

Partners in Care

Molina Healthcare



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- Clinical practice and preventive guidelines
- Disease Management programs for asthma, diabetes, pregnancy, COPD and cardiovascular diseases
- Quality Improvement program
- Member rights and responsibilities
- Privacy notices
- Claims/denial decision information
- Provider manual
- Formulary
- UM Affirmative Statement (re: non-incentive for under-utilization)
- How to obtain copies of UM criteria

Molina Healthcare of Michigan

Please contact Molina Provider Services for written copies of all information on the website or if you need more information please call Provider Customer Service at **1-888-898-7969**.

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ER Visits: The “Get It Now” Syndrome

Our society has become obsessed with receiving immediate results and gratification. We live in a “Get it Now” culture. Hospital services are no exception. Some emergency room departments even advertise “You will be seen by the doctor in 15 minutes or less, or you will receive free movie tickets.”

The message from physicians has not changed: “When you need medical advice and care you should ‘get it!’” The emergency room does serve a role in providing care for many serious health issues (e.g., significant bleeding, chest pain, loss of consciousness, or significant difficulty of breathing). However, the use of emergency departments for things such as sore throats, colds, earaches, and rashes has become prevalent and is increasingly clogging emergency departments across the nation.

According to the most recent Centers for Disease Control (CDC) statistics, ER visits in the U.S. have increased more than 26% over the last decade, topping the 114 million visit mark in 2003. Despite this, there are 14% fewer emergency departments in the U.S. compared to ten years ago to care for these patients. Many of these ER visits are for non-emergent conditions, which makes it difficult for PCPs to establish effective relationships and treatment plans with their patients. A lack of an effective “medical home” creates fragmented, non-comprehensive care, which often times is significantly more expensive.

Physicians can help promote more efficient use of the emergency department in a number of ways:

- Patients can be counseled on inappropriate use of the ER for minor, non-emergent conditions.
- Physicians can make patients aware of alternative levels of care such as urgent care centers.
- PCPs can instruct patients regarding self-care and preventive behaviors.
- Physician offices can establish more convenient access for patients, including same-day appointments, extended evening office hours, and expanded phone availability.

Another effective intervention is telling your patients about Molina Healthcare’s Nurse Advice Line where they can receive assistance with health-related questions or concerns. Nurses can also counsel patients regarding the most effective care setting for their particular health issue. Together, PCPs and health plans can help patients receive the most appropriate care while ensuring America’s health safety net does not unravel.

The emergency system plays a key role in life threatening situations, but in most other situations primary care providers and nurses can be exactly what the doctor ordered.



Sign-Up Today for ePortal

Have you registered for Molina Healthcare's web-based ePortal? New features are being added twice a month – making it more efficient and easier to use every day!

If you haven't already registered, call the Molina ePortal Help Desk (1-866-449-6848) to get your personal log on information. Once you are registered, you can log on to Molina's secure site and have easy access to real-time information – 24 hours a day, seven days a week.

Upon registration, you and your office staff will be able to perform the following tasks online:

Member Eligibility Inquiry

- The Member Eligibility function allows providers to get up to date eligibility information about Molina members seeking care at their office or facility.

Claims Status Inquiry

- The Claims Status Inquiry provides current information about the status of claims.

Submit Online Authorizations

- The Online Authorization screens let physicians and other health care providers and office staff save time by submitting their authorization requests online. Information about diagnosis codes and procedure codes is also readily available.

Authorization Inquiry

- The Authorization Status Inquiry provides current information about the status of authorizations.

Search for Providers

- The convenience of Online Authorizations also includes searches for other contracted providers by name, specialty, or zip code. Information about Molina's providers consists of their address, specialty, languages spoken, group and hospital affiliation and the Molina lines of business the provider accepts.

Download Forms

(Useful and most frequently used forms)

- Obtain documents that you most often use. These include authorization request forms, formularies and many other state-specific Molina forms.

Change Mailing Address

- You can even change your office address through the ePortal. This eliminates the need to send letters or to make phone calls to change addresses.

Molina Healthcare is committed to maintaining cutting-edge e-Health services for our providers. These new on-line functions are HIPAA-compliant and can enhance your office productivity and staff satisfaction. Register today – we look forward to hearing from you!

Nurse Advice – Just a Phone Call Away

How often do you find yourself rushed for time to follow-up with patients who came to your office or called with a health concern or question? Even minor health concerns can quickly become urgent when patients don't know how to treat their illness or access their PCP. Molina Healthcare is here to help you – our Nurse Advice Line can be a great resource to you and your office staff.

Molina's Nurse Advice Line is

available 24 hours a day, 7 days a week. Experienced bilingual (Spanish) Registered Nurses listen to the patient's concerns, ask about their symptoms, determine the seriousness of the condition, reassure them, coach them through possible home treatment, and recommend the best setting to get the care they need. The nurses utilize accredited, established guidelines to assess the member's needs, give medical advice and direct them to the appropriate

level of care. To access the Nurse Advice Line, your patients can call: **English: 888-275-8750 or Spanish: 866-648-3537** Other languages are available via an interpreter service.

Promote and encourage your patients to call the Nurse Advice Line for assistance. Here are a few ways you can collaborate with us to enhance their health:

Nurse Advice continued on page 3

- Schedule an appointment for patients if they have been advised by the Nurse Advice Line to seek medical care with their primary care physician.
- Teach patients to complete their entire course of antibiotics even when symptoms have resolved and

not take other people's medications or previously unused antibiotics.

- Remind patients to obtain refills before they have taken the last dose of their regularly prescribed medication and make sure they understand why they are taking it.

- Educate patients (especially parents) on the importance of having a working thermometer available at all times.

By working together we can reassure patients that medical assistance is just a phone call away.

Cultural Sensitivity

to Complementary and Alternative Medicine Therapies

The patient-provider relationship is built upon mutual respect, trust, and understanding. A large factor in utilization of health care is the role of cultural health belief systems in the provider and patient population. Coming to understand the patient's world view is critical to improving the health status of the patient from a different background. For physicians, this includes an understanding of folk illness, health beliefs, and alternative medicine practices.

Culturally sensitive physicians and other health care providers will be able to establish a relationship where the patient is comfortable sharing alternative measures taken to cope with illness or improve health.

The National Health Interview Survey (2002) defines complementary and alternative medicine (CAM) as a group of diverse medical and health care systems, therapies, and products that are not usually considered part of conventional medicine. The U.S. public's use of CAM increased substantially during the 1990s. According to Barnes et al (2004), surveys of over 30,000 adults show that sixty-two percent of adults used some form of CAM therapy in the past year.

CAM consists of many heterogeneous systems of medicine as well as numerous stand-alone therapies. The majority of these interventions relate to prayer or mind-body interventions such as deep breathing exercises or massage. Some may involve the use of medicinal substances such as herbal medicine. The most common CAM interventions/therapies mentioned in the surveys, in order of the most common inclusion, were chiropractic care, acupuncture, herbal medicine, hypnosis, massage therapy, relaxation techniques, biofeedback, and homeopathic treatment. CAM interventions/therapies such as chelation therapy, energy therapies, qi gong, tai chi, yoga, high-dose vitamins, and spirituality/prayer for health purposes were less commonly mentioned.

CAM was most often used to treat back pain or problems, head or chest colds, neck pain or problems, joint pain or stiffness, and anxiety or depression. A small percentage used CAM to treat chronic medical problems such as high blood pressure or asthma.

- Adults with low incomes were more likely than more affluent adults to use megavitamin therapy and health-related prayer.

- Urban adults were more likely than rural adults to use alternative medicine, biologically based therapies such as megavitamins, and mind-body therapies.
- Immigrants may continue to rely on complementary and alternative medicine as part of their medical treatment even as they seek care in the United States from conventional health care providers.

Physicians and other health care providers who inquire about and include non-harmful, alternative interventions in their treatment plans will improve patient satisfaction and build patient trust in their provider relationship. In discussing CAM with your patients, please be aware that certain CAM interventions/therapies may not be covered by the member's benefit plan. Members can be directed to call member services if they need education or assistance in determining specific benefit coverage.

Barnes PM, Powell-Griner E, McFann K, Nahin RL. Complementary and alternative medicine use among adults: United States, 2002.

National Health Disparities Report 2004.

<http://www.qualitytools.ahrq.gov/disparitiesreport/2004>

Quick Tips to Improve Patient Medication Safety

In 2000, the Institute of Medicine reported that serious Adverse Drug Reactions (ADRs) occur over 2 million times each year¹ and the Journal of the American Medical Association reported that 100,000 Americans die annually² of adverse reactions to prescription drugs (based on hospital data). The exact ambulatory ADR rate is currently unknown, but is considered to be much higher than hospital rates. Unrecognized drug interactions are a major contributor to ADRs, and result in countless ER visits and hospital admissions.³

It is a long-standing practice that, at the time of dispensing, pharmacists

screen for important drug-drug interactions in order to avoid harm to the patient. There are also things practitioners can do to prevent these interactions from occurring:

- Encourage members to fill their prescriptions at one pharmacy, or at as few pharmacies as possible.
- Ask new and existing members about medications they may be currently taking, prescribed by other practitioners (including over-the-counter medications).
- Remember that some categories of drugs are especially at high risk

for interactions (anticonvulsants, antibiotics, cardiac drugs, antidepressants).

- Avoid if at all possible the use of pharmaceutical samples for chronic conditions. Pharmacies have no knowledge of these medications and are unable to include them in their drug interactions screens.
- Check up-to-date computer programs, if available (i.e., www.epocrates.com).

¹ Institute of Medicine, National Academy Press, 2000.

² Lazarou J et al. JAMA 1998;279(15): 1200-1205.

³ Raschetti R et al. Eur J Clin Pharmacol 1999;54(12):959-963.

Well Child Visits

Molina Healthcare of MI has a well child visit incentive for members ages 3, 4, 5 and 6 who have not yet had a well child visit. The members are identified via claims and sent a letter asking them to call their PCP office to schedule an appointment. Once we receive a claim indicating they have had a well child visit, they will receive a free gift.

We are asking you make every effort to accommodate their request for an office visit prior to the end of the year. Please code the visit utilizing the well child visit codes, rather than the office visit codes. This will eliminate the need for medical record review at your office during the HEDIS project.

This incentive is in response to the results of our 2005 HEDIS® project. The specific components required for a well child visit include 3 elements:

- 1. Physical Examination**
- 2. Health and Developmental History = (physical and mental)**
- 3. Anticipatory Guidance – Health Education = (age appropriate teaching)**

- ***Children need all three components documented during the visit.***
- ***This may occur during a well visit, sports physical OR a sick visit.***
- ***Please remember to use the billing code for Well Child Visits, rather than the office visit code.***

Specific pre-printed forms can be found utilizing the following resources:

- Molina Provider Manual, Tab 7 (Quality Improvement), pages 43 – 100
- Molina website: www.molinahealthcare.com, click on “Michigan/Providers/Provider Manual/Section 7 (Quality Improvement)”, pages 43 – 100. You may reproduce these pages.

The components above also apply to Adolescent Well Visits.

Well Child Fair

Molina Healthcare of Michigan is always striving to improve our quality scores and performance measures. One of the performance measures that we continue to struggle with is our well child rates, particularly with our 3 – 6 year olds. Since the members were not going to the physician office, we decided to create a fun environment to provide the service. Molina sponsored a Well Child Health Fair at the Detroit Public Library in March 2006. Services performed

were well child exams, lead screening, vision and hearing screening. We also provide fun activities which included: face painting, the children were able to watch a first run movie while they waited to see the physician. Because of the response received on the health fair, we will be repeating the event at the Library in July. This time we will expand the age range to 15 year olds. In addition the services will also include immunizations.

Molina of MI Participates in a Statewide Lead Campaign

Young victims are totally unaware that they are being slowly poisoned. This scenario is very real and has been for decades in Michigan. The culprit, lead, may be as close as your own backyard, or closer. Families can be exposed to lead and not even know it. That's why many health plans in Michigan, health departments, physicians and laboratories are partnering to provide lead testing for children between the ages of one - six years. These partnerships are the key to success of the upcoming statewide "Not in My Backyard (NIMBY) lead testing campaign."

Michigan Surgeon General Kimberly Dawn Wisdom launched the NIMBY campaign at a May 19th kickoff event at the state capitol in Lansing. As part of the campaign, health plans in high risk regions will be reaching out to those communities to spread the word about the dangers of lead poisoning. The efforts will continue through Lead Poisoning

Prevention Week in October.

Examples of planned outreach activities:

- Hand delivery of lead education materials to homes in high risk areas
- Incentive programs such as complimentary restaurant and retail store gift cards on completion of the test
- Use of mobile testing units
- Free lead testing in designated locations

Lead can be found in soil, dust paint chips, cosmetics, folk remedies, glazed pottery and tap water. The most serious threat comes from the lead used in paint in homes built prior to 1978. Chipping and peeling paint exposes the older paint which is highly toxic if eaten or breathed in with house dust.

Lead exposure can result in a high blood lead level or lead poisoning. Lead Poisoning impacts people of all races and ethnicities living in the city, suburbs or in the country. It has no signs or symptoms. In fact, the effects of lead exposure might not show up for several years. Of Michigan children under age six that were tested for lead in 2005, approximately one of every 40 (2.4%) were found to have dangerously high levels of lead in their blood.

Lead poisoning can cause learning and behavioral problems, damage the brain, kidneys and nervous system, cause headaches and hearing loss. It can also result in premature birth and low birth weight for infants of exposed mothers as well as a decreased number of damaged sperm in affected men and boys,

There is no safe blood lead level. All children must be tested during this statewide initiative for better health.

March Outreach Services: Improving Preventive Health Appointment Scheduling

The importance of preventive health care has been widely discussed and heavily promoted in recent years. Building on this awareness, Molina Healthcare is now working with March Outreach Services (MOS) to improve healthcare outcomes by creating an active partnership between members and practitioners.

March Outreach Services assists Molina Healthcare members in scheduling appointments for certain

preventive health services such as well visit exams and immunizations. They speak to physician offices during a three-way conversation with the member to make sure the appointments are timely and convenient. Members also receive a “reminder” call from MOS prior to the scheduled appointment. This additional phone call decreases the likelihood of a missed appointment and can improve the efficiency of your office. March Outreach will also follow-up with your office staff

to confirm the appointment was kept and request lab and exam results for documentation.

We hope this collaboration of efforts between Molina Healthcare, our physician partners, and members, increases our members’ use of preventive services and improves their overall wellbeing. If you have questions, you may call March Outreach Services directly at **1-877-MARCH77 (1-877-627-2477)**.