

PROVIDER

Newsletter

CLINICAL PRACTICE GUIDELINES

WellCare of Georgia's clinical practice guidelines (CPGs) are available to physicians to provide preventive care practices to improve the health status of WellCare members. Key elements of these guidelines include issues such as clinical signs, risk factors, lifestyle modifications, pharmacologic treatment, lab values, monitoring issues, patient education and treatment goals with references. These Clinical Practice Guidelines are available at <http://georgia.wellcare.com/provider/pem> or by contacting your Provider Relations representative.

Member education tools are also available for provider use to assist members with issues regarding definition of their disease, causes, symptoms, diagnosis, treatment and expectations. These are developed collaterally specific to provider guidelines.

WellCare's CPGs and member materials are researched, developed, reviewed and updated as needed at least annually and more often if appropriate. Sources for review include reliable clinical evidence, studies from nationally recognized agencies, and recommendations from medical specialty societies. These guidelines are presented to our corporate Quality Improvement Leadership Team, which includes the WellCare Medical Directors. They are then presented to our Utilization Management Committee (UMC), which provides feedback, and to the Georgia Quality Improvement Committee for review and approval.

CDC GUIDELINES

The 2009 Recommended Immunization Schedule for persons ages 0 through 18 years old and Recommended Adult Immunization Schedule can be viewed by accessing the CDC Web site at www.cdc.gov/vaccines/recs/schedules, on the georgia.wellcare.com portal or by contacting your Provider Relations representative.

PROVIDER MATERIALS UPDATE

The following correspondence was placed on Banner Messages or faxed to providers since our last newsletter and can be found at georgia.wellcare.com. Click on the *Provider* tab, and *Messages from WellCare* is located in the right column.

Remember to check the messages regularly to receive new and updated information on such subjects as:

- Blood lead level testing
- Billing vaccine codes
- Helping members schedule important preventive care
- Important change to Medicaid PDL
- Check member eligibility in real time
- Billing guidelines: Federally Qualified Health Center Services (FQHC)/Rural Health Clinic (RHC)
- Important recertification reminder
- Claims payment updates
- Update to coordination of benefits/third-party liability process
- Revised universal prenatal notification form
- Q&As related to HCA network change

WEB RESOURCES

WellCare preventive and clinical practice guidelines, Early and Periodic Screening, Diagnostic and Treatment (EPSDT) documents, pharmacy guidelines, Cultural Competency Plan and other helpful resources are available at georgia.wellcare.com. A summary of the Cultural Competency Plan is available in Section 14 of the Provider Handbook. If you would like to receive a copy of the complete Cultural Competency Plan, please contact your Provider Relations representative.

For additional information, please contact the Provider Hotline at 1-866-231-1821 for Medicaid or 1-866-334-7730 for Medicare.

PROVIDER FORMULARY UPDATE

GENERIC NEWS:

The generic drugs listed below are now available to WellCare of Georgia's Medicaid and Medicare members at the lowest co-payment (if applicable):

BRAND NAME	GENERIC NAME	THERAPEUTIC CLASS
Cellcept® Capsules*	Mycophenolate Mofetil Capsules (Medicare only requires a Prior Authorization)	Immunosuppressant Agent
Cytomel® Tablets*	Liothyronine Tablets	Thyroid Agent
Topamax® Sprinkle Capsules*	Topiramate Sprinkle Capsules	Anticonvulsant Agent
Topamax® Tablets*	Topiramate Tablets	Anticonvulsant Agent
Zerit® 1mg/mL Oral Solution*	Stavudine 1mg/mL Oral Solution	Antiviral Agent

*These brand-name drugs have been removed from WellCare of Georgia's Medicaid Preferred Drug List.

The following changes have been made to WellCare of Georgia's **Medicaid Preferred Drug List**:

ADDITIONS	REMOVALS
• Ammonium Lactate 12% Cream & Lotion (OTC and RX)	• Desferal® 500mg & 2gm Vials
• Deferoxamine Mesylate 500mg & 2gm Vials	• Fosamax Plus D™ 70mg/5,600IU, 70mg/2,800IU Tablets
• Diclofenac Sodium 100mg Tablet SA	• Lescol® XL 80mg Tablets
• Norpace® CR 150mg Capsules	• Viracept® 50mg/gm Powder
• Oralyte Solution (all flavors)	• The limit of 3 Rx's per 365 days for members > 21 years of age on Benzodiazepines has been removed
• RE Pramoxine-HC Otic Drops	
• RE-Nata 29 Prenatal Tablets	

The following additions have been made to WellCare's **Medicare Formulary**:

ADDITIONS
• Afinitor® Tablets (with a Prior Authorization)
• Degarelix 80mg (with a Prior Authorization and Quantity Limit of 1/28 days)
• Degarelix 2 x 120mg (with a Prior Authorization and Quantity Limit of 2/180 days)
• Eliphos™ Tablets
• Ipratropium-Albuterol 0.5-3mg/3mL Nebulizer Solution (with a Prior Authorization)
• Ketoprofen ER Capsules (with a Quantity Limit of 31/31 days)
• Levemir® 100 units/mL Vial (with a Quantity Limit of 60mL/31 days)
• Levemir Flexpen® 100 units/mL (with a Quantity Limit of 60mL/31 days)
• Norpace® CR 150mg Capsules
• Tekturna® Tablets (with a Step Edit)
• Tekturna HCT® Tablets (with a Step Edit)
• Vimpat® Tablets (with a Prior Authorization)

We have changed the quantity limits per month for the following medications on WellCare of Georgia's **Medicaid Preferred Drug List** and WellCare's **Medicare Formulary**:

MEDICAID
• Micardis® HCT 40/12.5, 80/12.5, 80/25 Tablets QL has been decreased from 62/31 days to 31/31 days
• Ondansetron 24mg Tablet QL has been increased from 1/31 days to 2/31 days
• Zolpidem 5mg and 10mg Tablets QL has been increased from 14/31 days to 31/31 days
MEDICARE
• Zyvox® Tablets QL has been increased to 56/28 days

PROMOTE CANCER AWARENESS

WellCare asks providers to encourage women to get all their preventive health exams completed by December 31 if they have not already done so this year.

According to the Centers for Disease Control and Prevention (CDC), many deaths from breast and cervical cancer could be avoided by increasing cancer screening rates among women. Deaths from these diseases occur disproportionately among women who rely on public health programs like Medicaid or are uninsured, the CDC reports.

WellCare covers all regular preventive tests and screenings for women without requiring referral or prior approval. Help us ensure that our members stay healthy by recommending appropriate preventive tests and screening.

Please continue to encourage women to obtain an annual mammography for breast cancer screening and a Pap smear for cervical cancer screening. Women should also have an annual chlamydia screening test if they are sexually active and between the ages of 16 and 25.



CHECK MEMBER ELIGIBILITY NOW IN REAL TIME!

WellCare Health Plan (the Plan) has partnered with Availity, LLC, a premier health information network, to offer real-time HIPAA 270 Eligibility Request and 271 Payer Response transactions to providers. This service improves data interchange, provides an innovative solution to provider requests and will be leveraged to implement other HIPAA-compliant transactions in the future.

Benefits and Advantages:

- **Free** for providers to use
- Participation is **optional**
- **“One-stop shopping”**—view eligibility information for all participating health insurance companies from one Availity Web site with a single log-in
- Reduces the need to call Customer Service to check eligibility

You now have the option to access the Eligibility and Benefit Inquiry transactions via the Availity secure transaction interchange. You are able to check member eligibility information for all Plan lines of business.

To gain access to the Availity real-time eligibility transactions, you need to register on the Availity Web site at

www.availity.com and follow these simple steps:

1. Click *Eligibility and Benefits | Eligibility and Benefits Inquiry* in the Availity menu.
2. Select the applicable WellCare plan name in the Payer field.

Availity offers free online training webinars for several topics, including eligibility and benefits transactions. To register for one of these webinars, visit the Availity Web site and navigate to the *Demo* tab.

If you have any questions, please call Provider Services at **1-866-231-1821** for Medicaid or **1-866-334-7730** for Medicare. You may also call Availity at **1-800-AVAILITY (1-800-282-4548)**.

Availity.com is a resource, but should not be used in place of the Georgia Health Partnership (GHP) Web site (www.ghp.georgia.gov/wps/portal) for patient eligibility information. The Georgia Department of Community Health (DCH) requires Care Management Organizations to accept the GHP eligibility Web portal screen shot as proof of eligibility. For provider verifications under the 72-hour rule, the DCH GHP portal is the only source that may be used.

TESTMINDER HELPS PATIENTS COMPLY WITH STANDING ORDERS

E-MAILS PATIENTS WHEN THEIR NEXT TEST IS DUE

The TestMinder e-mail reminder program, offered exclusively by Quest Diagnostics, is designed to work with the standing orders that providers prescribe for testing. TestMinder prompts patients to schedule their lab appointments by sending them timely e-mails each time they are due for a lab test.

TestMinder can help manage patients with chronic illnesses or on a particular drug regimen and can save office staff time and effort.

AUTOMATIC ENROLLMENT

When your patient brings a standing order to the Quest Diagnostics Patient Service Center (PSC), the phlebotomist will record the standing order along with the patient's e-mail address. This will automatically enroll the patient in the program.

If you prefer to enroll your patient, you can do so by entering the patient's e-mail address in the Care360™ Physician Portal.

TestMinder does not disclose any personal information such as the test being performed or the name of the physician. There is no charge to you or your patient for this service.

CONVENIENT APPOINTMENT SCHEDULING

Your patient will receive an e-mail reminder from Quest Diagnostics seven days before their next standing order. The e-mail will have a link to the online Quest Diagnostics PSC appointment scheduler so an appointment can be easily scheduled. Each e-mail reminder will include a "Find a Patient Service Center" link so the patient can find the center closest to where he or she works or lives.

BRINGING VALUE TO YOUR PRACTICE

TestMinder can be a valuable tool for your practice. It can help you:

- **Improve patient management:** Patients will be more inclined to follow through on standing-order lab testing, helping to improve patient outcomes.
- **Increase patient convenience:** E-mail reminders with helpful links to online appointment scheduling are an easy way for patients to make appointments.
- **Reduce administrative time:** Your staff can spend less time calling patients to remind them to schedule lab tests.
- **Increase HEDIS scores:** Improved patient care can also help increase HEDIS scores and grow your practice.

Talk to your Quest Diagnostics account executive for more information about TestMinder.

WELLCARE CLAIMS INFORMATION

From time to time, WellCare Health Plans, Inc. (the Plan) reviews its reimbursement policies to maintain close alignment with industry standards and coding updates released by health care industry sources like the Centers for Medicare and Medicaid Services (CMS) and nationally recognized health and medical societies.

Please note that the Plan publishes periodic reimbursement policy updates. To obtain a copy of our current policies,

please visit the Provider Resources area of our Web site at georgia.wellcare.com for Medicaid or www.wellcare.com for Medicare, and select the *Claims Updates* link.

Thank you for your participation with WellCare. We appreciate the high quality of care you provide to our members.

HELP PREVENT THE SPREAD OF THE FLU

Influenza season is here, and we encourage providers to help make sure that all members get a flu vaccination.

Vaccination is the first and most important step in protecting against influenza. It is recommended that the following groups get vaccinated each year:

- Children ages 6 months up to their 19th birthday
- Pregnant women
- People 50 years of age and older
- People of any age with certain chronic medical conditions
- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including:
 - Health care workers
 - Household contacts of persons at high risk for complications from the flu
 - Household contacts and out-of-home caregivers of children younger than 6 months of age (these children are too young to be vaccinated)

Providers who administer the flu vaccine in their offices will be reimbursed for administration based on their contractual agreement with the Plan, medical group and/or IPA.



Note that your WellCare patients can receive a **free** flu vaccination at any Walgreens Pharmacy or Maxim clinic location. All they have to do is present their WellCare ID card. Direct your patients to call **1-866-WHI-FLU1** to find a Walgreens Pharmacy or **1-877-962-9358** to find a Maxim clinic location near them.

Source: Centers for Disease Control and Prevention

2009 PATIENT SAFETY SURVEY RESULTS

Nearly 200,000 Americans die each year because of preventable errors in hospitals¹. Reducing medical errors would not only improve patient care but also provide significant cost savings to help make expanded access to health coverage possible.

WellCare is committed to supporting providers in achieving the highest level of patient safety. In order to assess our providers' patient safety activities, a Web-based Patient Safety Audit was conducted to evaluate the patient safety plans for 144 WellCare of Georgia hospitals.

Areas assessed ranged from electronic medical records to how patient safety decisions are made. WellCare found the following areas scored below goal and were identified as opportunities for improvement:

- Electronic medical records
- Automated order entry
 - Medications
 - Treatment
 - Testing

- Integration of information technology
- A system of classifying adverse events according to severity

A strong network of providers is vital to WellCare's continuing success in patient safety initiatives. In addition, more automation within the health care delivery system is needed. One of WellCare's quality improvement objectives is to electronically educate providers on how to enhance their information systems technology to support patient safety objectives.

We would like to thank those of you who took the time to participate in the survey.

¹*Scientific American; Harmon, Katherine; Deaths from avoidable medical error more than double in past decade, investigation shows; <http://www.scientificamerican.com/blog/60-second-science/post.cfm?id=deaths-from-avoidable-medical-error-2009-08-10>*

TAKE POSITIVE ACTION IN MANAGING MEDICATIONS

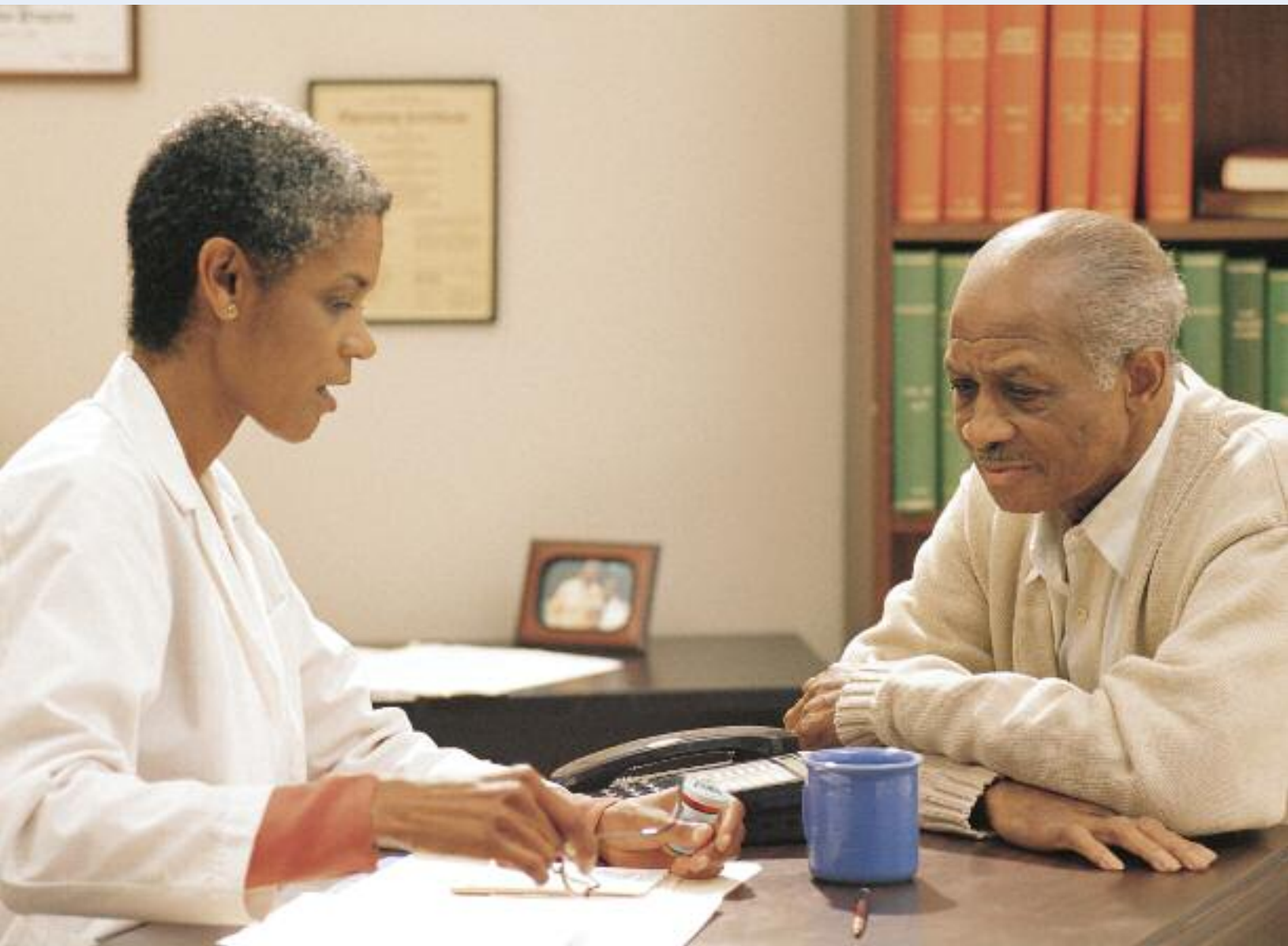
SIMPLE INTERVENTIONS PROMOTE PROPER DRUG USE, PATIENT SAFETY

WellCare encourages providers to make sure your patients are using the medications they need in the proper manner. Some proactive steps in this area can drive beneficial outcomes for all patients.

Providers can almost instantaneously improve their patients' health care status by systematically re-assessing the indications for and dosages of **all** the medications, (including herbal, over-the-counter and topical preparations) used by their patients. It's also the perfect time to uncover the use of illicit drugs and the consumption of inappropriate amounts of alcoholic beverages.

For patients on a daily medication regimen, the use of a pill box (or two if a person's on an AM-PM dosing schedule) will really help with compliance. Encouraging the use of this user-friendly tool keeps your patients on track.

Do your patients keep an up-to-date list of **all** their medications in their wallet or purse? Does the list also include their known allergies? Please encourage them to do so. When a patient goes to an emergency room or sees a specialist, a list of their current medications can keep their care on point, highlighting the need to treat the complete patient and potentially avoiding harmful drug-drug interactions.



HELP MEMBERS SCHEDULE IMPORTANT PREVENTIVE CARE

On July 20, 2009, WellCare began partnering with Care Management International (CMI) to help members schedule and receive important preventive care.

Providers can expect to receive either a phone call or a fax from CMI asking for your assistance in scheduling appointments for certain members.

WHAT YOU NEED TO DO

When you are contacted by CMI, please help your patient set up an appointment to receive the needed tests and/or screenings. If you receive a fax form, please reach out to the member(s) according to the contact information provided.

CMI follows up four weeks after their initial contact to determine if the member has been seen or if they have a scheduled appointment.

Please contact your local Provider Relations representative with any questions.



CHILD PREVENTIVE HEALTH GUIDELINES

The 2008 Recommendations for Preventive Pediatric Health Care (Periodicity Schedule), along with the Guidelines for Health Supervision of Infants, Children and Adolescents can be viewed by accessing the Bright Futures/AAP Web site at http://brightfutures.aap.org/3rd_Edition_Guidelines_and_Pocket_Guide.html, on the georgia.wellcare.com portal (under links & numbers) or by contacting your Provider Relations representative.

The Bright Futures guidelines can help you be prepared for visits with parents and children. The Guidelines for Health Supervision of Infants, Children and Adolescents provides information such as:

- Periodicity schedule
- Rationale and evidence
- Introduction to visits
- Infancy visits
- Early childhood visits
- Middle childhood visits
- Adolescent visits
- Growth charts
- Promoting safety and injury prevention
- Promoting oral health
- Promoting health nutrition
- Promoting physical activity
- Promoting family support
- Promoting child development
- Promoting mental health
- Promoting healthy weight
- Promoting healthy sexual development
- Promoting community relationships and resources

SUBMIT AUTHORIZATION REQUESTS ONLINE

WellCare encourages you to submit inpatient and outpatient authorization requests via our secure Web site, georgia.wellcare.com for Medicaid or www.wellcare.com for Medicare. Registered Web users have immediate access to pertinent information regarding authorizations, claims and more.

Once you have logged in, you may access the Authorizations tool in one of two ways:

1. On the *Providers* main page, you can select the *Submit Authorization* link under the *Authorizations* heading, or
2. You may select the *Authorizations* tab along the top of the page. From there, select the *Authorization Request* link.

Simply enter the necessary information requested to complete the transaction. The tool also allows you to attach clinicals, or you can type in any relevant clinical information supporting the request.

Please note that Authorization/Certification determinations are made based on medical necessity and appropriateness and reflect the application of the Plan's approved review criteria guidelines. Once you complete each authorization request, you will get an instant acknowledgement of receipt of your request in your Web inbox. You can also download or print a summary report for your records.

Conducting transactions online provides useful information on demand while saving you time. Please contact your local Provider Relations representative if you have any questions.

Note: All Medicare expedited requests should be submitted via fax or phone in order to be addressed appropriately.

ADVANCE DIRECTIVES ARE AN IMPORTANT PART OF THE CARE EQUATION

Have you talked to your patients about Advance Directives? Did you know this is a requirement from the Department of Community Health (DCH) for which compliance is assessed in the medical record review? Did you know that it is also a requirement in the Code of Federal Regulations?

The Medical Record Review tool states, "All members aged 20 years or older will have an advanced directive in the medical record or there will be evidence that the member was educated on advanced directives and given the opportunity to accept or decline." This is in accordance with guidelines from DCH and Federal Laws/Regulations located in 42 CFR 438.6 (i) (1)-(2) and 42 CFR 422.128.

The state of Georgia has two different methods for patients to document their medical decision wishes made on their behalf:

1. A living will
2. Durable power of attorney for health care

Only one of the documents is required to communicate the member's medical treatment preferences in situations where they are unable to communicate this information on their own. The documentation you or your staff need in the medical record is that the member either agreed to create advance directives, declined to create one or stated that they have advance directives already in place.

There are several Web sites where the documents are explained and can be downloaded for use. The Department of Human Resources Web site on advance directives is at <http://aging.dhr.georgia.gov/portal/site/DHR-DAS/>.

Please talk with your patients about this important decision. Explain to them the benefits of deciding now how they want to be treated should they ever become incapacitated and document their choices in the medical record.

ADVANTAGES OF ELECTRONIC FUNDS TRANSFER

WellCare encourages participating providers to take advantage of electronic funds transfer (EFT) in receiving payment for claims.

Five reasons to sign up today for EFT:

- No interrupting your busy schedule to deposit a check
- No waiting in line at the bank
- No lost, stolen or stale-dated checks
- **You** control your banking information
- Immediate availability of funds—**No bank holds!**

Set-up is easy and takes about five minutes to complete. Please call your Provider Relations representative or the Provider Hotline at **1-866-231-1821** for Medicaid or **1-866-334-7730** for Medicare with any questions.

EFT is set up only to transfer funds into your account, never out.

CHECK THE STATUS OF A CLAIM ONLINE

WellCare encourages you to check the status of your claims online via our secure Web site, georgia.wellcare.com for Medicaid or www.wellcare.com for Medicare. As a registered user, you have immediate access to all pertinent information regarding your submitted claims. This valuable online feature provides useful information on demand while saving you time.

Simply follow the steps below. If you have any questions, please contact your Provider Relations representative.

Step 1

For the **Find by** menu, filter your search criteria by **Provider ID**, **Member ID** or **Claim Number**.

Step 2

In the **Member | Provider ID | Claim Number** box (depending on the option chosen in Step 1), enter the appropriate number.

Please note that you can click **Lookup Provider** or **Lookup Member** if you do not know the ID number.

Step 3

For **Service Date**:

Select one of the following date ranges from the **Within** drop-down box:

- Last day,
- Last 2 days,
- Last week,
- Last 2 weeks, or
- Last month

OR

Enter any 30-day date range with the **From** option.

Step 4

Click the **Check Claim Status** button. The claim results are displayed at the bottom of the screen.

Please note that, in addition to checking claims status, you can submit a new claim or resubmit a corrected claim via the Web. Simply select the appropriate link under **Claims**.

The screenshot shows a web interface titled "Claims" with a help icon. Under "Check Claims Status", there are several fields and options:

- *Required**
- *Find by:** A dropdown menu currently set to "Provider ID".
- Provider ID:** A text input field with a "Lookup Provider" link below it.
- *Service Date:** Radio buttons for "Within:" (selected) and "From:".
- Within:** A dropdown menu currently set to "Last day".
- Check Claim Status** button: A green button with white text.
- At the bottom, there are two links: "Submit New Claim" and "Resubmit Corrected Claim".



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DORAL DENTAL CHANGING NAME TO DENTAQUEST

Doral Dental works with WellCare to make sure members can get the dental care they need.

On December 1, 2009, Doral Dental is changing its name to DentaQuest.

DENTAQUEST'S ADDRESS WILL REMAIN THE SAME:

12121 North Corporate Parkway
Mequon, WI 53092

ALL PHONE NUMBERS WILL REMAIN THE SAME.

Members with questions or who need help finding a dentist may call:

1-800-516-9615

The Web site has changed to www.DentaQuest.com.

Members may use their existing identification card to see their dentist.

