



Provider Bulletin



A bulletin for the Molina Healthcare of Ohio Medicaid network • March 2012

Molina Healthcare Partners with March Vision to Improve Members' Vision Care

Primary care providers (PCPs) play a vital role in all the care their patients receive, including their vision care. Molina Healthcare of Ohio, Inc. has partnered with March Vision, Molina Healthcare's contracted routine vision network provider, in an effort to improve the consistency of glaucoma and diabetic retinopathy screenings for our members.

March Vision providers will receive a list of Molina Healthcare members that they have seen within the last three years, and a March Vision provider may call members on the list and schedule appointments with your patients for the indicated services throughout 2012.

March Vision providers can be found at www.marchvisioncare.com/find.aspx.

Together, we can ensure your patients are getting the care they need and provide the quality care they have come to expect from you and Molina Healthcare. For more information about this program, please call Provider Services at 1-800-642-4168.

HEDIS® Wellness Report

Molina Healthcare uses Healthcare Effectiveness Data and Information Set® (HEDIS) rates to monitor the preventive services members receive. These rates are shared with contracted providers in an effort to find opportunities to improve the utilization of preventive care.

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)

Best Practice

The United States health care system spends more than \$1.1 billion annually on unnecessary antibiotic prescriptions for adults with respiratory infections. Acute bronchitis is common for antibiotic misuses and is the ninth most common illness among outpatients according to U.S. physicians. The appropriate use of antibiotics will reduce the resistance of antibiotics, which will preserve the future use of antibiotics.

Wellness Report

Molina Healthcare annually monitors the percentage of members 18-64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription during the calendar year.

HEDIS® Measure	2009 Rate	2010 Rate	2011 Rate	Goal*
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis	16.08%	15.72%	17.48%	29.00%

Appropriate Testing of Children with Pharyngitis (CWP)

Best Practice

Acute pharyngitis accounted for an estimated 15 million outpatient visits in 2006. Medical costs of group A streptococcal pharyngitis ranges from \$224 to \$539 million among children each year in the U.S. The

availability of rapid streptococcal tests will significantly reduce the antibiotic prescription rate by nearly 50% and reduce the unnecessary prescription of antibiotics.

Wellness Report

Molina Healthcare annually monitors the percentage of members 2-18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode during the calendar year.

HEDIS® Measure	2009 Rate	2010 Rate	2011 Rate	Goal*
Appropriate Testing of Children with Pharyngitis	63.44%	62.85%	62.38%	76.00%

Appropriate Treatment for Children with Upper Respiratory Infection (URI)

Best Practice

The overuse of antibiotics has led to the strain of diseases that are becoming resistant to the medication, making it difficult to treat patients. Doctors prescribe antibiotics 62% of the time if they perceive parents expect them and 7% of the time if they feel parents do not expect them. Education and adherence for the appropriate use of antibiotics is the key to preventing the overuse of antibiotics.^{1,2}

Wellness Report

Molina Healthcare annually monitors the percentage of members 3 months to 18 years of age who were given a diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic treatment during the calendar year.

HEDIS® Measure	2009 Rate	2010 Rate	2011 Rate	Goal*
Appropriate Treatment for Children with Upper Respiratory	79.71%	79.42%	81.29%	92.00%

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

* National NCQA 75th percentile for Medicaid HMO plans.

Improvement Strategies for Providers

- Provide appointment reminder calls or postcards to help ensure that patients do not miss scheduled appointments.
- Utilize flow sheets to promote better adherence to guidelines when it comes to assessing and treating acute bronchitis, pharyngitis or upper respiratory infection at each visit.
- Effective education can encourage patient satisfaction that is not dependent upon receiving an antibiotic prescription.
- Educate patients on the effectiveness of antibiotics, how they relieve symptoms and the actions to take if the symptoms worsen.
- Antibiotic treatment is only needed when a rapid strep screen and a throat culture is positive.
- Inform patients that antibiotic use increases the risk of an antibiotic-resistant infection.
- Explain safe home remedies and appropriate over-the-counter medications that may offer symptom relief.

¹ Lucile Packard Children's Hospital at Stanford. 2011. Upper Respiratory Infection (URI, or Common Cold). <http://www.lpch.org/DiseaseHealthInfo/HealthLibrary/respire/uricold.html> (June 1, 2011).

² Centers for Disease Control and Prevention. 2011. Get Smart: Know When Antibiotics Work. Facts About Antibiotic Resistance. <http://www.cdc.gov/getsmart/antibiotic-use/fast-facts.html#ref2> (May 26, 2011).

Tools Available

- Molina Healthcare provides **Preventive Health Guidelines** and **Clinical Preventative Guidelines** for the treatment of children and adults, and **HEDIS Coding Help Sheets** for Adults and Children that provide a description of recommended preventive services and coding requirements. Find them at www.MolinaHealthcare.com/medicaid/providers/oh/resource/pages/guide_prevent.aspx.
- Visit the American College of Physicians at www.acponline.org/clinical_information/journals_publications/ecp/mayjun01/gonzalez.htm.
- Visit the American Academy of Family Physicians at www.aafp.org/afp/2009/0301/p383.html.

How Well Doctors Communicate

The annual CAHPS[®], Consumer Assessment of Healthcare Providers and Systems, survey measures members’ satisfaction with their health care and their health plan. One area of satisfaction that is measured is how well doctors communicate with members in efforts to improve the level of quality. The survey questions related to how well doctors communicate are:

- In the last 12 months, how often did your personal doctor explain things in a way that was easy to understand?
- In the last 12 months, how often did your personal doctor listen carefully to you?
- In the last 12 months, how often did your personal doctor show respect for what you had to say?
- In the last 12 months, how often did your personal doctor spend enough time with you?

On a composite 3-point scale, the provider survey question and results are:

CAHPS[®] Measure – How Well Doctors Communicate	2009 Result	2010 Result	2011 Result	75th Percentile	90th Percentile
Adult (Combined ABD & CFC)	2.50	2.53	2.52	2.58	2.64
Child	2.64	2.71	2.71	2.70	2.73

CAHPS[®] is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

By taking the steps to improve communication, you can help us improve member satisfaction rates. Good communication enhances relationships and patient satisfaction so that members have a good understanding and will be encouraged to participate in managing their care. We appreciate all you do to address your patients’ health care needs so their health care experience is a positive one.

Payment Reminders related to Preventive Well Exams

Molina Healthcare wants to educate our female members about the importance of annual preventive care appointments with their obstetrical/gynecological provider. As a reminder, the following are two important payment guidelines related to preventive visits:

- Molina Healthcare will pay for preventive services even if it has not been 12 months (a full year) since the last service. This is a calendar year benefit vs. a rolling year benefit.
- Molina Healthcare will pay for a preventive care visit and an OB/GYN visit for the same member on the same date of service if the diagnosis codes billed support payment of both codes.

Services required during an adolescent well exam that should be documented in the medical record are:

- A health and developmental history (physical and mental)
- A physical exam
- Health education/anticipatory guidance

For additional resources and to download an OB/GYN Service Coding Guide, visit our website. Select Providers, Ohio, [Forms](#).

Fighting Fraud, Waste and Abuse

Proper member identification is vital to reduce fraud, waste and abuse (FWA) in government health care programs. The best way to verify a member's identity is by obtaining a copy of the member's ID card and a form of picture ID. This is especially important for members that are not established within your practice or may be seeking emergency care. If a photo ID cannot be provided, another way to determine the patient's identity is to confirm the member's age by asking their date of birth. Together we can help prevent and deter FWA.

Join our Email Distribution List and Connect with Us

If you prefer to receive this bulletin via email, please email us the provider group name, TIN, service location address, contact name, contact phone number and email address at ProviderServices@MolinaHealthcare.com.

Connect with Us. Molina Healthcare is on Facebook and Twitter. Like us at www.facebook.com/MolinaHealth and follow us at www.twitter.com/MolinaHealth. Email us your Facebook URL and Twitter handle at ItMatters@MolinaHealthcare.com so we can like your Facebook page and follow you on Twitter, too.

Questions?

If you have any questions, please call Molina Healthcare's Provider Services at 1-800-642-4168. Representatives are available to assist you from 8 a.m. to 5 p.m. Monday through Friday.