



New York

Provider Newsletter



2018 • Issue II

Quality

Access to CM

How Care Management Can Help You

Care Management helps members with special needs. It pairs a member with a Care manager.

The Care manager is a Registered Nurse (RN) or Licensed Clinical Social Worker (LCSW) who can help the member with issues such as:

- Complex medical needs
- Solid organ and tissue transplants
- Children with special healthcare needs
- Lead poisoning

We're here to help you! For more information about Care Management, or to refer a member to the program, please call us at 1-866-635-7045. This no-cost program gives access to an RN or LCSW Monday–Friday from 8 a.m. to 8 p.m.

In This Issue

Quality

Access to CM.....	1
Immunizations And Well-Child Checkups	2
Encourage Screening for Chlamydia	2
Healthy Rewards Member Incentive Program.....	2
Disease Management – Improving Members Health!.....	3
Medication Adherence and RxEffect™	4
New York Medicaid Requirements.....	4
Advance Directive Discussions	5

Operational

Updated Clinical Practice Guidelines	6
Electronic Funds Transfer (EFT) through PaySpan®	6
Updating Provider Directory Information.....	7
Provider Formulary Updates.....	7

Join the Conversation on Social Media

Join our digital and social communities for up-to-date information on how we're working with you and others to help our members live better, healthier lives.



Immunizations And Well-Child Checkups

Providers play a key role in establishing and maintaining a practicewide commitment to communicating effectively about vaccines and maintaining high vaccination rates – from providing educational materials, to making themselves available to answer questions.

Parents who are confused or have misperceptions about disease risk and safety may delay or refuse immunizations for their children. A successful discussion about vaccines involves a two-way conversation with both parties sharing information and asking questions. These communication principles can help you connect with patients and their caretakers by encouraging open, honest and productive dialogue.

Help educate parents on how to prevent the spread of disease. Remind parents of the value of comprehensive well-child checkups and staying on schedule with immunizations. Remember, you may complete a comprehensive well-child checkup during a sick child visit or sports physical if the member is due for a checkup.



CommUnity Assistance Line

CAL NUMBER VIDEO RELAY
1-866-775-2192 1-855-628-7552

We offer non-benefit resources such as help with food, rent and utilities.



Healthy Rewards Member Incentive Program

The Healthy Rewards Member Incentive Program rewards members when they complete certain healthy activities. Members can choose their reward from a selection of Gift cards or a prepaid Visa® card. For details on eligible activities and reward amounts ask your WellCare representative or call one of the Provider Service phone numbers at the end of this newsletter.

**Encourage your patients
to take part in this program.**

A member may ask you to fill out a short activity reports. Also, it's important to submit correct claims so member activities can be verified. Missing and incorrect claims lead to member abrasion, which can lead to low CAHPS scores. We appreciate your partnership in helping members get rewarded for getting the care they need!



Encourage Screening for Chlamydia

Chlamydia trachomatis (Chlamydia) is one of the most common sexually transmitted bacterial infections in the U.S. and causes numerous health problems in men and women.

Most women infected with Chlamydia have no symptoms of the disease, thereby minimizing the chances they will seek care. Because of the negative impact Chlamydia can have on members' health, it is imperative that the member obtains a Chlamydia test as recommended.

To help protect and improve members' health, WellCare encourages and recommends PCPs to screen annually for Chlamydia in all female members 16-24 years of age who indicate they are sexually active.



Disease Management – Improving Members Health!

Disease Management is a free, voluntary program that helps members with specific chronic conditions.



Members are assigned a Disease Nurse Manager who can help the member with:

- Education and understanding of their specific condition
- Identification of adherence barriers and ways to overcome them
- Individualized life modifications suggestions to improve daily life
- Self-management of their condition to improve their health outcomes
- Motivational coaching for encouragement with the struggles along the way
- Improved communication with their Primary Care Provider and healthcare team

Disease Management can assist your members with the following conditions:

- Asthma
- Diabetes
- Obesity
- Congestive Heart Failure (CHF)
- Hypertension
- Smoking
- Coronary Artery Disease (CAD)
- Heart disease

For more information, or to refer a member to Disease Management, please call us at 1-877-393-3090, (TTY 711) Monday–Friday, 8 a.m. to 5 p.m.



Medication Adherence and RxEffect™

To help with medication adherence, WellCare engages our members with refill reminder phone calls, off-therapy (missed dose) phone calls and letters as well as utilizing our network pharmacies to help counsel our members. However, there is nothing as powerful as a reminder from the member's primary care provider about the importance of medication adherence.

RxEffect™ is an online platform available to WellCare Medicare provider groups to help improve members' medication use.

Talk to your WellCare associate today to get users from your office access to the RxEffect™ portal.

This web portal:

- ✓ Is sponsored by WellCare – so there is no cost to our provider partners
- ✓ Uses predictive modeling to target the patients who need it most
- ✓ Uses real-time monitoring of pharmacy claims and is updated daily
- ✓ Includes opportunity flags for 30-day conversions, diabetic patients not on statins, Appointment Agendas and high-risk medications

New York Medicaid Requirements

Appointment Availability	Standards	Appointment Availability	Standards
PCP - Urgent	<24 hours	PED - Office Visit - Newborn	<2 weeks
PCP - Sick	<48-72 hours	OBGYN 1 st Trimester	<3 weeks
PCP - Routine/Well Care	<4 weeks	OBGYN 2 nd Trimester	<2 weeks
PCP - Routine Physical Exams	<12 weeks	OBGYN 3 rd Trimester	< 1 week
PED - Urgent	<24 hours	Specialist	<4-6 weeks
PED - Sick	<48-72 hours	Wait Times - Scheduled	<1 hour
PED - Routine/Well Care	<4 weeks		
Behavioral Health			
Non-Life Threatening Emergency	Within 6 hours		
Urgent Care	Within 48 hours		
Routine Office Visit	Within 10 business days		
Wait Times - Scheduled	<1 hour		
After hours (24 hours/7 days a week)	Answering service or system that will page physician		
	Advice Nurse with access to physician		
	Answering system with option to page physician		
	Answering service that will page the provider after a message is left		
	Answering service or system that provides number to access physician		



Advance Directive Discussions

We are reaching out to you, our partners in care, to encourage you to talk with members about advance care planning during scheduled healthcare visits.

WellCare understands that this is not an easy subject for providers to discuss with members, yet it is critical and imperative.

We also know that this is a conversation that requires time, patience, good communication skills, and cultural awareness. To better serve our members and continue to provide quality care to everyone we serve, we are expecting our Providers to address advance care planning with your patients and initiate the conversations regarding Advance Directives.

To assist with these difficult conversations, here are a few resources that may help drive these conversations. The John A. Hartford Foundation along with the California Health Care and Cambia Health Foundations commissioned a study which brought together clinicians and culturally diverse adults to discuss end-of-life directives. The results are a compilation of recommendations surrounding this important, yet sensitive topic, "Conversation Starters". Another great resource available is from the Conversation Project. Five Wishes, created by Aging with Dignity, is a unique document as it enables people to clearly express their care preferences and facilitate communication with family members and health care providers. A Guide for Patients and Families is another informational document which talks about the family's role in health care decisions, decision-making capacity, provider determination, and court appointed legal guardians.

Source: NYDOH MLTC QI Newsletter, 2017 Vol. 1 Issue 2



Updated Clinical Practice Guidelines

Clinical Practice Guidelines (CPGs) are best practice recommendations based on available clinical outcomes and scientific evidence. They also reference evidence-based standards to ensure that the guidelines contain the highest level of research and scientific content. CPGs are also used to guide efforts to improve the quality of care in our membership.

Clinical Policy Guiding Documents (CPGDs) are also available; these are companions to the CPGs on a variety of topics. Currently there are three CPGDs:

- CPG Hierarchy
- Health equity, literacy, and cultural competency
- Quality Improvement

To access CPGDs and CPGs related to Behavioral, Chronic, and Preventive Health, visit <https://www.wellcare.com/New-York/Providers/>.

Electronic Funds Transfer (EFT) through PaySpan®

Five reasons to sign up today for EFT:

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

Setup is easy and takes about five minutes to complete. Please visit www.payspanhealth.com/nps or call your Provider Relations representative or PaySpan at 1-877-331-7154 with any questions.

We will only deposit into your account, **not** take payments out.





Updating Provider Directory Information

We rely on our provider network to advise us of demographic changes so we can keep our information current.

To ensure our members and Case Management staff have up-to-date provider information, please give us advance notice of changes you make to your office phone number, office address or panel status (open/closed). Thirty-day advance notice is recommended.

New Phone Number, Office Address or Change in Panel Status:

Medicaid

Send a letter on your letterhead with the updated information. Please include contact information if we need to follow up with you.

Please send the letter by any of these methods:



Email:
ProviderOpsNY-Upstate@wellcare.com
ProviderOpsNY-Downstate@wellcare.com

Medicare



Call: 1-855-538-0454

Thank you for helping us maintain up-to-date directory information for your practice.



Provider Formulary Updates

Medicaid:

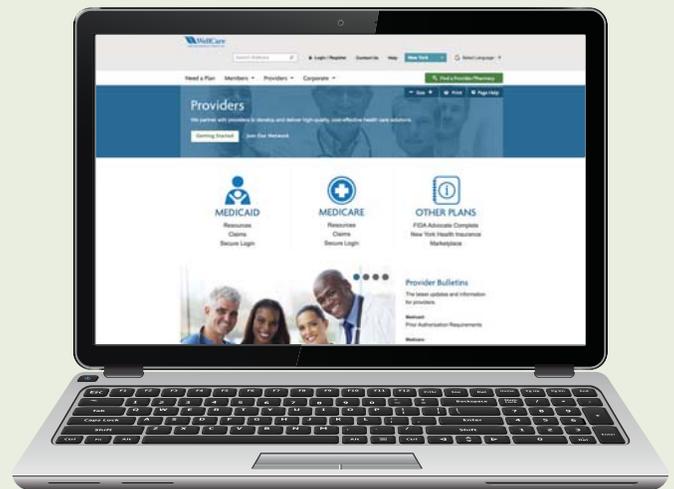
The Preferred Drug List (PDL) has been updated. Visit www.wellcare.com/New-York/Providers/Medicaid/Pharmacy to view the current PDL and pharmacy updates.

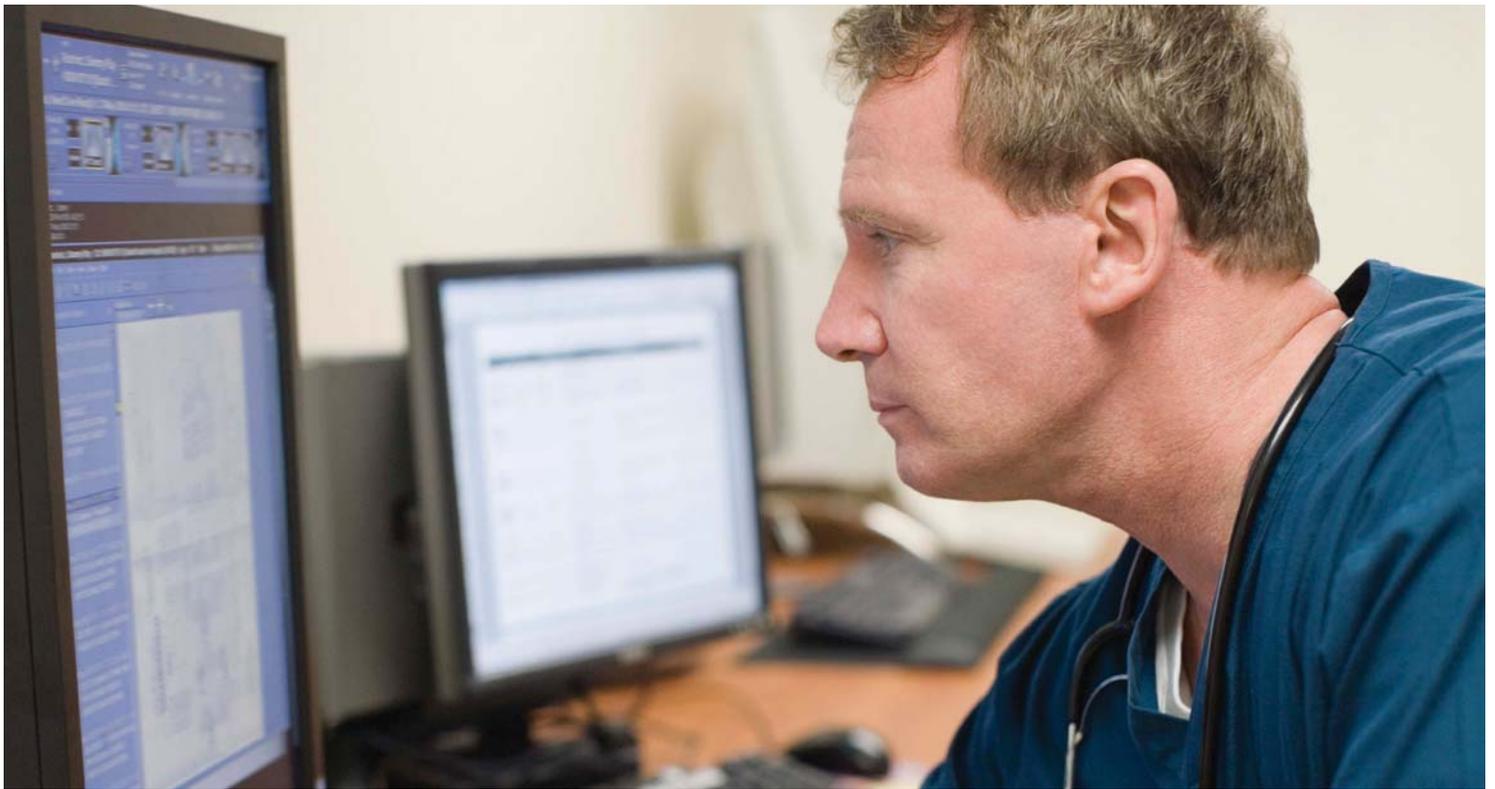
Medicare:

The Medicare Formulary has been updated. Find the most up-to-date, complete

Formulary at www.wellcare.com/New-York/Providers/Medicare/Pharmacy

You can also refer to the Medicaid and Medicare Provider Manuals available at www.wellcare.com/New-York/Providers to view more information regarding WellCare's pharmacy UM policies and procedures.





We're Just a Phone Call or Click Away



Medicare: 1-855-538-0454



Medicaid: 1-888-288-5411



www.wellcare.com/New-York/Providers

Provider Resources

Quality Program

For guidance and tools to support Quality Improvement in your daily practice, visit www.wellcare.com/New-York/Providers and select Quality from the drop-down menu. Here you'll find valuable information on topics like the CAHPS® survey, HEDIS® guidelines and Care Management programs. Additionally, you may access one of our Clinical HEDIS Practice Advisors on staff for individual support by emailing NY-QI@wellcare.com.

Provider News – Provider Portal

Remember to check messages regularly to receive new and updated information. Access the secure portal using the Secure Login area on our homepage. You will see Messages from WellCare on the right. Provider Homepage - www.wellcare.com/New-York/Providers

Resources and Tools

You can find guidelines, key forms and other helpful resources from the homepage as well. You may request hard copies of documents by contacting your Provider Relations representative.

Refer to our Quick Reference Guide, for detailed information on areas including Claims, Appeals and Pharmacy. These, along with the Authorization Lookup tool, are at www.wellcare.com/New-York/Providers/Authorization-Lookup.

Additional Criteria Available

Please remember that all Clinical Guidelines detailing medical necessity criteria for several medical procedures, devices and tests are available on our website at www.wellcare.com/New-York/Providers/Clinical-Guidelines