

Network News

FOR HEALTHCARE PROFESSIONALS IN THE VCHCP PROVIDER NETWORK

What's New?

Legislation of Interest

As of July 1, 2012, California legislation has expanded the role that health plans are involved in the diagnosis and treatment of pervasive developmental disorders including autism and autism spectrum disorders - ICD-9 codes 299.0 – 299.9. This requires health plans to provide to our members Applied Behavioral Analysis services. ABA is the science of human behavior that is based on the learning theory of behaviorism which postulates that all behavior that can be observed and measured is caused by external stimuli, without regard for feelings and internal states, creating a “stimulus-response” relationship for the learner.

Treatment approaches based in this science utilize the principles of ABA to systematically design, implement and evaluate environmental modifications to improve human behavior in a socially significant manner such that the individual is more fully able to function in their environment.

For many years this treatment was considered educational and was not covered by most health plans. The Ventura County Health Care Plan in consultation with providers of ABA has developed policies for referral for ABA and also for approval to begin ABA Treatment, to continue treatment and to discontinue treatment. Those policies are available on the Plan's Website www.vchealthcareplan.org. The VCHCP is also case managing all of our members with these diagnoses. The Plan's case manager is Anita Smith, RN.

Unlike all other mental health services covered by the VCHCP, ABA is provided by professional therapy practices directly contracted by the Health Plan and requests for this treatment should be sent to the utilization department of the Plan rather than by accessing the Plan's mental health provider Life Strategies (Optum Behavioral Health).

Complex Case Management Program

VCHCP is happy to announce the implementation of our Complex Case Management (CCM) Program in the 2nd Quarter of 2012. CCM is a program designed to assist with the coordination of health care benefits for individuals who have complex or chronic care needs such as members with diabetes/asthma with co-morbidities and multiple diagnoses; members who had organ transplantation; members with diagnosis of cancer, cystic fibrosis and others. The components of the CCM program include identification of members likely to benefit from CCM services, engagement of the healthcare team involving members in all aspects of CCM process and measuring outcomes to validate effectiveness of the CCM program. A nurse case manager who is assigned to the specific member develops a case management plan to help meet the needs of the member using available benefits and resources.

Our case management program is designed to enhance the physician-patient relationship. A nurse case manager is available to help support the physician's prescribe treatment plan by assisting the patient better understand his/her disease, identify and overcome barriers to adherence, develop a goal directed care plan to support the physician's prescribed treatment plans and work collaboratively with the physician to coordinate requested services using available benefits and resources for the patient.

Most of our Docs Use Epocrates

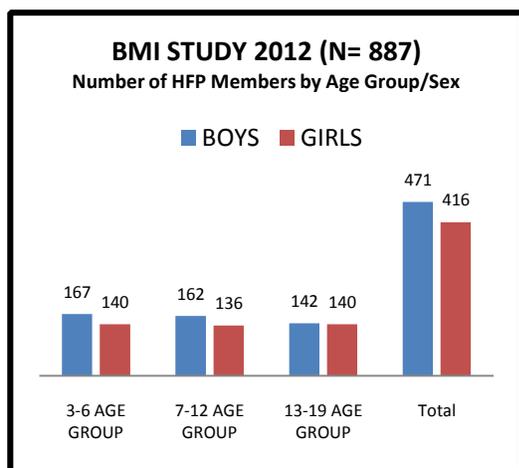
For VCHCP's drug formulary only, total monthly lookups in 2011 averaged about 600. Now in 2012, the average monthly lookups has increased close to 1700.

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VCHCP Obesity Prevention Program–BMI Study Update

VCHCP launched its' Obesity Prevention Program for the Healthy Families Program (HFP) in March 2012. A BMI study was initiated to gather baseline data on the current health status of the VCHCP HFP population. Three HFP age-range specific study groups were randomly selected using HEDIS sampling methodology. Based on the study groups, 54 HFP Provider's were asked to participate in a BMI study. VCHCP requested each HFP provider or clinic group to provide: 1) Current weight and height for identified members; 2) BMI and; 3) If BMI percentile is recorded.



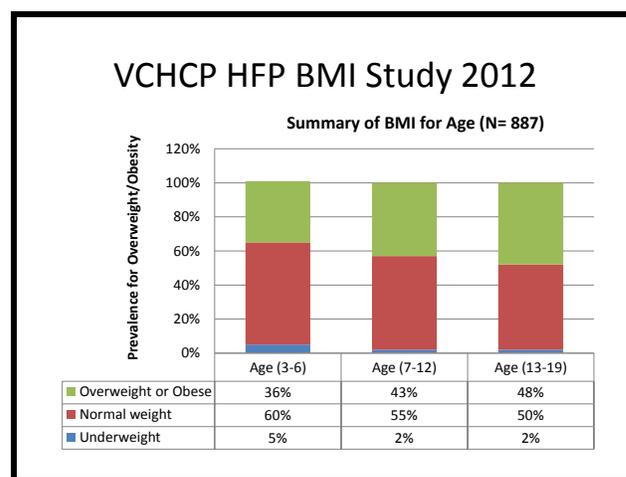
Forty-five (45) providers/clinics returned completed data, with an 83% response rate. Children's heights and weights were entered into a BMI database that calculates BMI and BMI percentile. Seventy-two (72) percent of the data was utilized in the study analysis (See BMI Study table above.)

The majority of Providers/Clinic (74%) record BMI percentile on the medical record based on survey results.

Noting BMI percentiles on patient records provides an opportunity to identify early risk factors in young

children and provides a tool to demonstrate to parents how their child is developing compared to other children by "BMI-for-age." Discussing "BMI-for-age" is a method to start a conversation with parents on healthy lifestyles and provides an opportunity to discuss concerns and offer support.

BMI STUDY RESULTS



The VCHCP HFP early childhood study group (ages 3-6) demonstrates 35% fell within the > 85th percentile for overweight/obese category. An increase by 8% is noted among the middle childhood study group (ages 7-12) which 43% fell within the > 85th percentile for overweight/obese category. The adolescent study group revealed 48% fell within the > 85th percentile for overweight/obese category.

The data demonstrates a gradual increase in overweight and obesity category rates among both boys and girls from early childhood through late adolescence.

This evidence is significant and corresponds to the current rates of childhood overweight and obesity in California and the Nation.

Direct Specialty Referral

In January 2011, The Ventura County Health Care

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Plan greatly expanded the specialties available for direct referral. This has been very successful for the Plan, the providers and the members. It has streamlined the referral process and allowed the Plan to deal with a large increase in membership, without causing any overutilization problems. Some reminders about the process:

1. The Plan would like to make the providers aware that the Plan occasionally receives calls from members confused about how the appointment is to be made. The direct referral appointments can either be made by the referring doctor or by the patient. When making a direct referral please make it clear to your patient who is responsible for making the appointment.

2. We would also like to remind the providers that the direct referral process is only to be used for the adult commercial patients in the Plan. Direct referrals of pediatric members are problematic because of cross coverage of many of the pediatric patients by another insurance.

3. The Plan is required to provide appointments within a specific time frame. Those time frames are:

Non-urgent – 15 business days

Urgent – 48-96 hours

If there would be no compromise of care to your patient if these time frame are not met, please check the box on the referral form that it is permissible to go past these time limits. In addition, if you become aware that your patient cannot get an appointment within an acceptable time limit please contact the Plan so that we can make the appropriate arrangements for timeliness of care.

Other Items of Interest

The following is a list of new medications that require prior authorization from the Ventura County Health Care Plan (VCHCP). The Plan's Pharmacy & Therapeutics Committee approved these prior authorization drug guidelines in 2012. The guidelines are located in the Plan's website:

<http://www.vchealthcareplan.org/providers/priorAuthDrugGuidelines.aspx>

Ampyra, Avastin, Benlysta, Calcium Folate, Cortifact, Docetaxel, Effient, Elelyso, Erivedge, Eylea, Gammagard, Gamumex C, Gemcitabine, Gilenya, Infed, Inlyta, Isentress, Jakafi, Kalydeco, Korlym, Lipodox, Makena, Nulojix, Omontys, Perjeta, Promacta, Qsymia, Testopel, Vandetanib, Victrelis, Votrient, Yervoy, Ziagen, Zytiga.

Disease Management Program (Diabetes and Asthma)

VCHCP implemented our Diabetes and Asthma Disease Management Program in the 2nd quarter of 2012. This is a population based approach to the clinical and quality management of this chronic condition. This approach identifies members with Diabetes and Asthma, and through the use of disease-specific interventions, attempts are made to alter the course of the disease.

Program components include mailed educational materials, telephonic enrollee education and care coordination. Enrollees with complex issues or need more intense interventions are referred to the nurse case manager.

Injectable Anti-Psychotic Medications

Through the Plans collaboration with Optum Behavioral Health (Life Strategies) it was identified that there may be a benefit to our members if there was increased availability of long acting injectable antipsychotic medications for preventing relapses. We have worked with Optum Behavioral Health to identify psychiatrists who will prescribe and give these medications.

In addition, there are psychiatrists who may feel that

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there is a need for injectable antipsychotic medications but they do not do injections in their office. Some of our providers give therapeutic injections in their office and I would encourage them to work with the psychiatrist to give these medications in the primary care office. The medications that are available on the Plan Formulary are Risperdal Consta, Haldol, Fluphenazine Dec. and Zyprexa Relprev. The psychiatrist would need to prescribe the medication and with prior coordination with the primary doctor, the patient would bring the medication to the primary doctor's office for the medication to be given.

Standing Referral Policy

A standing referral allows a member to see a specialist or obtain ancillary services, such as lab, without needed new referrals for each visit. Members may request a standing referral for a chronic condition requiring stabilized care. The member's primary care physician will decide when the request meets the guidelines outlined below.

1. A standing referral may be authorized for the following conditions when it is anticipated that the care will be ongoing:

- Chronic health condition (Diabetes, COPD etc.)
- Life-threatening mental or physical condition etc
- Pregnancy beyond the first trimester
- Degenerative disease or disability
- Radiation treatment
- Chemotherapy
- Allergy injections
- Defibrillator checks
- Pacemaker checks
- Dialysis/end-stage renal disease
- Other serious conditions that require treatment by a specialist

2. The number of visits authorized must be sufficient to cover the duration of the condition. A standing referral is limited to 6 months but it can be

reviewed as needed. Renewals of standing referrals must be done every six months.

3. Members who change clinics will need to check their standing referral with their new primary care physician. Changing clinics may change the specialist to whom the member's primary care physician makes referrals.

4. Additional information regarding Standing Referral is located in our website: <http://www.vchealthcareplan.org/providers/providerindex.aspx>.

Provider Satisfaction Study

The Ventura County Health Care Plan contracts with an independent firm to do provider satisfaction surveys on a regular basis. The firm that is used is the Meyers Group. The most recent survey was done in the spring of this year (2012) and VCHCP did very well. The overall satisfaction with the Ventura County Health Care Plan was 93.7%. This placed in the 90th percentile. Other plans surveyed by this group scored on average 71.7%. Although the Plan did well overall, there are services that we would like to improve. These are: Timeliness of obtaining inpatient authorization services; The Health Plan's administration of the PCP's referrals to a specialist; timeliness of obtaining outpatient authorization of services.

The Health Plan's Administration of the PCP's Referrals to a Specialist: The Plan would like you to know that we heard your feedback in the survey. As a result of the survey, VCHCP has developed/implemented interventions such as:

- The Plan sent an e-mail to all PCP office managers to clarify that VCHCP's Direct Specialty Referral applies to Commercial adult members only.
- A copy of the Direct Specialty Referral Policy was sent to all PCP office managers clarifying the direct specialty referral and VCMC referral processes.

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- An updated Direct Specialty Referral form (with addition of "Adult" members only) was sent to the PCP office managers.

Timeliness of Obtaining Inpatient Authorization of Services & Timeliness of Obtaining Outpatient Authorization of Services: On a quarterly basis, the Plan receives approximately 5,000 treatment authorization requests, of which 553 (11%) are for emergent/urgent requests; 3,818 (76%) are for routine (non-urgent) requests and 629 (13%) are for retrospective requests. The Plan monitors the turnaround time of treatment authorization requests received on a daily basis. We are almost at 100% compliance in the timeliness of processing requests, and our goal is to meet 100% compliance.

VCHCP Medical Necessity Review Criteria

VCHCP Utilization Management utilizes Milliman Care Guidelines, VCHCP Medical Policies and VCHCP Prior Authorization Drug Guidelines as criteria in performing medical necessity review. You can view our VCHCP Medical Policies in our Website:
<http://www.vchealthcareplan.org/providers/medicalPolicies.aspx>.

Due to proprietary reasons, we are unable to post the Milliman Care Guidelines in our website, but hard copies of the guidelines can be provided as requested.

You can view our Prior Authorization Drug Guidelines in our website:
<http://www.vchealthcareplan.org/providers/priorAuthDrugGuidelines.aspx>

HEDIS Quality Reporting

VCHCP is happy to inform you that there were some improvements in our 2011 HEDIS preventive

health services result namely: Adolescent Well Child Visits, Appropriate Treatment for Children with Upper Respiratory Infection and Appropriate Testing for Children with Pharyngitis. The Plan performed several interventions in 2011 including preventive health reminder letters to our members, focus member phone calls and collaborating with our providers to recall members for preventive health appointments. We thank you for all your efforts in ensuring that are members receive quality care. In 2012, we continue to implement member focused interventions and provider collaboration as there continues to be room for improvement.

VCMC Network Update

New to the Network!

Todd Monroe, M.D., an OB/GYN physician, has joined Clinicas Del Camino Real - Meta in Oxnard, effective June 2012.

Forrest Hsu, M.D., a neurosurgeon, has joined Anacapa Neuroscience Center in Ventura, effective July 2012.

Helen John-Kelly, M.D., a pediatric gastroenterologist, has joined Pediatric Diagnostic Center in Ventura, effective July 2012.

Drew Kelts, M.D., a pediatric gastroenterologist, has joined Pediatric Diagnostic Center in Ventura, effective July 2012.

Iona Sylvester, M.D., an internal medicine physician, has joined Clinicas Del Camino Real - North Oxnard and Simi Valley, effective July 2012.

Alejandro Andrade, M.D., a family medicine physician, has joined Magnolia Family Medical Clinic in Oxnard, effective August 2012.

Ryan Bowman, M.D., a urologist, has joined Anacapa Urology Clinic in Ventura, effective August 2012.

Darren Bray, M.D., a pediatrician, has joined Mandalay Bay Women & Children's Medical Group in Oxnard, effective August 2012.

Stephanie D'Augustine, M.D., a pediatrician, has joined Santa Paula West Pediatric Clinic, effective August 2012.

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Seong Kang, M.D., a family medicine physician, has joined Conejo Valley Family Medical Group in Thousand Oaks, effective August 2012.

Shadi Al Khatib, M.D., a pediatrician, has joined Clinicas Del Camino Real - El Rio & Maravilla in Oxnard, effective August 2012.

Udit C. Kondal, M.D., a family medicine physician, has joined Clinicas Del Camino Real - Meta in Oxnard, effective August 2012.

Robert Levin, M.D., a pediatrician, has joined Santa Paula West Pediatric Clinic, effective August 2012.

Connie J. Li, M.D., a pediatrician, has joined Clinicas Del Camino Real - El Rio & North Oxnard, effective August 2012.

Anagha Suresh, M.D., a pediatrician, has joined Clinicas Del Camino Real - North Oxnard, effective August 2012.

Derek Wong, M.D., a pediatric clinical geneticist, has joined the Pediatric Diagnostic Center in Ventura, effective August 2012.

Michelle Yates, M.D., a family medicine physician, has joined Conejo Valley Family Medical Group in Thousand Oaks, effective August 2012.

Niloofer Farmani, M.D., a rheumatologist, has joined Conejo Valley Family Medical Group in Thousand Oaks, effective October 2012.

Ellie E. Rogers, D.O., an OB/GYN physician, has joined Clinicas Del Camino Real - Moorpark, effective October 2012.

Robert Ryan III, M.D., a pediatrician, has joined Clinicas Del Camino Real - Maravilla in Oxnard, effective October 2012.

Olga Thorne, M.D., an OB/GYN physician, has joined Clinicas Del Camino Real - North Oxnard, effective October 2012.

New Facilities!

Clinicas Del Camino Real has opened two new clinics, one in Simi Valley at 1424 Madera Road and the second in Moorpark at 4279 Tierra Rejada Road.

New Clinical Laboratory Draw Sites!

Quest Diagnostics, Inc. in Camarillo at 500 Paseo Camarillo #103 and Ventura at 7880 Telegraph Road Suite. D.

Change of Facility Name

Camarillo Imaging Center has changed their name to Rolling Oaks Radiology - Camarillo, effective November 2012.

Ventura Coast Imaging Center has changed their name to Rolling Oaks Radiology - Ventura, effective November 2012.

Change of Locations

David R. Hantke, M.D., an ENT, has left Ventura Ear, Nose, and Throat Associates and has opened his own practice in Ventura, effective July 2012.

Lisabeth Carlisle, M.D., a family medicine physician, has left Santa Paula Hospital Clinic and has joined Magnolia Family Medical Clinic in Oxnard, effective August 2012.

Eric Leibovitch, M.D., an internal medicine physician, has left Academic Family Medical Clinic in Ventura, effective August 2012 but continues to work out of Magnolia Medicine Specialty Center East in Oxnard.

Pamela Holbrook, D.O., a family medicine physician, has transitioned from the Conejo Valley Family Medical Group to the Conejo Valley Urgent Care Center, effective September 2012.

Leaving the Network

Johannes Ramirez, M.D. has left Clinicas Del Camino Real - El Rio and North Oxnard, effective June 2012.

Marvin Ament, M.D. has left Pediatric Diagnostic Center in Ventura, effective July 2012.

Rashmi Menon, M.D. has left the Hematology/Oncology Clinic & Infusion Center in Ventura, effective July 2012.

Alexander Bove, M.D. has left Las Islas Diabetes Clinic in Oxnard and Pediatric Diagnostic Center in Ventura, effective August 2012.

David Ziring, M.D. has left Pediatric Diagnostic Center in Ventura, effective August 2012.

Albert E. Amorteguy, M.D., has left the Plan, effective October 2012.

Lourdes Trazo-Lazatin, M.D., has left Clinicas Del Camino Real - Maravilla, North Oxnard, and Ocean View, effective October 2012.