



Health Plus news provider

Your community's guardian
angel since 1984

Case Management

A 14-year-old boy's story of success

Case management works to provide members with the services they need, particularly in complex situations, as illustrated by the following story:

A 14-year-old boy became paralyzed after a severe neck injury sustained in a car accident and subsequently developed a cyst on his spine. He was referred to case management and received DME (durable medical equipment, such as a tub bench and wheelchair), visiting nurse services, physical therapy, and social work support, all arranged by his case manager in conjunction with his primary care physician (PCP).

After only six weeks in case management, this member was well enough to begin classes at one of New York City's top high schools.

Take advantage of

Case and Disease Management

Health Plus' case and disease management programs are designed to be useful adjuncts to physician care and treatment, and to help members become more self-reliant in the management of their health care.

While disease management involves broad-based educational and public health interventions designed to improve knowledge and self care among large groups of chronically ill members, case management is reserved for members with severe acute or complex chronic conditions.

Case management requires the coordination of services and an active partnership between the member, his or her primary care physician (PCP), and a Health

Plus case manager (a registered nurse or certified social worker).

These services help members become more proactive in managing their own health care, thus reducing the need for excessive office or costly emergency room visits, saving time and money, and reducing the burden on the health system.

Providers can help patients benefit from these important services by calling **1-718-630-0123** for medical referrals or **1-800-727-0910** for behavioral health referrals.

Alternatively, case and disease management referral forms are available online at www.healthplus-ny.org/providers.

See the chart on page 2.



Refer smokers
to our **FREE**
& **CLEAR** Smoking
Cessation Program at
1-888-743-3508.



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See the chart on page 2.

let us know...

... if you move!

Fax your address
changes to:
1-718-504-9602
or e-mail to:

providers@healthplus-ny.org

Health Plus

205 Montague, Third Floor
Brooklyn, NY 11201

ADDRESS SERVICE REQUESTED

Presorted Standard
U.S. Postage
PAID
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Permit No. 1066

moving?

You can help fight obesity

Close to 1 million New Yorkers are now obese, according to the New York City Department of Health and Mental Hygiene. Obesity is defined as a BMI (body mass index= $\text{wt}[\text{lb}]/\text{ht}[\text{in}]^2 \times 703$) of 30 or higher. Sedentary lifestyle, a high consumption of processed foods, and a low consumption of fruits and vegetables are three chief reasons cited for this alarming trend.

Although the risk of obesity increases with age, it also begins early. For weight assessment in children ages 2 and older, the Centers for Disease Control and Prevention (CDC) now recommends the use of the BMI-for-age charts, rather than the standard weight-for-stature charts. The charts and further information about their use and interpretation can be obtained on the

CDC's Web site at www.cdc.gov/growthcharts.

Studies show that succinct advice about diet, exercise, and lifestyle provided by physicians can be a powerful motivator for change among patients.

Here are some basic weight management recommendations from the City Health Department:

Adults should:

- Keep their BMIs below 25.
- Increase physical activity—even to modest levels, such as 30 minutes of brisk walking, bicycling, or household chores, at least four days per week (the 30 minutes can be broken up into two or three segments during the day).
- Eat at least two servings of vegetables and three servings of fruit each day.
- Eat less fast food and prepare smaller, healthier meals at home.

For children, parents should:

- Reduce television viewing.
- Encourage active playtime.
- Reduce soft drink and fast food consumption.
- Have healthy snacks available, such as fruits and vegetables.
- Replace whole milk with low-fat or skim milk for children older than 2.

Health Plus' panel includes nutritionists who can provide in-depth dietary and lifestyle counseling to members. To refer a member for this service, please contact Health Services at **1-718-630-0123**. Referral forms can also be found on our Web site at www.healthplus-ny.org/providers.

For more information on weight control, diet, and physical activity, visit the Health Plus Web site at www.healthplus-ny.org/providers/education/links/index.shtml.

Case and Disease Management Services

	Case Management	Disease Management
Members targeted	Members with severe acute or complex chronic conditions, such as: HIV or AIDS; organ transplants; renal failure; high-risk pregnancy; neonatal ICU; trauma with multiple disabilities; asthma with high admissions; diabetes with a HgbA1c>9; severe behavioral health problems.	Members with the following chronic conditions: asthma; coronary artery disease; diabetes; depression. Disease management recommendations are based on established clinical guidelines. Smoking cessation and weight management education are also available as needed to members admitted into disease management.
Interventions	<i>Intensive.</i> Each member is assigned an individual case manager (a registered nurse [R.N.] or certified social worker [C.S.W.]) who performs an in-depth assessment and works closely with the member and his or her primary care physician (PCP) to coordinate a variety of care and support services.	<i>Limited.</i> Member is asked to fill out a health risk assessment and, based on his or her responses, is assigned to an appropriate level of health education. The R.N.'s periodic follow-up with the member can include educational mailings, DME (durable medical equipment), home visits, specialist referrals as needed, and letters to the member's PCP.
Contact with provider	<i>Frequent.</i> Depends on acuity level, but the case manager communicates frequently with the member's PCP, specialists, and allied health providers in order to coordinate care and services.	<i>Infrequent.</i> The disease manager sends periodic letters to the PCP updating the member's status, level of compliance, and current health education needs. Depending on acuity level, recommendations for follow-up intervention are made, and members are encouraged to visit their PCPs for care as needed.

Remember to submit your claims for immunizations and lead screening.

N.Y. asthma guidelines

In fall 2003, the New York State Consensus Asthma Guideline Expert Panel, in which Health Plus participated, released updated clinical guidelines for the diagnosis, evaluation, and management of children and adults with asthma. The guidelines are organized under the four key components considered to be the most important for long-term control of asthma:

- Assessment and monitoring.
- Pharmacological therapy.
- Control of environmental and co-morbidity factors.
- Patient education.

Laminated pocket or full-page-size copies of the guidelines include the following charts:

- Stepwise approach for managing infants and children under 5 with acute or chronic asthma.
- Stepwise approach for managing asthma in children older than 5 and adults.
- Usual dosages for long-term control medications (inhaled corticosteroids).
- Usual dosages for other long-term control medications.

Copies of the guidelines can be obtained on the Web at www.health.state.ny.us/nysdoh/asthma/pdf/clinical_guidelines_2003.pdf or by writing to:

NYS Department of Health Publications
P.O. Box 2000
Albany, NY 12220

If writing, specify the publication number (pocket version: No. 4750; full-page version: No. 4751) and quantity desired (up to 200).

We're first in quality

The most recent (2003) *Consumer's Guide to Medicaid Managed Care in New York City* gives Health Plus the highest overall quality rating in the city and ranks the plan and its providers as above average in:

- Overall access and service for both adults and children.
- Percentage of members who would recommend the plan to their family or friends.

Congratulations to all providers who helped make these ratings possible.

Health Plus also participated in the 2003 Consumer Assessment of Health Plans Member Satisfaction Survey, in which members rated the plan above the Medicaid

average for customer service, complaint resolution, and provider communication.

In addition, the survey revealed that providers and their staff can continue to make a difference in quality by:

- Scheduling appointments so that members can be taken to the exam room within 15 minutes of their appointment time.
- Making sure office staff is trained to be courteous and helpful.
- Answering members' questions fully in language they can understand.



If you would like further customer service information for your office staff, please contact your **Provider Relations Associate** or the **Provider Services Help Line at 1-800-450-8753**.

New member ID cards!

When providers and their office staff explained that the Health Plus Gold Member ID Cards were virtually impossible to photocopy, the plan developed new ones.

Beginning in mid-February, new ID cards were mailed to all plan members enrolled in either Health Care Plus (Medicaid Managed Care), Child Health Plus, or Family Health Plus.

All plan providers also received a notice that included copies of the new cards. The former Gold Cards are still valid until members receive their new cards.

To check member eligibility for the current month, please call the InfoPlus Automated Provider



Line at **1-800-639-6968** and select **option 5**. To check claims status and member eligibility for other months, a provider ID and PIN number are required.

If further assistance is needed, the call will be transferred to a service representative from 9 a.m. to 6 p.m., Monday through Friday. At other times messages can be left on the voice mail system and a service representative will return the call on the next business day.

To access this information through the Internet, simply log on to the Health Plus Web site at www.healthplus-ny.org/providers. Once again, provider ID and PIN numbers are needed to obtain member information.

REMINDER

Please submit all claims to the address below to avoid delays in processing:

Health Plus
P.O. Box 200-284
Bay Ridge Station
Brooklyn, NY 11220-0284

When submitting multiple claims, please use an 8½-by-11-inch envelope whenever possible.

Dear Claims Corner: I understand that authorizations are no longer necessary for specialist visits after Jan. 1, 2004, yet my patient's claim for a visit to a cardiologist was not reimbursed. Could this be because the cardiologist was not listed in the *Health Plus Directory*?

Dear Doctor: You are correct. Referrals to a nonparticipating provider still require prior authorization.

Effective Jan. 1, 2004, Health Plus primary care physicians (PCPs) no longer need prior authorization to refer members to participating specialists, physical therapists (PTs), or occupational therapists (OTs). To generate the referral, PCPs can use a Health Plus referral form or prescription form and make a notation in the member's medical records.

Referrals to network specialists are valid for up to six visits within six months. Any participating physician may refer a member to a participating PT or OT for up to 20 visits per calendar year.

Services that continue to require prior authorization from Health Plus include referrals for: out-of-network specialists, more than 20 visits per year to a participating PT or OT, visits to a nonparticipating PT or OT, and speech therapy.

Dear Claims Corner:

Each time I submit a claim with a patient's Medicaid ID number you change it to a different number on the remit notice. This is a Medicaid patient through your HMO. Why don't you use his Medicaid number?

Dear Doctor: Each Health Plus member, whether enrolled in Medicaid, Child Health Plus, or Family Health Plus, has a unique

Health Plus identification number, which can be found on his or her Health Plus member identification card.

To help us process your claims in a timely manner, please use this member ID number in the patient identification field of the claim form. As you can see from our remit notice, we only process claims under the Health Plus ID number.

Resources for you

www.healthplus-ny.org



Check our Web site, www.healthplus-ny.org/providers, for our updated referral forms for specialist visits and for case or disease management.

Remember that **prior authorization is no longer necessary for referrals to in-network specialists!** See "Claims Corner" above for more details.

Health Plus news provider

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HEALTH PLUS NEWS PROVIDER is published as a community service to members of the HEALTH PLUS provider network. HEALTH PLUS Executive Offices are located at 205 Montague St., Third Floor, Brooklyn, NY 11201. Our phone number is 1-718-630-0123.

HEALTH PLUS is a not-for-profit health care plan committed to quality health care and dedicated to the health and well-being of our culturally diverse communities through partnerships with members, providers, and community-based organizations.

Information in HEALTH PLUS NEWS PROVIDER comes from a wide range of medical experts. If you have any concerns or questions about specific content in this newsletter, please contact HEALTH PLUS Provider Services at the number provided. Models may be used in photos and illustrations.

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Where to find information

Provider Services 1-800-450-8753 (Fax) 1-718-504-9602

INFO PLUS Provider Interactive Voice Response Line

(24-Hour Member Eligibility, Claims Status, Specialist Referrals) 1-800-639-6968

Address Changes (Fax) 1-718-504-9602

Domestic Violence Coordinator 1-718-491-7545

Health Education 1-718-491-7584

Health Services 1-718-630-0123

Health Services Referrals (Fax) 1-718-360-1314

Quality Improvement 1-718-491-7559

Web site: www.healthplus-ny.org

For expert health information, Health Plus members may call
Tele-Nurse Plus 24 hours a day, seven days a week: 1-800-437-7587.