Clinical Pharmacy Management, press four (4).

AUDIT SERVICES AND INVESTIGATIONS UNIT
1-877-286-3889

(to refer suspect issues, anonymously if preferred)

CARE MANAGEMENT
1-800-972-8633

CLINICAL COORDINATION
1-888-372-8633

(for authorizations that originate in the ER or direct admits from the doctor's office)