provider report

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ICD-10 Update

- On March 27, a bill was introduced to the House of Representatives to fix the Sustainable Growth Rate (SGR). Included in the broader package was a delay in the adoption of ICD-10 codes.
- The bill was signed into law by President Obama on April 1.

"The Secretary of Health and Human Services may not, prior to October 1, 2015, adopt ICD-10 code sets as the standard for code sets under section 1173(c) of the Social Security Act (42 U.S.C. 1320d-2(c)) and section 162.1002 of title 45, Code of Federal Regulations."

Coordinated Care continues its work on implementation and the change to 2015 should have little impact.

How You Can Support HEDIS Scores

HEDIS measurements are an important part of measuring and reporting on health care quality. They give consumers and employers a way to make informed decisions as they choose care.

Below is a summary of key HEDIS measurements related to children's health.

WELL-CHILD EXAMS

- **Ages 0 to 15 months:** Six well-care visits (at least two weeks apart) with a PCP, to include health and development history, physical exam and health education/anticipatory guidance.
- **Ages 3 to 6 years:** Annual well-care visit with a PCP each year, to include health and development history, physical exam and health education/anticipatory guidance.
- **Ages 12 to 21 years:** Annual well-care visit with a PCP or ob/gyn, to include health and development history, physical exam and health education/anticipatory guidance.

DENTAL VISIT

For Medicaid enrollees ages 2 to 21, at least one dental visit annually.

Member Rights and Responsibilities

It is important to be aware of your patients' rights and responsibilities under Coordinated Care. Our member rights and responsibilities can be found on our website.

THE APPROPRIATE USE OF RESOURCES

Coordinated Care and its delegated partners have utilization and claims management systems in place to identify, track and monitor care provided and to ensure appropriate care is provided to members.

Coordinated Care does not reward practitioners, providers or employees who perform utilization reviews, including those of the delegated entities for issuing denials of coverage or care. Utilization management (UM) decision-making is based only on appropriateness of care, service and existence of coverage. Financial incentives for UM decision makers do not encourage decisions that result in underutilization. Utilization denials are based on lack of medical necessity or lack of covered benefit.

Utilization review criteria have been developed to cover medical and surgical admissions, outpatient procedures, referrals to specialists and ancillary services. Criteria are established and periodically evaluated and updated with appropriate involvement from physician members of the Coordinated Care UM Committee.

Providers may obtain the criteria used to make a specific decision by contacting our Provider Services at **1-877-644-4613**. Practitioners also have the opportunity to discuss any medical or behavioral health UM denial decisions with a physician or other appropriate reviewer at the time of notification to the requesting practitioner/facility of an adverse determination.

Cultural Considerations: Interpreters

Do you have a patient who needs or would like an interpreter? Coordinated Care provides interpretation services.

It's good to note to your patients that family members and friends are not the same as a professional interpreter. They are more likely to modify what the patient has actually said in their effort to be helpful.

A professional interpreter does more than interpret for the patient. Their job is to help facilitate communication between you and your patient.

When working with interpreters:

- Allow enough time for the interpreted sessions.
- Avoid jargon and technical terms.
- Keep your statements short, pausing to allow for the interpretation. Say one longer sentence or three or four short ones, and then stop in a natural place to let the interpreter pass your message along. The interpreter may need to hear the whole sentence before she can even start to interpret it.
- Ask only one question at a time.
- Be prepared to repeat yourself in different words if your message is not understood. If a response doesn't seem to fit with what you said, go back and repeat what you said in different words.

BEHAVIORAL HEALTH SERVICES FOR YOUR PATIENTS

If you have patients who struggle with depression, anxiety, substance abuse or other behavioral health conditions, we have resources to help. Coordinated Care offers our members access to all covered, medically necessary behavioral health services.

For help identifying a behavioral health provider or for prior authorization for inpatient or outpatient services, call 1-877-644-4613.

Helping Parents: Immunizations

A critical part of children's health care, immunizations can also be confusing to parents. Help parents understand and follow the recommended schedule for immunizations by sharing a simply formatted and customizable chart, like the one provided on this page. Distribute it to new patients and new parents along with appointment information. You may also direct members to reliable online resources like **www.cdc.gov/vaccines**.

Your Child's Immunization Schedule

Child's Name: Date of Birth:

VACCINE	PROTECTS AGAINST	RECOMMENDED VACCINATION TIMING	DATE(S) RECEIVED	NOTES
HepB	Hepatitis B virus (chronic inflammation of the liver)	At birth; between 1 and 2 months; 6 to 18 months		
RV	Rotavirus (virus causing severe diarrhea and vomiting)	2 months; 4 months; 6 months		
DTaP	Diphtheria (thick covering in the back of the throat); Tetanus (painful muscle stiffness); Pertussis (whooping cough)	2 months; 4 months; 6 months; 15 to 18 months; 4 to 6 years		
Hib	Meningitis (infection of the covering of the brain and spinal cord); Epiglottitis (severe throat infection)	2 months; 4 months; 6 months; 12 to 15 months		
PCV	Pneumococcal disease (bacterial infection that can lead to pneumonia, blood infections and meningitis)	2 months; 4 months; 6 months; 12 to 15 months		
IPV	Polio (virus which can lead to paralysis)	2 months; 4 months; 6 to 18 months; 4 to 6 years		
Influenza	Influenza (virus causing fever, chills, sore throat, muscle aches, fatigue, cough, headache and runny/stuffy nose)	Annually, starting at 6 months		
MMR	Measles (virus that can lead to pneumonia, seizures, brain damage and death); Mumps (virus that can lead to deafness, meningitis, swelling of testicles/ovaries and sterility); Rubella (virus causing rash, arthritis, fever and potential miscarriage or birth defects in pregnant women)	12 to 15 months; 4 to 6 years		
Varicella	Varicella (Chickenpox caused by varicella-zoster virus)	12 to 15 months; 4 to 6 years		
Hep A	Hepatitis A (virus that causes a liver disease)	12 to 23 months		

+ Tdap: You can protect your baby from whooping cough by getting a Tdap shot when you are pregnant, during the third trimester.

REMINDER

To help us process authorization requests accurately and efficiently, please be sure to submit sufficient medical information to justify the request. If you have questions or concerns about the type of medical information required, please visit our website under Provider Resources or contact our Provider Services team at **1-877-644-4613**.

When Is a Self-Referral OK?

For Coordinated Care members, the following services do not require PCP authorization or referral:

- Prescription drugs, including certain prescribed over-the-counter drugs
- Emergency services including emergency ambulance transportation
- Ob/gyn services, including those of a certified nurse midwife
- Gynecological services, including those of a certified nurse midwife
- Women's health specialist covered services provided by a federally qualified health center (FQHC) or certified nurse practitioner
- Mental health and chemical dependency/substance abuse services for the first six standard outpatient sessions per member per year
- Family planning services and supplies from a qualified family planning provider
- Routine dental services
- Non-surgical routine vision care with optometrists and ophthalmologists

A Wealth of Information Just a Click Away:

Coordinated Care's Provider Manual and Billing Manual

Please review our Provider Manual and Billing Manual at **www.CoordinatedCareHealth.com** under **Provider Resources**.

To access the Provider and Billing Manuals for Ambetter (our Exchange product), please go to **Ambetter.CoordinatedCareHealth.com** under **Provider Resources**.

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