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Message From the Market Chief Medical Officer

Welcome to the winter edition of our provider newsletter, Connections. This edition of Connections will provide you with a host of resources to assist you in providing quality care to your patients, our members.

Flu season is upon us, and it is imperative that providers remind their patients of the importance of getting the annual flu vaccine. All members six months old and older should get a flu vaccine every year. While the flu vaccine is important for everyone, it is especially important for young children, older adults, those living with chronic conditions, people living in nursing homes or other long-term care facilities, and those who live with or care for those with a high risk for flu complications. As a reminder for our providers, AmeriHealth Caritas District of Columbia (DC) members can receive their flu shots from their primary care providers (PCPs) or from an in-network pharmacy upon presenting their photo IDs and AmeriHealth Caritas DC ID cards.

We would like to remind our providers about our I am healthy™ rewards program. Last year, we launched this program to encourage our members to see their providers for important screenings and services. Recently, we expanded this program to include an incentive for prenatal exams during the first trimester of pregnancy to encourage early and continued prenatal care for our members. If you have any questions about this program, please contact your Provider Account Executive or Provider Services at 1-888-656-2383.

Please share this information with your staff and colleagues. For more information and other resources, please visit www.amerihealthcaritasdc.com.

Thank you for the care you provide our members!

Dr. Lavdena Orr
Market Chief Medical Officer
AmeriHealth Caritas DC
Reduced Patient Screening Time Using The AmeriHealth Caritas DC Member Clinical Summary

The Member Clinical Summary (MCS) is a snapshot of a patient’s relevant clinical data and demographic information, all displayed in a single user-friendly report.

As one of your colleagues stated after using the MCS regularly, “These reports continue to help us be proactive with our care management and services. They really help us see any potential trends with clinical history. They have added value in terms of managing and having a more holistic understanding of our patients.”

What patient information is in the report?

- Demographic information (member and PCP)
- Medications that have been filled within the past six months
- Office visits within the past 12 months
- Chronic conditions
- Emergency room visits within the past six months
- Observation stays within the past six months
- Inpatient admissions within the past 12 months
- Imaging services received within the past six months
- Available lab data for tests within the past two years
- Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) and immunization services (for pediatric patients)
- Patient-specific critical screening services (based on diagnosis compared to clinical recommendations)
- Care Manager’s name and contact numbers (when applicable)
- Member restriction information if a member is “locked in” to a PCP or pharmacy

Who should use this report?

PCPs, specialists, hospitals, and ancillary providers all have access to the report.

How can I access the MCS?

- The report is available through NaviNet, our secure provider portal. Your office NaviNet Security Officer must enable access to this report for your office and then grant security access to individual users.
- Once access is granted, you can retrieve the MCS report from the Eligibility and Benefits Inquiry Details screen, or by selecting Report Inquiry → Member Clinical Summary Reports
- For complete access details, visit AmeriHealth Caritas DC NaviNet Plan Central or contact your Provider Account Executive for assistance
Diabetes Resources for AmeriHealth Caritas DC Members

AmeriHealth Caritas DC offers a variety of resources for our members — your patients — who have diabetes. Below is a list of some of the health promotion and fitness programs we offer at no cost to our members. If you would like to refer your patient to one of these programs, you may contact the Rapid Response and Outreach Team by calling 1-877-759-6224.

Providers: Share these resources with your AmeriHealth Caritas DC patients so they can self-refer into these programs.

Health promotion programs

**Diabetes Wellness Circles — SHIRE**
In collaboration with the Summit Health Institute for Research and Education Inc. (SHIRE), the Diabetes Wellness Circles program supports nutrition, fitness, and lifestyle changes for members with diabetes and hypertension. The program consists of six interactive workshops conducted over a two- to three-month period led by SHIRE health and wellness experts, who have over 60 years of combined experience combating obesity and health conditions.

**Diabetes Wellness Circles — Ward 5**
The Ward 5 Wellness Circles are a series of six workshops conducted over a three-month period in which participants learn all about diabetes, hypertension, and associated strategies for managing these chronic conditions through diet, exercise, and consistent medication adherence. The content of the workshops varies by week, but, over the three-month period, participants get significant exposure to diabetes and hypertension health education, menu planning and food preparation demonstrations, and simple standing and sitting fitness exercises that can be done anywhere.

**Culturally tailored diabetes meal plan**
In collaboration with local nutrition consulting firm N. Chapman Associates Inc., we developed a seven-day meal plan designed to address the specific needs of members who have diabetes. The dietary plan has been adapted to incorporate the food preferences of six of the most prevalent ethnic groups served by AmeriHealth Caritas DC: Salvadoran, Caribbean, Ethiopian, Chinese, Korean, and African American.

**Mom’s Meals™: Meal delivery program**
In partnership with Mom’s Meals, a family-owned business, we provide customizable, heart-healthy, and diabetic-friendly meals straight to our members’ doors. The program provides meals to members recently discharged from the hospital who are recovering from surgery or managing a chronic condition, such as kidney disease, cancer, hypertension, and diabetes. Ensuring these members receive proper nutrition helps prevent return visits to the hospital and facilitates a smoother path to recovery. Qualifying members receive three meals a day for two weeks.

**La Clinica Del Pueblo’s Road to Health Program and Club de Pacientes**
In partnership with La Clinica Del Pueblo, the Road to Health program reduces the risk of diabetes and other chronic diseases by encouraging behavior changes, while Club de Pacientes promotes disease self-management through our community health workers, also known as promotores de salud. The Road to Health is an evidence-based intervention to reduce the risk of diabetes and other chronic diseases though behavior change, with special focus on increasing exercise and eating a healthier diet. The Club de Pacientes is an evidence-based group intervention program facilitated by promotores de salud, peers of the participants that help to promote disease self-management.
Diabetes Resources for AmeriHealth Caritas DC Members (continued)

Healthy cooking classes
We host monthly healthy cooking classes (limited to 10 participants per class) at our Member Wellness Center. These classes are hosted by a licensed dietician who teaches participants how to cook a tasty diabetes-friendly meal during each two-hour session. This is a hands-on class where members learn to cook a meal from start to finish while interacting in a fun environment. Members can register for this class by calling Member Services at 1-800-408-7511.

Fitness classes

Member Wellness Center
A variety of fitness classes occur weekly at our Member Wellness Center, located at 2027 Martin Luther King Jr. Ave SE, Washington, DC 20020. Currently, we offer yoga, total body fitness, and Zumba® classes. Members can view the class schedule and register for classes on our website at www.amerihealthcaritasdc.com/member/eng/healthy-living/classes-programs.aspx or by calling Member Services at 1-800-408-7511.

Providence Hospital Wellness Institute
AmeriHealth Caritas DC partners with Providence Hospital to offer water aerobics classes on Tuesday and Thursday evenings. In addition, Providence Hospital hosts line dancing, yoga-pilates fusion, tai chi, strength and stretch, and Zumba Gold® classes. Members can call 202-408-3985 to register for these classes.
Transforming Health Care Outcomes Through Technology

Technology is a huge part of everyone’s lives, including our members’. This is why we are continually making sure that we utilize technology to ensure getting care is simple for your patients.

To further our efforts in closing members’ care gaps, we launched our text messaging program in 2016 to align with the current Healthcare Effectiveness Data and Information Set (HEDIS®) initiative. Enrollment in the text messaging program is open to all members. It’s an efficient way to remind members of preventive care and dental visits and assist them with appointment scheduling. To maximize the program’s effectiveness, we adjusted text delivery times so members receive reminders during our standard hours of operation so they can contact us with questions. In addition, we monitor the number of texts sent to be considerate of members’ time and daily responsibilities.

Signing up for our text messaging program is very simple. Members can sign up for the program by texting “iamhealthy” to 85886 and filling out a short form.

In addition, we’ve developed a mobile app to enable our members to take a more active role in their own care. This year, we updated the AmeriHealth Caritas DC mobile app. Now, with the touch of a finger, members can obtain and safely store their personal health information. Some of the new features are:

- **Contact Us**
  Allows members to send written questions directly to the Contact Center

- **My Doctors**
  Shows additional providers on the care team

- **Resources**
  Enables members to quickly access the mobile-friendly AmeriHealth Caritas DC website

Our mobile app is available for download from the Google Play Store and Apple App Store by searching AHCDC Mobile.
Now Online

Clinical policies and guidelines

AmeriHealth Caritas DC utilizes InterQual Criteria to guide medical necessity determinations. Requests that are not addressed by, or do not meet, medical necessity guidelines are referred to the Medical Director for a decision. During review, the Medical Director may also utilize clinical policies to assist with making coverage determinations for our AmeriHealth Caritas DC members.

A comprehensive list of clinical policies is available at [www.amerihealthcaritasdc.com > Providers > Resources > Clinical policies](http://www.amerihealthcaritasdc.com/Providers/Resources/Clinical_policies).

In addition, the Quality Management department adopts and implements preventive and clinical practice guidelines to help improve patient outcomes, enhance the delivery of cost-effective care, and promote consistency and delivery of evidence-based care. Guidelines are based on recommendations from professional organizations, peer-reviewed literature, and input on local practice patterns from participating providers.

A comprehensive list of clinical practice guidelines is available at [www.amerihealthcaritasdc.com > Providers > Resources > Clinical practice guidelines](http://www.amerihealthcaritasdc.com/ Providers/Resources/Clinical_practice_guidelines).

Quality Improvement

Provider race, ethnicity, and language survey

As a health plan, we intend to maintain a provider network that can meet the cultural and linguistic needs of our members. We strive to provide the most accurate and up-to-date information to our members about the races, ethnicities, and languages of our network providers. We wish to facilitate high-quality care by providing a choice of providers that includes all major racial, ethnic, and linguistic groups represented by our membership.

Please complete the voluntary survey below so that we can update our files. Your prompt reply is appreciated.

To complete the survey online, please visit [www.surveymonkey.com/r/rel-survey](http://www.surveymonkey.com/r/rel-survey).
Well Visits During Sick Visits for Children

PCPs should ensure pediatric and adolescent patients receive appropriate and timely well-child visits. We understand certain age groups are challenging to schedule for a comprehensive physical. AmeriHealth Caritas DC encourages you to leverage sick visits to perform comprehensive well-child exams, as appropriate.

Documentation guidelines

In addition to the services necessary to address the sick visit, documentation for a comprehensive well-child visit should reflect:

- Comprehensive health and developmental history (physical health, mental health, development, and nutrition)
- Unclothed physical exam with height, weight, and head circumference
- Health education or anticipatory guidance

Claims submission tips

Apply the following tips to help facilitate appropriate reimbursement for your services:

- In addition to the applicable diagnosis for the sick visit, please remember to include the appropriate well-child visit diagnosis code on your claim
- Please also remember to include the applicable Evaluation and Management (E and M) code for both the sick visit and the well-child visit. As a reminder, Modifier 25 is required when the sick visit is significant enough to necessitate a problem-oriented evaluation and management service.

Please note that corrected claims are accepted within 365 days of the original date of service.
Reporting Potential Fraud, Waste, or Abuse

Providers should be on the lookout to guard against activities that constitute fraud, waste, or abuse. Regular audits and training are important to educate your personnel on the policies and procedures that you have in place to detect and prevent fraud, waste, and abuse.

Proper education about fraud, waste, and abuse is imperative in the workplace. With proper education, employees will be equipped with the knowledge to identify fraudulent, wasteful, and abusive practices. Employees are encouraged to report suspected fraud, waste, or abuse to any of the following entities:

- AmeriHealth Caritas District of Columbia’s Fraud Tip Hotline: **1-866-833-9718**
- Washington, D.C.’s Department of Health Care Finance’s Fraud Tip Hotline: **1-877-632-2873**
- Office of Inspector General National Fraud Hotline: **1-800-HHS-TIPS**
A Provider’s Guide to CAHPS®

What is CAHPS?

The Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey is an annual patient satisfaction survey that select patients are invited to complete. CAHPS measures a patient’s satisfaction with his or her health plan, health care services, PCP, and/or specialists. Additionally, this survey assesses members’ access to care, provider communication skills, and coordination of care.

What questions relate to you as a provider?

Approximately 1,600 members will be randomly surveyed about their health care experience. The following are some of the questions your patients may be asked to assess how they perceived the quality of your health care services:

- How often did your personal doctor explain things in a way that was easy to understand?
- How often did your personal doctor listen carefully to you?
- How often did your personal doctor show respect for what you had to say?
- How often did your personal doctor spend enough time with you?
- How often did you get an appointment to see a specialist as soon as you needed?

What can you do to improve patient satisfaction?

You can improve patient satisfaction by doing the following:

- Improve communication with your patients: listen carefully to each patient, explain using simple and easy-to-understand terminology, ask for feedback, and always treat them with respect
- Increase accessibility by creating availability for urgent care issues
- Make use of our translation services for patients with limited English proficiency
- Encourage patients to bring a list of health-related questions to their appointments
- Use online resources found on the Centers for Medicare & Medicaid Services (CMS) and the Agency for Healthcare Research and Quality websites to find new methods to better serve patients on your panel
- Engage all staff members to work as a team to provide quality primary and specialty care to your patients
- Provide timely results for all tests or procedures to your patients
- Remind patients to keep and bring a list of all medicines they take to all of their appointments
- Make sure your patients understand what will happen prior to, during, and after surgery
- Encourage members to make all necessary follow-up appointments from your prescribed treatment plan while they are in the office
- Encourage our members to contact Medicaid Member Services at 202-408-4720 or Alliance Member Services at 202-842-2810 for health plan-related questions and resources

For more information on this topic, visit www.ahrq.gov/patients-consumers/care-planning/errors/5steps/index.html.
Pharmacy Corner

Formulary updates

The following prenatal vitamins have been added to the formulary:

- Once-a-day prenatal vitamin (GCN 28788)
- Women’s prenatal vitamin with docosahexaenoic acid (DHA) (GCN 27708)
- One-A-Day® women’s prenatal 1 vitamin with DHA softgel (GCN 37753)
- Prenatal chewable gummy vitamin (GCN 34658)
- Prenatal vitamin and DHA combination pack (GCN 33762)
- Prenatal multivitamin with DHA (GCN 32632, 31522)
- CadeauDHA® softgel (GCN 37156)
- Obstetrix DHA Combo Pak (GCN 14711)

Care4U — Meds Made Easy pharmacy medication adherence program now available for AmeriHealth Caritas DC members

AmeriHealth Caritas District of Columbia is pleased to announce the launch of the Care4U — Meds Made Easy program. This program is designed to help improve patient medication adherence by offering an array of services to benefit your patients, our members, at no cost to you or to members. These services include the following:

- Medication synchronization: All the patient’s medications are refilled on the same day each month to help ensure that they don’t run out of their medications
- Text message reminders
- Medication packaging: Personalized medication packaging in easy-to-use blister packs to help your patients know the right medications to use at the right time
- Health education regarding medications and disease management
- Door-to-door medication delivery

If you have a patient whom you think would benefit from this free program, 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.

New mail service pharmacy benefit

Members can receive their medications via mail service with convenient delivery of a three-month supply of maintenance, or long-term, medications for chronic conditions through Walgreens Mail Service Pharmacy. Providers and members can call Walgreens Customer Care Center at 1-800-345-1985 (24 hours a day, 7 days a week) or visit the Walgreens website at www.walgreens.com/mailservice for more information.
Did You Know?

We expanded our I Am Healthy™ rewards program to include our pregnant members. Pregnant members who receive their first prenatal exam during their first trimester of pregnancy can now receive a $25 gift card from one of four retailers. It’s as simple as faxing a short form to us following your patient’s appointment.

Rewards are also available for the following services:

- Annual physical for ages 12 – 21
- HbA1C and nephropathy tests for members with diabetes
- Retinal eye exam for members with diabetes
- Postpartum exam 21 – 56 days following delivery

To learn more about the I Am Healthy™ rewards program, visit our website at www.amerihealthcaritasdc.com/giftcard.
Update To Our Current Referral Policy

In our effort to reduce the administrative burden for our providers, we are pleased to announce that beginning January 1, 2017, an official plan-issued paper or electronic referral will no longer be required for members to access specialty care providers and services.

Claims payments will no longer be tied to the presence of a referral; however, when submitting a claim for payment, the referring provider’s information must be included in the appropriate boxes of the CMS 1500 form as required by CMS.

Note: There is no change to the prior authorization process or the services that require prior authorization.

Although specialty provider services will not require a referral form, AmeriHealth Caritas DC expects that primary care and specialty care providers will continue to follow and engage in a coordination of care process, in accordance with applicable laws and standards of care, that includes communication and sharing of information regarding findings and proposed treatments.

Role of the PCP:

The PCP is still responsible for “referring” a member to a specialist; what is changing is the process by which that referral occurs.

How to refer a member to a participating AmeriHealth Caritas DC specialist:

The PCP may write a prescription, call, send a letter, or fax to request the specialist for the member. The referral to the specialist must be documented in the member’s medical record. The referring provider should communicate all appropriate clinical information directly to the specialist without involving the member. Provide the following information:

- Member name and ID number
- Reason for referral
- Duration of care to be provided
- All relevant medical information
- Referring provider’s name and AmeriHealth Caritas DC ID number

Role of the specialist:

- Contact the PCP if the member presents at the office and there has been no communication or indication of the reason for the visit from the PCP
- Provide the services indicated by the PCP
- Communicate, in accordance with applicable laws and standards of care, findings, test results, and treatment plan to the member’s PCP. The PCP and specialist should jointly determine how care should proceed, including when the member should return to the PCP’s care.
- While you should notify the PCP if the member needs to be referred to another specialist for consultation or treatment, you are responsible for making that referral

We hope this change is a positive one for your practice and that you find it easier to provide quality health care services to our members. Please contact your Provider Account Executive or the Provider Services Department at 202-408-2237 or 1-888-656-2383 with any questions or concerns.
Important Reminders

Care coaches at the Member Wellness Center
Care management is a voluntary program where members receive a personal “care coach” (formally called a Care Manager) to help them manage their health. Now it’s even easier for members to get personalized care from a care coach. Care coaches are available for walk-in or scheduled appointments on Monday through Friday at the Member Wellness Center, located at 2027 Martin Luther King Jr. Avenue SE, Washington, DC 20020. If any of your patients could benefit from the AmeriHealth Caritas DC Care Management program, you may refer them by using the Let Us Know form on our website.

Let Us Know program
AmeriHealth Caritas DC wants to partner with you, our provider community, in managing our members with chronic illnesses or behavioral health needs. Please call our Rapid Response and Outreach Team at 1-877-759-6224 from 8 a.m. to 5:30 p.m. to let us know about members’ needs. You can also fax the Let Us Know form from our website to 1-888-607-6405.

Telepsych services
Telepsych behavioral health care services are available to AmeriHealth Caritas DC Medicaid members. As part of a partnership with Breakthrough, AmeriHealth Caritas DC Medicaid members have access to timely and private interaction with behavioral health care providers via web-based video counseling technology. Members may visit www.breakthrough.com/amerihealthcaritasdc or call 202-408-4720 or toll free at 1-800-408-7511 to learn more about this service.

HIV/AIDS medications
Effective April 30, 2016, all District of Columbia Medicaid members, including those who are enrolled in any of the District’s managed care plans, may obtain their HIV antiretroviral medications from any District of Columbia Medicaid fee-for-service (FFS) pharmacy provider. This change will greatly expand access to HIV antiretroviral medications for our members.

OB authorization reminder
AmeriHealth Caritas DC maternity care providers must submit a complete and accurate OB Authorization and Initial Assessment Form to the health plan within seven business days of an initial office visit with a pregnant member. The information provided on the form enables your practice and the health plan to identify medical and psychosocial risks so necessary interventions may occur as early as possible. The form is available on our website at www.amerihealthcaritasdc.com > Providers > Forms.

Transportation is available for Medicaid members
Medical Transportation Management Inc. (MTM) provides non-emergency medical transportation (NEMT) services to eligible AmeriHealth Caritas DC Medicaid members. For transportation scheduling 24 hours a day, seven days a week, members and providers may call 1-800-315-3485.

Balance billing is prohibited
As a reminder, under the requirements of both District and federal Medicaid law, all payments from AmeriHealth Caritas DC to participating providers must be accepted as payment-in-full for covered services rendered. This means participating AmeriHealth Caritas DC providers are prohibited from directly billing members for medically necessary covered services under any circumstances.
Important Reminders (continued)

Utilization Management (UM) criteria
Physicians and nurses at AmeriHealth Caritas DC use clinical criteria to make coverage decisions based on medical necessity. The criteria utilized for UM determinations are available upon request to all AmeriHealth Caritas DC providers. To request this information, call the Medical Management Department at 202-408-4823; press ‘1’ for Medicaid or ‘2’ for Alliance, then press ‘2’ for Authorization, then press ‘6’ to speak with a member of Utilization Management staff.

Language access services
AmeriHealth Caritas DC provides free language services for our members who do not speak and/or understand English. These services include:

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

Language access is a member right, and providers have a responsibility to ensure an interpreter is present or on the phone when needed. If you encounter a member who needs language assistance or wants to file a complaint about language access services, contact Member Services. For Medicaid members, call 202-408-4720 or 1-800-408-7511. For Alliance members, call 202-842-2810 or 1-866-842-2810.

Sign up for electronic funds transfer (EFT)

Providers can sign up for electronic funds transfer by visiting www.amerihealthcaritasdc.com > Providers > Forms > EFT enrollment form.
Sign Up for Network News

Remember to sign up for our free subscription email service, Network News! This service is used to share health plan and industry information on topics of importance to you, including billing updates, district and federal regulations, emerging technologies, and more!

Signing up is easy; simply complete the online form at www.amerihealthcaritasdc.com > Providers > Sign up for email alerts.

Subscribe today to start receiving electronic updates from AmeriHealth Caritas DC!