

provider **report**

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REMINDER: UM CRITERIA

Referral and assessment decisions are made according to established medical necessity criteria that define the level of urgency, intensity and appropriate level and setting of care.

Cenpatico/IMHS medical necessity criteria is available via the Internet at www.cenpatico.com. A hard copy will be provided upon request by calling our toll-free number.

FREE CONTINUING EDUCATION CREDITS ONLINE

We want our providers to know that they can obtain free continuing education credits on the United States Department of Veterans Affairs website. This site offers web-based modules on a variety of subjects including trauma, PTSD, treatment and more.

Visit www.cenpatico.com/providers/education to find out more information.



Save Time in Spring

Check out all the ways we're trying to make your job a little easier.

We wish you a warm welcome to the spring edition of *Provider Report*, with its wealth of useful, practical information. After a particularly harsh winter, you'll likely have many members seeking help for an array of challenging mood disorders. In this issue, we offer information that could save you time in your practice.

Take a look at the article "Tips for Claims Processing." It features a checklist for error-free claims submissions so you can get reimbursed quickly—and on the first try! Keep a copy handy.

Also, learn about our preventive health programs that offer help with patient management. For example, children who were recently discharged from the hospital may benefit from incentives for keeping their follow-up appointments. Read the article on page 4 for details.

Are you behind in your continuing education credits? You can acquire some quickly on our website at www.cenpatico.com/providers/education.

There is a host of other useful information in this issue. Be sure to read up on our use of Care Coordination and Intensive Case Management. This can be a great help in managing your most difficult members. We share a case study to show how it works in practice.

We consider working with you a partnership and want you to be satisfied as a network provider. We work hard to achieve this goal and are proud that you, for the most part, are satisfied with us, and that our members are satisfied with you! Check out the satisfaction rates on page 2.

We will continue to listen to your ideas, incorporate your suggestions and strengthen our relationships.

Sincerely,
Bernard T. Engelberg, M.D.
Medical Director



(512) 406-7200

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Tips for Claims Processing

All claims received for processing must first pass specific minimum edits prior to processing.

We've compiled a list of tips to help ensure first-time claims are clean and contain all the necessary data elements—as well as a checklist for adjustments and appeals.

→ When You're Processing Claims:

- Submit claims via EDI whenever possible.
- Use red HCFA forms, not photocopied or black-and-white forms.
- Bill using CMS guidelines with required information in the appropriate fields.
- Check that the font is legible. Avoid using 8-point font, matrix-dot printed information and hand-written billings.
- Include all other primary insurance information, such as policy holder, carrier name, identification number and address.
- Provide a complete EOB from the primary insurance carrier.
- Do not submit two-sided correspondence.
- Use paper clips instead of staples.
- Be sure that any correspondence documents (such as medical records and consent forms) contain the member's name, ID number and claim number, if applicable.
- Do not highlight information on the claim, as this may make it illegible.

→ For Adjustments and Appeals:

- Use the correct form or a cover letter, indicating what is incorrect or needs to be adjusted.
- Corrected claims should be marked as a corrected claim to avoid being considered a duplicate submission.
- List the original claim number on an adjustment request.
- Include the member's name, ID number, claim number and date of service on the refund check stub.



Quality Matters

Information from you can help us improve.

At Cenpatico/IMHS, quality really does matter! Every year, we take time to look at our quality program, assess where we are and determine where we would like to be.

Our summary of the 2009 quality program, Quality Matters, can be found at www.cenpatico.com. You can request a paper copy be mailed to you by calling (512) 406-7225.

One finding that we think is significant is the rate of overall satisfaction with being a network provider: That rate rose to 86.8 percent. Your satisfaction with getting claims paid on time increased by 18 percent.

Members' ability to obtain an appointment with you also increased to 90.4 percent for a routine appointment and to 93.8 percent for an urgent appointment.

You reported a 93 percent rate of satisfaction with our Care Management staff who provided services to 5,687 of our members in 2009.

This is good news, but we are not satisfied! Cenpatico/IMHS would like to hear your ideas so that we may incorporate them into the quality program.

We'd like to hear from you about your communication with your patient's primary care provider (PCP). We'd also like to know what value you place on communicating with the PCP about your patient and how we can encourage that communication on a regular basis.

Also, tell us how you educate your patients about their disease process and if you refer patients to community resources as a support system.

Contact us through our website at www.cenpatico.com/contact-us. Or call us at (512) 406-7225.

Outpatient Utilization Management Team

In June 2009, Cenpatico/IMHS developed a new Outpatient Utilization Management team devoted to the management of outpatient utilization. The primary focus of the team is to partner closely with our providers to ensure that the highest quality services are being delivered to our members. This means encouraging the use of evidence-based practices for the diagnoses and/or target populations being served by our providers.

The Outpatient Utilization Managers are collaborating with outpatient providers more now than ever before, calling to discuss cases, faxing feedback about requests and conducting provider training sessions to answer clinical questions and assist with completing treatment requests.

We are committed to ensuring our members receive the best care possible, and the Outpatient Utilization Management team looks forward to partnering with you to make this a reality for every Cenpatico/IMHS member.

OUR CASE MANAGEMENT PROGRAM:

Working Together for Members

An integrated approach that benefits patients' health.

Care Coordination and Intensive Case Management are integral components of our Utilization Management Department. Members who have multiple or catastrophic disease processes that require frequent and/or costly services, or who have unmet psychosocial needs may be included in this program.

An important underlying assumption in the Case Management program is that Cenpatico/IMHS is not a direct provider of healthcare services. Rather, we facilitate member connection to outpatient providers and encourage members to utilize all available resources.

Care Coordinators and Intensive Case Managers work with agencies and service providers to help members receive appropriate and necessary services—such as transportation and community support. These services are an integral part of successful member participation in treatment and completion of the Intensive Case Management program.

The most important goal of Case Management is to encourage members to become active participants in their treatment and their health. Below is a success story that highlights these goals.

One Patient's Story

This 37-year-old female member who is diagnosed with schizoaffective disorder was discharged from a psychiatric hospital in January 2009. The assigned Intensive Case Manager (ICM) began telephonic outreach to the member following discharge.

In addition to mental health issues, Samantha* had complicating medical conditions: diabetes and asthma. Samantha reported she was not "doing well." She was not taking her medications as prescribed and was

not keeping appointments with her Primary Care Physician (PCP) as indicated for her diabetes.

Making Connections

The ICM began working with multiple staff members to link Samantha to services. The health plan Connections Representative, Sarah*, made home visits to Samantha to make sure she was attending appointments with her PCP. Sarah made arrangements to meet Samantha at her scheduled appointments.

The ICM and health plan Medical Case Manager also provided integrated case management. They began taking turns calling Samantha every week to verify that she was following up with her PCP and "keeping an eye on her sugar levels." Samantha was resistant at first to the calls, but soon she looked forward to them.

Finally, Samantha began consistently attending her scheduled appointments. Samantha's Medical Case Manager made certain that she received

the supplies necessary to manage her diabetes. Together, the ICM and the health plan Medical Case Manager continued to encourage Samantha to take an active role in her healthcare.

To this date, Samantha attends her medical and behavioral health appointments and continues to call her ICM and health plan Medical Case Manager when she needs assistance with her diabetic supplies or has any medical or mental health benefit questions.

Our View

We take a holistic approach to each member's care through the integration of mental and physical health perspectives. Case Management staff strive to improve communication among all the providers working with members, and encourage members to take an active role in their treatment in order to accomplish our mission of recovery, resiliency, and results.

**Names have been changed to protect our members' identities.*



**LEARN MORE
ABOUT OUR
CASE MANAGEMENT AND
INTEGRATED CARE AT
www.cenpatico.com**



FOR MORE INFORMATION ABOUT OUR
PROVIDER SERVICES,
 VISIT www.cenpatico.com.



Preventive Care

How we're helping the health of families.

Cenpatico/IMHS has two new preventive health programs: Perinatal Depression Screening and Child Safety, for children who have been hospitalized for a mental condition.

Perinatal Depression

For the Perinatal Depression Program, we screen members who are pregnant and members who have just delivered a baby using the Edinburgh Depression Screener.

We use this tool since it's less likely to screen positive when coupled with the symptoms of pregnancy. We mail this screening tool to members in a START SMART for Your Baby™ packet during pregnancy and in a Healthy Beginnings packet after delivery. These communication materials are geared to educate mothers about pregnancy and care of newborns.

After a member completes the Edinburgh, she mails it to Cenpatico where it is scored. If the score indicates probable depression, we attempt outreach to provide assistance. We talk with her, refer her for care and offer advice on community support systems that she may access.

Child Safety

Our second program is for children who were recently discharged with a mental health diagnosis.

The goal is to keep kids safe as they readjust to the home environment. We talk to their parents about storing their medications safely and the importance of giving their child medications as prescribed to achieve the maximum results.

We also provide education about gun safety in the home. If there is a firearm present, we advise parents to use a trigger lock and to secure the firearm so it is not accessible to the child.

Children and their caretakers are offered an incentive if they keep their follow-up appointment within seven days of being discharged. While the incentive package varies in the states we serve, we generally offer a Build-a-Bear, a book on emotions called *Me and My Feelings* and a \$10 Walmart gift certificate. *(This gift certificate is not available in FL or MA.)*

How You Can Help

Cenpatico/IMHS is committed to offering member outreach to provide

the best care possible, and we need your help.

Structured preventive health programs like the ones we have developed help us identify those members at risk and take positive steps to provide them with the care they need. We could also use your help. If you are aware of an opportunity for us to help, please let us know and we will work with you to formulate a program.

We are always looking for ideas that would help us expand our existing programs as well. You can refer members to the appropriate preventive health program if you know the member is pregnant or if the member is recently discharged. If you know that a member is already in a program, encourage that member to respond to our outreach.

➔ **If you have an idea to reach out to members using our services, please contact us at (512) 406-7225 or e-mail your ideas to sfeay@centene.com. For more details about our preventive services and programs, visit us online at www.cenpatico.com.**

