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# **NMHC Provider Connection**

A Newsletter for Contracted Providers of New Mexico Health Connections Volume 4, Issue 1 • Spring 2017

# Please share this newsletter with all healthcare providers and administrative staff in your office.

#### NMHC and you: Together, we raise the bar for healthcare

With all the noise and confusion around the Affordable Care Act repeal and replace, repeal and repair—or, by the time you read this, perhaps repeal and retreat—NMHC unambiguously reaffirms our vision of enhancing the lives and health of our members whom you serve. And we recommit our full support of you and your practice's herculean efforts to serve the health of our communities.

As a physician-led health plan, NMHC deeply understands the pain points you encounter while trying to do the best for your patients. That is why we are here to support care, whether in-between visits, post-discharge, at the retail pharmacy, and even through the prior authorization process, in a way that raises the bar for all carriers.

In short, we know that serving you helps serve our members and delivers the best possible and most affordable results. That is one critical reason why we have succeeded and persisted while so many others have retreated. We will continue to march ahead with that vision and continue to be here to serve you so that you can take care of our members. Together, we can raise the bar on what collaborative healthcare can and should be.

Mark Epstein, MD, MBA Chief Medical Officer

## Genetic testing always requires prior authorization

Genetic (DNA) testing can be a useful predictive and pre-symptomatic tool to aid you in the treatment plan for your patient. But before you order genetic testing for your patients who are NMHC members, please remember these three things:

- 1. **NMHC requires you to obtain a prior authorization for all genetic testing and counseling.** Testing can be very expensive to the patient if the services are not pre-authorized. Genetic testing laboratories will not request the prior authorization for your patient. The prior authorization must come from you, the requesting provider.
- 2. **NMHC requires you to use in-network laboratories for genetic testing.** Our contracted laboratories are Quest Diagnostics and TriCore Reference Labs. For a list of their locations, please visit the *Online Provider Directory* page of our website, **mynmhc.org/find\_a\_doctor.aspx**.
- 3. You can start and check the status of your prior authorizations online through our Secure Provider Portal at <a href="https://nmhc.valencehealth.com/Login.aspx">https://nmhc.valencehealth.com/Login.aspx</a>. If you need access to the portal, please complete the Secure Provider Portal Access Request Form, located on the *Prior Authorization Requests* page at <a href="maynmhc.org/">mynmhc.org/</a> <a href="maynmhc.org/">prior-authorization-requests.aspx</a>.

Visit mynmhc.org/provider-resources.aspx for a collection of cultural diversity resources that could be valuable to your practice. You'll find data, tools, and perspectives on LGBTQ individuals, Latinos, Native Americans, health literacy, and more.

# Pharmacy updates

#### Medication adherence program helps our members take their meds consistently

Consistency in taking medications used to treat one's chronic conditions is vital. NMHC is now partnering with OptumRx® for a new Medication Adherence Program designed to help members take their medications consistently. This program consists of the following components:

- Letters when members begin taking select classes of maintenance medications.
- Automated phone calls to remind members to refill prescriptions in a timely manner, with the

- opportunity to transfer directly to a pharmacy to start a refill.
- Access to daily reminders to take medications and/ or refill prescriptions via the OptumRx mobile app.
- Member and provider letters when difficulties in taking medications regularly are identified.

If you would like more information on this program, please call OptumRx at **1-855-577-6550**.

#### Fluoxetine capsules vs. tablets: What's the difference?

In many cases, providers issue prescriptions for medications without considering whether the formulation of the drug is a capsule or a tablet. Typically, either formulation works in a similar manner; however, tremendous cost differences between the two could exist.

A recent review of NMHC prescription claims for generic fluoxetine indicates that costs for the tablet, regardless of strength, are considerably greater than that of the capsule. This table provides a claims comparison.

Drug Name	Quantity	Days' Supply	Cost
Fluoxetine 20mg capsule	90	90	\$4.86
Fluoxetine 20mg tablet	90	90	\$298.79

Please help us control costs for this product: When prescribing fluoxetine, specify capsules when appropriate.

NMHC has created a **list of possible formulary alternatives** to assist you in the prescribing process. You can find it at **mynmhc.org/Formulary.aspx**, under the heading *Formulary (Drug List) Alternatives.* We have updated this list for 2017.

### Eliminate a medical records request with common ICD-10 and CPT II codes

NMHC often requests medical records from providers' offices for our Healthcare Effectiveness Data and Information Set (HEDIS®) submission process. We require HEDIS submission to meet our Qualified Health Plan status with CMS and NCQA. Beyond the regulatory requirements, HEDIS data provides us with a status of the network performance on key metrics that evaluate our members' care against evidence-based guidelines.

If we can capture an ICD-10 or CPT II code through the claim submission process, then we do not need to request a medical record. These tips can eliminate the need for us to request records from your office:

- Use ICD-10 codes for body mass index (BMI).
- Use CPT II codes to record blood pressure results, point-of-service AIC results, or a postpartum visit.
- A set of ICD-10 codes for BMI and a list of CPT II codes to include on your claims are located at mynmhc.org/icd-10.aspx.

#### Pediatric attention deficit hyperactivity disorder (ADHD)

Pediatric patients under treatment for ADHD present challenges for providers relative to appropriate prescribing of ADHD-related medications, medication adherence, and managing commonly associated side effects. We encourage prescribing practitioners to review the American Academy of Pediatrics clinical practice

guidelines for ADHD at http://pediatrics.aappublications.org/content/early/2011/10/14/peds.2011-2654.

This review is also an opportunity for behavioral health and primary care providers to collaborate and coordinate the mental and physical healthcare of pediatric patients.

### Customer service contact information for our large employer groups

If you have patients who receive their NMHC coverage via Albuquerque Public Schools, New Mexico Retiree Health Care Authority, or New Mexico Public Schools Insurance Authority, please note that we have unique customer service phone numbers, customer service email addresses, and websites for these members.

Albuquerque Public Schools

Customer service phone: 1-877-210-8339 Customer service email: aps@mynmhc.org

Website: mynmhc.org/aps

New Mexico Retiree Health Care Authority
Customer service phone: 1-877-210-8239
Customer service email: nmrhca@mynmhc.org

Website: mynmhc.org/nmrhca

New Mexico Public Schools Insurance Authority
Customer service phone: 1-877-210-8213
Customer service email: nmpsia@mynmhc.org
Website: mynmhc.org/nmpsia

Please do not call our main customer service number with questions pertaining to these members.

How can I tell if my patient is one of these members?

The following information on the patient's NMHC ID card will tell you which large employer group they belong to.

• Group ID numbers:

APS: NMHCAPS

NMRHCA: NMHCNMRHCA

- NMPSIA: three-digit number starting with "D"

• Subscriber ID number: All of the above members will have a subscriber ID starting with "I."

#### Treating the whole patient

NMHC encourages **coordination of care** for our members. Treating the whole patient is important to a member's overall mental and physical health, and requires communication among primary care, specialty, and behavioral health providers. Coordination of care should include the sharing of the member's initial diagnosis, a brief initial treatment plan, the member's initial medication list, and any ongoing or significant changes in a member's condition or a change in medication.

We also encourage NMHC providers to communicate with each other to establish a means to assess a member's medication adherence. Ensuring that members understand how to take their medications, dose frequency,

and expected side effects will help them understand the importance of taking their medication(s) as prescribed. Good communication among primary care, specialty care, and behavioral health providers will help reinforce this.

We have created a Coordination of Care form to help all types of providers communicate with each other about a member's total well-being. Find it in the *Provider Forms and Other Resources* page of our website, **mynmhc.org/provider-resources.aspx**. Please use this form to communicate with *all* providers involved in a member's care.

#### Lab test monitoring for patients on routine medications

Our data shows that 25 percent of our members on ACE inhibitors, angiotensin receptor blockers (ARBs), or diuretics are missing at least one annual lab monitoring for serum creatinine and serum potassium. Also of concern is that 75 percent of our members on digoxin are not showing as having had at least one annual serum potassium, serum creatinine, and digoxin level drawn.

We might be missing data if the lab draw was performed within a hospital or at a facility other than Quest Diagnostics or TriCore Reference Laboratories. However, we would like you to please review your protocols for lab monitoring for these medications to ensure that these tests are routinely ordered.

NMHC now covers **Cologuard®**, a colorectal cancer screening kit. Based on your clinical judgement, you can order this test for NMHC members who are at average risk for colorectal cancer and who are hesitant to undergo direct visualization of the colon for cancer prevention screening. **At this time, Cologuard requires both a prior authorization and a clinician's order.** 





#### Specialists in the NMHC network

Did you know that we have approximately **7,000 specialty providers** in our New Mexico and Texas service areas? You can locate a specialty provider online at <a href="http://providerdirectory.empowerhealthinsurance.com/nmhc/all/search">http://providerdirectory.empowerhealthinsurance.com/nmhc/all/search</a>. Use the *Specialty Category* drop-down menu and choose *Specialist*, then use the *Specialty* drop-down menu to find your specialist.

**Please always refer your NMHC patients to the specialists in our network.** Your NMHC patients will pay much less out of pocket when referred to in-network specialists.

Out-of-network specialists are not contracted with us and will bill your patient full charges. Help us keep healthcare affordable for your patients by always choosing in-network specialists.

We welcome new practitioners of all specialties into our network. If you are not contracted with us and would like to be, please go to **mynmhc.org/Working\_With\_Us.aspx**, complete a Letter of Interest, and email it to us. We appreciate all you do for our members!

# NMHC Provider Relations staff directory

Note: The general Provider Relations fax number is 1-888-282-3483.						
Name	Title	Phone	Fax	Email		
Jeane Fowkes	Provider Relations Specialist	(505) 200-0416	1-866-311-7044	jeane.fowkes@mynmhc.org		
Norma Ray	Provider Relations Specialist	(505) 847-4943	1-866-796-2312	norma.ray@mynmhc.org		
Jessica Griego	Provider Relations Specialist	(505) 492-2073	1-800-504-6545	jessica.griego@mynmhc.org		
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Amy Riddle	Credentialing Specialist	(505) 404-1208	1-800-947-8701	amy.riddle@mynmhc.org		
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