

FCHP President and CEO Eric Schultz added, "It's exciting for us to support a program like this because it speaks directly to a critical health care issue for children and adolescents. The H.E.L.P. program is innovative and, since its inception over a year ago, has proven to achieve great results."

FCHP also awarded support to the **Youth Be Fit!** program of Malden Family Health Center.

Through *Youth Be Fit!*, Malden Family Health Center will work together with local schools and the Malden YMCA to prevent and treat childhood obesity through a multidisciplinary approach. The grant will be used to provide support for the initial development and testing of the program.

"Childhood obesity has exploded in the past 25 years," said Luis E. Palacio, M.D., program director of *Youth Be Fit!* "We feel there are many children at risk for obesity in the community who we are unable to reach through our practice alone."

"Together with the schools and YMCA we can identify children with obesity, or those who are at risk, and teach them the life skills and lifestyle needed to prevent adult obesity," noted Dr. Palacio.

Participants of the program will be able to choose from activities such as martial arts training, kayaking, indoor soccer, kickball and team building activities. "We want to focus on pleasurable aspects of exercise and team-building, and not on competition," Dr. Palacio added.

FCHP's Eric Schultz praised the program, saying, "As a multi-faceted, community-based program, *Youth Be Fit!* is sure to make a difference in the lives of our youth and, quite possibly, their families, too. We're proud to support it." ●

recordkeeping standards updated

FCHP has updated its medical recordkeeping standards to include the presence of a current medication list. Medical recordkeeping standards are located in our *Provider Manual*, available online at www.fchp.org/Extranet/Providers/Provider_Manual.htm. For a paper version of the standards, please contact our Quality and Health Services Department at 508-368-9101, Monday through Friday, from 8 a.m. to 5 p.m. ●



H.E.L.P – Pediatrics West

At the grant presentation were (left to right): Nicole Lian, FCHP Provider Relations Representative; Gerry Campbell, FCHP Contract Manager; Howard Flagler, Practice Administrator, Pediatrics West; Dan Concaugh, Esq., FCHP Vice President, Network Development and Management; Jessica Hennessey, C.P.N.P., Pediatrics West; and Larry Xanthopoulos, M.D., Pediatrics West



Youth Be Fit – Malden Family Health Center

At the grant presentation were (left to right): Sue Wilder, FCHP Provider Relations Representative; Brian Cox, Executive Director YMCA; Luis E. Palacio, M.D., Malden Family Medical Center; Joe Gravel, M.D., Medical Director, Malden Family Health Center

● let's connect!

preparing for the national provider identifier

The NPI is a unique health provider identifier that will simplify the administrative process for physicians, providers, health plans and clearinghouses. FCHP must be ready to accept and send the NPI as the primary provider identifier on standard electronic transactions **by May 23, 2007**. In preparation for this transition, we are asking all providers to notify FCHP when they receive their NPI. Please see *Connection* online for details.

epsdt services for masshealth members under 21

FCHP MassHealth providers are reminded that children, adolescents and young adults who are under 21 years old and are enrolled in MassHealth Standard—and now CommonHealth—are entitled to **Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services**. This requirement recently was amended to add CommonHealth members. If you require additional information about EPSDT services, please refer to your MassHealth *Provider Manual*. ●

mhqp soon to release 2006 clinical performance data

This winter, Massachusetts Health Quality Partners will release comparative data on clinical quality performance measures to Massachusetts physicians and health plans, as well as to the public.

MHQP is a nonprofit organization with an established record of providing actionable performance data for physicians and consumers in support of efforts to improve the quality of health care services delivered to Massachusetts residents.

MHQP has been sharing information on clinical quality performance measures with physicians and health plans since 2003 in its annual *Statewide Comparative Clinical Quality Report*. For the fourth year, this report will provide performance results for physicians that are based on HEDIS reporting measures. These measures are collected from MHQP-participating health plans and aggregated at the practice site, medical group and physician network levels.

Five of Massachusetts' largest health plans have collaborated with MHQP in this process, including Fallon Community Health Plan, Blue Cross Blue Shield of Massachusetts, Tufts Health Plan, Harvard Pilgrim Health Care and Health New England.

new measures

MHQP has added some new measures to its clinical reporting for both the SCCQR release of data and the public release. New to this year's SCCQR release are two measures on beta-blocker treatment after a heart attack and one measure for imaging studies for lower back pain. Three measures that were new to last year's 2005 SCCQR will be included in public reporting this year. They are colorectal cancer screening, appropriate treatment for children with upper respiratory infection and appropriate testing for children with pharyngitis.

public release of clinical data at the practice site level

In February 2006, for the first time, MHQP publicly released aggregated clinical performance results for 160 medical groups in Massachusetts. This year, MHQP will continue to publicly report at the medical group level. MHQP will not report individual physician results to the public.

For more information on MHQP and clinical quality reporting, please visit www.mhqp.org. ●

quality focus: helping you to help us

Fallon Community Health Plan is a member of the New England HEDIS Coalition, which includes health plans from throughout New England. Member plans share data and best practices in order to improve ease and accuracy of health care quality measurement.

In the spirit of cooperation, FCHP has lead the New England HEDIS Coalition in an effort to create a set of standardized Provider Abstraction tools to assist physician offices in supplying health plans with necessary HEDIS data. The three standardized forms created for the 2007 HEDIS season include **Colorectal Cancer Screening, Cervical Cancer Screening and Controlling High Blood Pressure**.

It is the hope of the New England HEDIS Coalition that physician offices will find the process of providing HEDIS data to health plans less cumbersome by having a unified form from all health plans. It is the goal of the coalition to standardize all HEDIS Provider Abstraction tools in future years. ●

coding corner

code updates

Please note these code changes, which go into effect **May 1, 2007**.

- **The following codes will no longer be covered:**

62287 – Aspiration or decompression procedure, percutaneous, of nucleus pulposus of intervertebral disk, any method, single or multiple levels, lumbar

62292 – Injection procedure for chemonucleolysis, including discography, intervertebral disk, single or multiple levels, lumbar

E0218 – Water circulating cold pad with pump

- **The following codes will be covered for Fallon Senior Plan™ members only:**

L8623 – Lithium ion battery for use with cochlear implant device speech processor

L8624 – Lithium ion battery for use with cochlear implant device speech processor, ear ●

new 2007 cpt/hcpcs codes

As mentioned in the January *Connection*, all new 2007 codes required preauthorization until a formal review was performed by Fallon Community Health Plan. We've now reviewed the 2007 CPT/HCPCS codes and some of them will continue to require preauthorization. They have added to the list of procedures that require preauthorization, *effective May 1, 2007*.

Please refer to the *Connection* online for the list of codes. ⓘ

billing bytes

claimcheck® software upgrade

In order for Fallon Community Health Plan to be up to date with new technology, we continually evaluate our software and make modifications to accommodate our payment methodology.

With this in mind, FCHP is upgrading ClaimCheck to version 39. This software is an automated method that helps us in the proper processing of claims and ensures consistent application of FCHP payment policies across all claims. Due to the upgrade, you may see *changes in reimbursement*. If you have any questions, please contact Provider Relations at 866-ASK-FCHP, press 4. ●

new cms-1500 claims form

The Centers for Medicare & Medicaid Services is implementing a revised Form CMS-1500. The new format of CMS-1500 (08-05) accommodates the use of the National Provider Identifier. FCHP began accepting this version on January 1, but the use of this new form is not required until April 2, 2007. During this transition time, FCHP will continue to accept both the older CMS-1500 (12-90) version and the revised CMS-1500 (08-05). For additional information, please log on to the CMS Web site at:

www.cms.hhs.gov/MLN MattersArticles/downloads/MM5060.pdf ●

script alert

albuterol changes in progress

All generic albuterol products, which contain chlorofluorocarbons, or CFCs, are being phased out by December 2008 under a U.S. Food and Drug Administration rule. Albuterol is a medication used to treat the symptoms of asthma and other lung diseases. CFCs are used extensively to help deliver the medication from generic albuterol inhalers to the lungs, but are considered harmful to the ozone layer.

A new, environmentally safe propellant, called HFA, has been introduced in all brand-name inhalers. As the supply of generic inhalers diminishes during the phase out, doctors will be switching their patients to a brand-name albuterol inhaler. **FCHP has added the brand-name product ProAir® HFA to our formulary as a Tier-2 drug.**

If you've begun to prescribe the HFA-containing albuterol, please prescribe ProAir HFA. The other products, Ventolin® and Proventil®, will remain Tier-3 drugs. ●

proton pump inhibitor use

PPIs are the number two medication used in health plans in the United States—and cost millions of dollars. Many patients who take PPIs could use the over-the-counter product, Prilosec OTC®. This version is the same 20 mg dosage as prescription Prilosec®, and is used in the same way. Most patients can take the OTC product, which at most retail centers costs \$19.99 for 28 tablets. This cost is a lot less than the \$150 cost of a one-month prescription. Please have your patients use the OTC product instead of the prescription product.

If Prilosec OTC can't be taken by a patient due to intolerance, the FCHP-preferred PPI is Prevacid SoluTab®. This is the most economical choice for both the patient and the health plan. ●

formulary updates

Fallon Community Health Plan has made several changes to its formularies, including changing prior authorization requirements and adding new medications. Please see these changes below to our commercial plan and our Medicare Part D formularies.

commercial plan formulary

additions

Azilect® (rasagiline)	Tier 3
Cesamet® (nabilone)	Tier 3, PA required
Chantix® (varenicline)	Tier 3, max 24 weeks per year
Exubera® (insulin, reg inhaler)	Tier 3, PA required
Fentora® (fentanyl, buccal tab)	Tier 3, PA required
Noxafil® (posaconazole)	Tier 3, PA required
Opana® (oxymorphone, IR)	Tier 3, PA required
Opana ER® (oxymorphone, extended release)	Tier 3, PA required
Oracea® (doxycycline, delayed release)	Tier 3, PA required
Solodyne® (minocycline, SR)	Tier 3, PA required
Zelapar® (selegiline, ODT)	Tier 3
Elaprase® (idursulfase)	PA required, Medical benefit
Lucentis® (ranibizumab)	PA required, Medical benefit
Vivitrol® (naltrexone)	PA required, Medical benefit

changes

Benicar® (olmesartan)	Tier 3 to Tier 2
Benicar HCT® (olmesartan/HCTZ)	Tier 3 to Tier 2
ProAir® (albuterol HFA, inhaler)	Tier 3 to Tier 2

new to market medication policy*

Tyzeka® (telbivudine)

* FCHP's New to Market Medication Policy was enacted to ensure patient safety and to allow for adequate time for the development, review and approval of clinical criteria. When a new medication first becomes available, it will fall under this policy and be excluded from coverage. A process is in place that allows for the quick review of provider requests for noncovered pharmaceuticals.

medicare part d formulary

additions

Azilect® (rasagiline)	Tier 3
Chantix® (varenicline)	Tier 3, max 24 weeks per year
Exubera® (insulin, reg inhaler)	Tier 3, PA required
Opana® (oxymorphone, IR)	Tier 3, PA required
Opana ER® (oxymorphone, extended release)	Tier 3, PA required
Oracea® (doxycycline, delayed release)	Tier 3, PA required
Solodyne® (minocycline, SR)	Tier 3, PA required
Zelapar® (selegiline, ODT)	Tier 3

changes

ProAir HFA® (albuterol, inhaler)	Tier 3 to Tier 2
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have you seen your
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Please pass this along to
the next person on the list.

Date received _____

Please route to:

- Office manager
- Physician
- Billing department
- Receptionist
- Referral site
- Other

get connected

connection online • march 2007

Your online supplement to *Connection* at

www.fchp.org/Extranet/Providers/Connection.htm contains:

- preparing for the national provider identifier
- new cpt/hcpcs codes for 2007

medical payment policies:

- *HLA testing payment policy*
- *Unlisted surgical procedures and services for physicians*
- *Unlisted surgical procedures and services for facilities*
- *Physical therapy assistant (PTA) payment policy*
- *Special services, procedures and reports payment policy*
- *Inpatient medical review and payment policy*
- *Coding analysis policy*
- *Ambulance service payment policy*

Connection is a bimonthly publication for all FCHP ancillary and affiliated providers. The next copy deadline is **March 1, 2007**. Send information to Lisa Mancini Peare, Fallon Community Health Plan, 10 Chestnut St., Worcester, MA 01608.

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