

Q3 2017—IN THIS ISSUE

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Quest for the Best: HEDIS® Audit gives HPSM high marks in quality of care

HPSM would like to express our appreciation for granting us access to your medical records for the 2017 HEDIS® season. This spring, HPSM collected and reviewed over 4,600 medical records in just nine weeks for HEDIS®. HPSM staff is grateful to the over 500 providers (in and out of network) who provided us with medical records.

Here are some highlights:

- All of HPSM's Medi-Cal measures rated above the California Department of Healthcare Services' Minimum Performance Level (MPL) for managed care plans.
- HPSM achieved High Performance Level (HPL) ratings for two measures, which ranked us in the *top 10 percent of Medicaid plans nationally*. These HPL measures were:
 1. Avoidance of antibiotic treatment for adults with acute bronchitis.
 2. Child immunizations (complete vaccination by the age of 2). Childhood immunizations have continued to improve due to the diligence of our providers utilizing the California Immunization Registry (CAIR).

Healthcare
Effectiveness
Data and
Information
Set

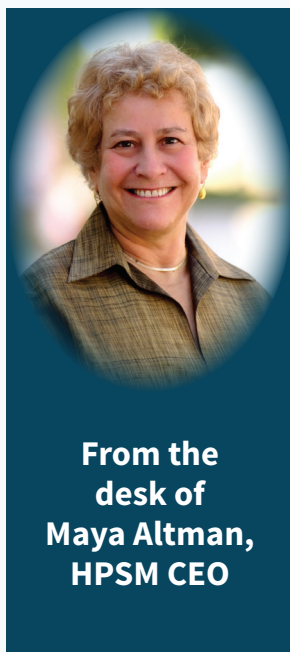
HEDIS® is a standardized set of performance measures developed by the National Committee for Quality Assurance (NCQA) to evaluate consumer health care

- Overall, comprehensive diabetes control is improving. Diabetes rates continue to rise – making appropriate exams, treatments and monitoring more important than ever.
- The medication reconciliation post-discharge measure has increased by 10%. This shows that we've gotten better at identifying potential drug interactions when multiple providers prescribe medications to a member.

Though we have completed our HEDIS® medical record collection activities for this year, we want to remind you that the more comprehensive and accurate your claim submissions are the fewer medical records we need to review in the future.

Thank you for contributing to our successful HEDIS® reporting and providing high quality care for our members.

Healthcare Legislation Update: Where We Stand



Dear HPSM Colleagues,

The last six months have been tumultuous for health care – almost every day brings new twists and turns. The situation may have changed (again) by the time you read this, but here’s where we stand as I write today.

The Senate failed to pass a bill to repeal and replace the Affordable Care Act (ACA) of 2010. They proposed several different versions, but could not get enough votes for any of them. This is great news for HPSM and especially our members. According to government sources, here’s what would have happened if the original version of the bill had passed:

- *22 million people nationwide could have lost healthcare insurance over the next decade*
- *Medicaid funding could have been cut 26 percent by 2026*
- *By 2020, Medicaid expansion rollback could have taken Medi-Cal away from 36,000 HPSM members*

It is important to remember, however, that this latest victory is only one more challenge in the ongoing struggle to protect healthcare – because the President and Senate Republican leadership are still determined to destroy the ACA. If they do manage to pass a bill that resembles any of their proposals so far, it would endanger the health and even the lives of many HPSM members.

That’s why it’s important to keep up the healthy fight for healthcare! A great way to do that is through the *Medicaid is US* social media campaign. **Learn how you can stay informed and spread the word at www.medicaidisus.org.**

Sincerely,

Maya Altman,
Chief Executive Officer, HPSM

HPSM Represents at Healthcare Town Hall

On Saturday, July 15, I attended a town hall in Pacifica hosted by Congresswoman Jackie Speier called *A Conversation about America: Health Care*. More than 500 people attended, including several other HPSM employees, members and one of our Commissioners. Many people spoke movingly about how the ACA saved their lives or family members’ lives and protected them from financial devastation.

These real-life stories really put things in perspective. When we talk about healthcare, we are literally talking about matters of life and death. The decisions our leaders make and the actions we take to influence them have serious consequences. That makes what we do here at HPSM every day profoundly meaningful, and why we say that

Healthy is for Everyone.

We have a responsibility and a purpose, and by carrying these out with dedicated passion, we can make a world of difference.



Photograph by Scott Buschman

The EFT/ERA Raffle Winners!

And a friendly reminder to sign up
(if you haven't already)

In the last issue of HealthMatters MD, we announced a raffle for a **\$100 Amazon gift card**. To enter, providers simply had to sign up for Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA). We also promised to reveal the two lucky winners in the next issue. So here they are:

Arnold W. Goldschlager, MD
Burlingame

Signed up before
June

**Saint Francis
Convalescent Hospital**
Daly City

Signed up by
end of June

Congratulations to our winners and thank you to everyone who entered the raffle. Remember: HPSM will be signing all of our network providers up for EFT/ERA by year's end. This automated process deposits payments directly into your bank account so you get paid faster. If you haven't signed up for EFT/ERA yet, there are two easy ways to do it:

1. Download the easy-to-use EFT/ERA Form from our website, fill it out and send it back to us OR
2. Contact Provider Services by phone (**650-616-2106**), fax (**650-616-8046**) or email (psinquiries@hpsm.org)



Accepting Medicare/CareAdvantage Patients Helps Them—and You!

You became a clinician because you want to help people, right? Medicare (CareAdvantage) patients are some of our neediest members, and especially need good doctors, specialists and therapists. Treating them contributes to the greater good by making a huge difference in their lives—sometimes a lifesaving difference.

We offer providers the following benefits for accepting members of our CareAdvantage Cal MediConnect (CMC) program for patients with Medicare (A+B) and Medi-Cal:

- Reimbursement rates starting at 80% of the Medicare fee schedule plus 10% of the Medi-Cal fee schedule
- No annual deductible from your claim payments
- No referrals required for outpatient services
- One local contact for Q&As
- And more

✉ For more information about CareAdvantage, visit www.hpsm.org/careadvantage/join.aspx. To have a brochure mailed to you, call **650-616-2106**.

Meet HPSM's Medical Directors

Our three Medical Directors are integral to the care that our network clinicians provide:

- When one of your HPSM patients needs a special test, medication or procedure that requires preauthorization, our Medical Directors review your request to ensure that it meets the criteria for medical necessity
- They provide clinical leadership and expertise to numerous HPSM departments and programs—from Provider Services and Pharmacy Services to Claims and Care Coordination
- Our Medical Directors represent HPSM in the community by working with physicians, hospitals, skilled nursing facilities and the San Mateo County Medical Association

Beyond what our Medical Directors do, here are a few professional and personal details about them so you can learn something about who they are.



Dr. Margaret Beed
Chief Medical Officer

- MD from University of Illinois at Chicago, MPH from the University of North Carolina at Chapel Hill
- Board Certified Pediatrician since 1987
- With HPSM since 2015: provides leadership and direction for all medical management activities, including quality improvement
- Personal interests: travel, gardening and reading

- MD from University of Cincinnati
- Board Certified Obstetrician/Gynecologist since 1984
- With HPSM since 2016: Medical Director for the California Children's Services pilot (CCSP)
- Personal interests: hiking, travel, reading and volunteering (monthly at Samaritan House free clinic and yearly in Haiti)



Dr. Cynthia Cooper
Senior Medical Director



Dr. Richard Moore
Medical Director

- MD from University of Nevada School of Medicine
- Board Certified in internal medicine in 1989 and in geriatric medicine in 1994
- With HPSM since 2009: focused on helping older adults enhance their health and wellness
- Personal interests: yoga, golf, biking, tennis, music, travel, family time and barbequing

HPSM's Peer Review Committee (PRC) & Physician Advisory Group (PAG)

HPSM also has a group of 10 network providers who are members of two “focus groups” that meet periodically to help us improve our provider relations. These individuals represent a wide range of clinical disciplines and practice locations, reflecting the diverse makeup of our provider network. As the “voice” of HPSM’s network providers, PRC/PAG members support our Medical Directors by:

- Providing feedback on HPSM’s clinical guidelines
- Offering advice to enhance our quality improvement initiatives
- Making recommendations about our credentialing process and provider applications

Dr. Janet Chaikind
Pediatrics
San Mateo Medical Center

Dr. Hung-Ming Chu
Psychiatry
Behavioral Health and Recovery Services

Dr. Roberto Diaz
Obstetrics/Gynecology
Burlingame

Dr. James Hutchinson
Family Medicine
San Mateo

Dr. Leland Luna
Family Medicine
South San Francisco

Dr. Vincent Mason
Pediatrics
Palo Alto Medical Foundation

Dr. Kamal Shamash
Family Medicine
Daly City

Dr. Tom Stodgel
Obstetrics/Gynecology
San Mateo

Dr. Kenneth Tai
Internal Medicine
North East Medical Services

Dr. Randy Wong
Surgery
Palo Alto Medical Foundation

Coming Soon: New & Improved Provider Search Tool

The wait is almost over—HPSM’s new online Provider Search Tool will be available on our website by the end of 2017. Soon, referring patients to clinicians, specialists, clinics and hospitals in HPSM’s network will be as easy as entering a few words on your computer or phone. No more poring through a lengthy pdf to find what you’re looking for. The new Provider Search Tool will allow you and your staff to find HPSM providers by:

- Name
- Location
- Benefit plan
- Specialty
- Language
- Gender
- Wheelchair accessibility
- Whether they are accepting new patients

Listings will include addresses, phone numbers and (when given to us) office hours. Searches can be performed in English, Spanish, Chinese, Tagalog and Russian.

Our new Provider Search Tool is in the testing phase now. Here is a screenshot of the prototype.

The screenshot shows a web form titled "Provider Directory" with the subtitle "Quickly find a provider, pharmacy, or clinic, hospital or other facility." It has two main sections: "Already have a provider in mind?" and "OR, find a list of providers that are covered!". The first section includes a "Provider Name" input field and a "Search" button. The second section is divided into three numbered steps: 1. "I'm a Member" (with a "Member ID" input field and a "Need your Member ID?" link), 2. "I would like to find a provider in ..." (with "Zip", "Distance" (set to 10 Miles), and "State" (set to California) input fields), and 3. "I would like to see ..." (with radio buttons for "Primary Care", "Specialist", "Hospital or Facility", "Pharmacy", "Dental (Healthy Kids only)", "Behavioral Health", and "Medical Equipment and Supplies"). A "Search Providers" button is at the bottom.

✉ With our new Provider Search Tool coming online, now is a perfect time to confirm that your information in HPSM’s Provider Directory is current and accurate. Check your listing at www.hpsm.org/providers/provider-directories.aspx, and correct any discrepancies at www.providers.hpsm.org/ChangeRequestProvider.

NMT Benefit Expanded to Adult Medi-Cal Members

On July 1, 2017, HPSM expanded our Non-Medical Transportation (NMT) benefit to adult Medi-Cal members. We previously only provided NMT to CareAdvantage members and children with Medi-Cal. There is no annual limit on the number of rides, and the program is administered by the American Logistics Company (ALC).

✉ Refer patients to NMT

HPSM wants our members to attend all of their medical appointments. If any of your Medi-Cal or CareAdvantage patients have trouble getting to your office or clinic, please refer them to HPSM's NMT program. Note that we encourage members who have other transportation options (e.g., rides from family, friends or public transit) to use those instead of NMT.

Medi-Cal members call: **1-844-856-4389** CareAdvantage members call: **1-877-356-1080**



The NMT benefit is for transportation to and from medical appointments for medically necessary covered healthcare services. Rides to dental appointments are not currently available.



The NMT benefit is NOT for trips to shopping malls, supermarkets, restaurants, hair salons or social visits.

①

Member calls ALC and gives their:

- Member ID#
- Date & time of appointment
- Pick-up & appointment location

②

ALC arranges pick-up at the member's preferred location by the type of vehicle that meets their individual needs

③



Curb-to-curb service (rideshare service)



Door-to-door service (taxi service)

Driver drops member off at their appointment

④

When appointment is done, member calls ALC, which arranges for pick-up & ride home

Need Prior Authorization? Use HPSM's New PAR Form

In July, HPSM introduced a new Prior Authorization Request (PAR) form. We now require providers to type PAR information into the online fillable form rather than hand-write it in. Digitizing the process allows us to automatically scan the information into our system instead of having to manually type it in. This saves time and improves accuracy – so you get answers faster.

How to use the new PAR

- 1) Before submitting a PAR, check to see whether you need to. Go to HPSM's Prior Authorization Required Services List at www.hpsm.org/documents/HPSM_Prior_Auth_Required_List.pdf. Then search the pdf by CPT code or service name to find out.
- 2) If you do need to submit a PAR, it is posted at www.hpsm.org/documents/Prior_Authorization_Request_Form.pdf. Fill it out fully and accurately.
- 3) Print the form and fax it to HPSM at **650-829-2079**.


WARNING—Your PAR will be rejected if you submit:

- An old version of the form
- An incomplete form
- Inaccurate information
- A form that is filled out in handwriting
- A PAR containing multiple patients' information

If you have any questions about the PAR, please consult the PAR Form User Guide for Providers at www.hpsm.org/documents/Prior_Authorization_Request_Form_User_Guide.pdf or call Provider Services at **650-616-2106**.

Coming soon – more PAR improvements!

An even more enhanced PAR form will be part of our Provider Portal, which will be launched in 2018. This will feature automated PAR review, enabling providers to check authorization status online on the same day they submit a PAR.



Prior Authorization Request Form

Please type into PDF form and fill out all fields. Fax completed form to 650-829-2079.

REQUEST

URGENT
 ROUTINE

Mark ✓ or X

LINE OF BUSINESS

CAREADVANTAGE
 MEDI-CAL
 ACE
 HEALTHYKIDS
 HEALTHWORX

Today's Date: _____ MM-DD-YYYY

Is this a Pharmacy request? YES NO IF YES, FAX Form to 650-829-2045

Is this a retrospective request? YES NO IF YES, FAX to 650-829-2062

Is member currently in the hospital? YES NO IF YES, FAX Facesheet to 650-829-2060

> **Member Last Name:** _____ **First Name, M.I.:** _____
Street Address: _____ **City, State, ZIP:** _____
Phone: _____ **Member ID#:** _____ **DOB:** _____ **Age:** _____

> **Servicing Provider Name:** _____ **NPI:** _____
Street Address: _____ **City, State, ZIP:** _____
Phone: _____ **Fax:** _____ **Office Contact:** _____

> **Additional Provider (if needed):** _____ **NPI:** _____

Primary Diagnosis Code: _____ **Description:** _____
Secondary Diagnosis Code: _____ **Description:** _____
Tertiary Diagnosis Code: _____ **Description:** _____

Line No.	Procedure Code (CPT/HCPCS Code/Modifier if applicable)	Specific Services Requested	Units of Service (Days/Quantity)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Optional comments for medical justification. Requesting Provider please attach required medical records/supporting documents.

Long Term Care (LTC) Required Information (Mark ✓ or X):
 Transfer Initial Reauthorization Bed Hold Skilled Nursing ICF-DD Sub-Acute

Requested Service Dates FROM: _____ **TO:** _____
MM-DD-YYYY TO: MM-DD-YYYY

To the best of my knowledge, the above information is true, accurate and complete, and the requested services are medically indicated and necessary to the health of the patient.

Signature of Physician or Provider _____ **Title** _____ **Date** MM-DD-YYYY

801 Gateway Blvd., Suite 100, South San Francisco, CA 94080 • TEL: 650-616-0050 • TTY: 1-800-735-2929
 For authorization questions contact HPSM Health Services: PH 650-616-2070 • Fax 650-829-2079 • For Facesheets fax to 650-829-2060
 NOTE: AUTHORIZATION DOES NOT GUARANTEE PAYMENT. PAYMENT IS SUBJECT TO PATIENT'S ELIGIBILITY. BE SURE THE ID CARD IS CURRENT BEFORE RENDERING SERVICE.
 Version 2.2 March 2017

PRINT FORM



HEDIS[®] Audit


**gives HPSM high
marks for quality
of service**

See page 1 for details

Plus:

 **A healthcare legislation update**
from HPSM's CEO

 **Announcing the
EFT/ERA raffle winners**

 **Meet our
Medical Directors**

 **And more inside**