

Seniors not eligible for Medicare and those who do not have Medicare Part D, but have prescription drug coverage through an employer or union, can also apply for Prescription Advantage benefits.

Prescription Advantage enrollment forms are available from the Elder Affairs Web site at www.mass.gov/elders or by calling 1-800-AGE-INFO (1-800-243-4636). ●

masshealth requires standardized screening tool

In the summer 2007 issue of the *PCC Plan Quarterly*, MassHealth introduced a new requirement related to the behavioral health screening component of well-child care visits for children between birth and age 21. It is being implemented in response to a court case against MassHealth, called *Rosie D. v. Patrick*.

The requirement is that all primary care providers—including managed care organization (MCO) Primary Care Physicians (PCPs) and PCC Plan primary care clinicians (PCCs)—must use a standardized behavioral health screening tool when administering the behavioral health screen. Primary care providers must choose the standardized behavioral health screening tool from a menu of tools approved by MassHealth.

This new requirement will be implemented and explained in a forthcoming update to MassHealth's Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) regulations and an associated MassHealth transmittal letter.

The introduction of the standardized behavioral health screen is the first of several steps that MassHealth will be taking over the next several years to implement the court's decision in *Rosie D. v. Patrick*. We will share more information with you as MassHealth's implementation proceeds.

For more information, please see the article in *Connection* online, titled "Providing comprehensive well-child care visits." ●

empowering members with new wellness program

MassHealth is excited to introduce a new wellness program to our provider community. The program was initiated as part of the health care reform law, and is the result of collaboration among MassHealth, the Massachusetts Department of Public Health and other Executive Office of Health and Human Services agencies.

about the wellness program

Over 600,000 MassHealth member households have been sent a brochure encouraging them to take charge of their health through daily healthy lifestyle activities and by partnering with their health care providers through well visits.

The goal of the program, called **MassHealthy**, is to educate our members to take actions that lead to an improved quality of life. We're encouraging members to participate in preventive health care services, such as well-care visits, tobacco cessation services, and screenings.

This is the first phase of a wellness program that will encourage MassHealth members to engage in healthy actions in the areas of smoking cessation, diabetes and cancer screening for early detection, teen-pregnancy prevention and stroke prevention education. Please go to www.mass.gov/masshealth/wellness for more information.

how the plan affects you

Our providers play a critical role in the success of this program. As you may be a caregiver to MassHealth members, we need your help in spreading the word to patients about the benefits of a healthy lifestyle.

MassHealth issued its All Provider Bulletin 165* introducing this new program in June 2007. We recommend that providers review this bulletin, along with the copy of the wellness brochure, to become familiar with the program and be able to answer any patient questions.

* You'll find it at: www.mass.gov/Eeohhs2/docs/masshealth/bull_2007/all-165.pdf. ●



fchp's direct care network expands

Fallon Community Health Plan is pleased to announce the expansion of our FCHP Direct Care network. FCHP Direct Care offers the same benefits and plan designs as FCHP Select Care—only with a unique, concentrated network and a lower premium. Currently this network includes several providers in the Central Massachusetts region, including Acton Medical Associates, Charles River Medical Associates, Fallon Clinic and Southboro Medical Group.

Now, members enrolled in FCHP Direct Care also have access to providers in the Merrimack Valley and the North Shore regions, including:

- Lawrence General IPA (and Lawrence General Hospital)
- Lowell General Physician Hospital Organization (and Lowell General Hospital)
- Northeast Physician Hospital Organization (and Beverly Hospital, Addison Gilbert Hospital)

FCHP is committed to providing quality, affordable health care products to employers and individuals throughout the Commonwealth, and the FCHP Direct Care expansion is one way in which we are achieving that goal.

If you would like more information on FCHP Direct Care, please call our Provider Relations Department at 1-866-ASK-FCHP (1-866-275-3247), press 4. ●

summit eldercare opens in leominster

FCHP opened a third Summit ElderCare site this September at 55 Cinema Blvd. in Leominster that will accommodate up to 240 participants at full capacity. Summit already serves more than 400 participants at its Worcester and Charlton sites.

Summit ElderCare is a Program of All-inclusive Care for the Elderly (PACE)—one of only six in the state. The program for frail elders is an insurance, medical care and social support system in one convenient package, and often is considered as an alternative to a nursing home placement.

According to David A. Wilner, M.D., Medical Director of the program, “The unique aspect that makes Summit ElderCare successful is a team that brings its multiple disciplines and specialties to the goal of providing coordinated care to participants and their caregivers. Every aspect of geriatric care is included in the care planning for each participant.”

Participants at Summit ElderCare in Leominster will be under the care of Ashraf F. Elkerm, M.D., board certified in internal medicine, as primary care physician. Melvina M. Hutchins, A.P.R.N., C.A.N., B.C., R.N., is the Site Director and has overall responsibilities for managing the new Leominster facility.

For information, go to www.summiteldercare.org or call 1-800-698-7566. ●

new health insurance deadline pending

Under Massachusetts’ health care reform law, all residents (with few exceptions) must have health insurance in effect by the end of the year or lose their personal exemption on state income tax. Fallon Community Health Plan has a variety of affordable health insurance options for individuals of all ages. If you know individuals who need health insurance, please refer them to FCHP. They may call FCHP at 1-888-PWR-FCHP (that’s 1-888-797-3247) (TDD/TTY: 1-877-608-7677) on Monday through Thursday from 8 a.m. to 9 p.m. and Friday from 8 a.m. to 6 p.m., or visit us online at www.fchp.org. ●

quality focus: diabetes

As part of our ongoing commitment to quality, we’ll regularly highlight some of the HEDIS® measures on which we’re currently focusing. This edition of *Connection* highlights an established, but still very important measure—Comprehensive Diabetes Care. We ask your assistance in helping our members to improve their health by complying with these measures.

comprehensive diabetes care

This measure looks at members 18 to 75 years old and examines nine aspects of diabetes care as outlined.

HbA1c: Screening and control

1. Did the member have at least one HbA1c test performed in 2007?
2. Was the result of the most recent HbA1c considered to be in good control (< 7%)?
3. Was the result of the most recent HbA1c considered to be in poor control (> 9%)?

LDL-C: screening and control

4. Did the member have an LDL-C test performed 2007?
5. Was the result of the most recent LDL < 100mg/dL?

Eye exam

6. Did the member receive a retinal eye exam by an eye care professional (optometrist or ophthalmologist) in 2007 or did he/she have a negative exam (no evidence of retinopathy) in 2006?

Medical attention for nephropathy

7. Did the member have a screening test for nephropathy or have evidence of nephropathy (visit with a nephrologist, evidence of ACE inhibitor/ARB therapy or positive urine macroalbumin test) in 2007?

Blood pressure control (two measurements)

8. Is the most recent BP below 130/80?
9. Is the most recent BP below 140/80?

HEDIS® is a registered trademark of the National Committee for Quality Assurance. NCQA is an independent, not-for-profit organization that evaluates managed care organizations. ●

coalition simplifies credentialing process

Earlier this year, a major initiative was launched to simplify the provider credentialing and recredentialing processes.

Called the Massachusetts Physician Credentialing Initiative, the program was developed and implemented by HealthCare Administrative Solutions, Inc., a nonprofit corporation founded by Fallon Community Health Plan and several other health plans in the state to collaborate on administrative simplification solutions. This is its first major project. We’re proud to have Dan Concaugh, FCHP’s Vice President of Network Development and Management, now serving in the role of president of HCAS’ board of directors.

one application, one location

HCAS signed a contract with Ingenix, a national credentialing verification organization, which created a single point of entry for physicians to electronically submit a uniform credentialing application.

Now providers may complete the process once for several health plans. This approach saves time and money and reduces administrative costs for all involved. The **HCAS Provider Enrollment Form** is available at www.hcasma.org/word/HCAS_Enrollment_Form.doc. Or you can log on to HCAS by clicking on the link under “Resources” on the provider home page of our Website, www.fchp.org/providers.

The HCAS project is still in the early stages of implementation, and we look forward to working with you to make it a universal success. ●



health care reform product reference sheet

Fallon Community Health Plan is proud to have been chosen by the Commonwealth Health Insurance Connector Authority to participate in the two new programs developed as a result of health care reform legislation.

commonwealth care fchp direct care

Commonwealth Care is a program that connects qualified Massachusetts residents with affordable health insurance. Members enrolled in Commonwealth Care FCHP Direct Care have access to all contracted Direct Care network providers. There is no change in the Direct Care policy, procedures or rates associated with services provided to these members. Providers contracted with Direct Care will be reimbursed by FCHP.



- Specialty care must be directed through the PCP
- Copayments may apply
- Limited services, identified in the FCHP *Provider Manual*, as well as specialty care outside of the FCHP Direct Care network, require plan authorization
- No retroactive member disenrollment
- Members are NOT eligible for Peace of Mind Program™, Oh Baby! or infertility treatments

			
		Commonwealth Care Direct Care	
OV\$ 0	PE \$		
Rx	COPAY \$		
ER\$ 0	INP\$ NA		
NAME			
ID#		HCO FC	DB Y

commonwealth choice

Commonwealth Choice is available for Massachusetts residents who are above the income guidelines for Commonwealth Care. Six different plan designs with various levels of member cost sharing are available. Members can enroll in Commonwealth Choice directly through FCHP or through the Health Connector. FCHP's Commonwealth Choice products offer either Direct Care or Select Care networks. Policies, procedures and rates associated with services provided to FCHP Commonwealth Choice members are the same as those for any other Direct Care or Select Care member.

- \$0 copayment for routine physical exams
- All standard features and programs included
- Replaces the Independent Care product
- Young adult plan, 19-26 year olds (only Direct Care and only available through the Health Connector)

			
		<<plan name>>	
OV\$	PE \$		
Rx	COPAY \$		
ER\$	INP\$		
NAME			
ID#		HCO	DB

small group and individual market merger

Another aspect of the health care reform legislation is the merger of the individual and small group markets. FCHP is selling over 35 plan designs direct to individuals and small businesses. FCHP is offering Direct Care, Select Care, and Preferred Care, our PPO product, directly to consumers. Policies, procedures and rates associated with services provided to Direct Care, Select Care, and Preferred Care members are the same as those for any other Direct Care, Select Care, or Preferred Care member.

For more details on Massachusetts health care reform and all of the FCHP plan options available, please visit our Web site at www.fchp.org or call our Provider Relations Department at 1-866-ASK-FCHP, option 4, Monday through Friday from 8:30 a.m. to 5:00 p.m. ●

Note: Member ID cards will be transitioning from the PharmaCare logo to the CVS Caremark logo. Cards with either logo are valid.

fallon senior plan 2008 update

On October 1, Fallon Community Health Plan began to market its Fallon Senior Plan™ offerings for 2008. It's during this time of year that people who have Medicare can change their current health care coverage for a January 1 effective date.

Fallon Senior Plan is proud to be able to continue offering two \$0 premium plans, Fallon Senior Plan Saver and Fallon Senior Plan Value 1 (new name for our plan that was known as Fallon Senior Plan Value). And, we'll be adding a third \$0 premium plan (Fallon Senior Plan Value 2) in 2008. We feel it's important to continue to offer affordable options with comprehensive benefits.

Medicare beneficiaries who choose Fallon Senior Plan will receive more benefits than traditional Medicare, including health and wellness education, disease care services, dental care and chiropractic services, discounts on acupuncture and massage, the SilverSneakers® Fitness Program and Weight Watchers® at no additional cost beyond the monthly plan premium.

Fallon Senior Plan offers several HMO plans that differ in the amount of copayment a member will pay for services such as inpatient hospital care or a doctor's office visit. Members in our HMO plans must use doctors, specialists and hospitals in a defined network. We also offer a PPO plan, called Fallon Senior Plan Preferred Enhanced Rx, which allows members to go to doctors, specialists and hospitals in or out of the network. Higher costs may apply for out-of-network services.

prescription choices

In 2008, beneficiaries can choose between our two Rx options—Basic Rx and Enhanced Rx—or they can opt for a no Rx plan. The only difference in coverage between Basic Rx and Enhanced Rx is that Enhanced Rx does not include an upfront deductible. (Part D coverage also is included in Fallon Senior Plan Value 1 and Fallon Senior Plan Value 2.)

Please note: In 2008, we won't offer Fallon Senior Plan Plus Advanced Rx, but instead, as we did in 2006, we'll offer Fallon Senior Plan Plus Enhanced Rx.

fallon senior plan options in 2008 – monthly premiums

Fallon Senior Plan's no drug plans	premium
Fallon Senior Plan Saver	\$0
Fallon Senior Plan Standard	\$72
Fallon Senior Plan Plus	\$132
Fallon Senior Plan's drug plans	premium
Fallon Senior Plan Saver Basic Rx	\$28
Fallon Senior Plan Saver Enhanced Rx	\$47
Fallon Senior Plan Standard Basic Rx	\$100
Fallon Senior Plan Standard Enhanced Rx	\$119
Fallon Senior Plan Plus Basic Rx	\$160
Fallon Senior Plan Plus Enhanced Rx	\$179
Fallon Senior Plan Preferred Enhanced Rx	\$212
Fallon Senior Plan's drug plans for people enrolled in both Medicare and Medicaid/Medicare Savings program	premium
Fallon Senior Plan Value 1	\$0
Fallon Senior Plan Value 2	\$0

continued

2008 fallon senior plan

benefit	Fallon Senior Plan Saver plans	Fallon Senior Plan Standard plans	Fallon Senior Plan Plus plans	Fallon Senior Plan Preferred Enhanced Rx	Fallon Senior Plan Value 1	Fallon Plan Value 2
doctor office visits	\$15	\$15	\$10	In-network: \$15 Out-of-network: 20%	\$0 or \$5	\$0
specialist visits	\$20	\$15	\$10	In-network: \$15 Out-of-network: 20%	\$0 or \$5	\$0
inpatient hospital and mental health care for mental health care contact plan for details about benefits beyond 190 days	\$175 for days 1 to 3 \$0 for substance abuse care	\$125 for days 1 to 3 \$0 for substance abuse care	\$100 for each stay Separate \$300 out-of-pocket maximums for acute, rehabilitation, and mental health stays \$0 for substance abuse care	In-network: \$125 for days 1 to 3 \$0 for substance abuse care Out-of-network: 20% of the cost for each stay \$0 for substance abuse care	\$0 or \$100 for days 1 to 3 \$0 for substance abuse care	\$0
skilled nursing facility care	\$20 a day for days 1 to 20	\$20 a day for days 1 to 20	\$20 a day for days 1 to 20	In-network: \$20 a day for days 1 to 20 Out-of-network: 20% of the cost for each stay	\$0	\$0
same-day surgery	\$100 for each same-day surgical procedures	\$75 for each same-day surgical procedures	\$50 for each same-day surgical procedures	In-network: \$75 for each same-day surgical procedures Out-of-network: 20% of the cost for each same-day surgical procedures	\$0	\$0
ambulance services	\$50 \$200 out-of-pocket maximum	\$50 \$200 out-of-pocket maximum	\$50 \$200 out-of-pocket maximum	In-network and out-of-network: \$50 \$200 out-of-pocket maximum	\$0 or \$50 \$200 out-of-pocket maximum	\$0
emergency care	\$50 (waived if admitted to the hospital within 72 hours for same condition) worldwide coverage	\$50 (waived if admitted to the hospital within 72 hours for same condition) worldwide coverage	\$50 (waived if admitted to the hospital within 72 hours for same condition) worldwide coverage	In-network and out-of-network: \$50 (waived if admitted to the hospital within 72 hours for same condition) worldwide coverage	\$0 or \$50 (waived if admitted to the hospital within 72 hours for same condition) worldwide coverage	\$0 worldwide coverage

