

Info-Link

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WOMEN NEED MAMMOGRAM REMINDERS



Breast cancer is the most common cancer in women, other than skin cancer, and is the second leading cause of cancer death in women, after lung cancer. About 211,000 women in the United States will be diagnosed with invasive breast cancer in 2005 and an estimated 40,000 women will die from the disease this year, according to the American Cancer Society.

Mammograms are quick, relatively painless and potentially lifesaving tests. Mammograms are the best way to detect breast cancer in its earliest, most treatable stage, an average of 1-3 years before a woman can feel the lump. Size of the cancer at the time of diagnosis is one of the most important predictors of outcome. Screening mammography can lead to the finding and treatment of breast cancer in its earliest and most curable stage.

Yet despite countless public services campaigns praising the benefits of a mammogram as a breast cancer-screening tool, not all women follow the recommended guidelines for getting this test. Only one in 20 women consistently follows that recommendation, according to a study published by *Cancer*, a journal of the American Cancer Society.

The HEDIS results for 2004 for Breast Cancer Screening were: 76.64% of our members had a mammogram completed. For 2005 preliminary HEDIS results are approximately 70%.

Health care providers need to devise better reminder systems. Doctors need to discuss the importance of mammograms and determine the reasons a woman refuses to have one completed. One of the most documented reasons given by women who did not have a mammogram was that "My doctor did not tell me to." So, if you as the primary care physician, continue to order mammograms and encourage the patients to follow-through with their importance, maybe we can decrease the number of women who die every year from this disease.



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DIABETES DISEASE MANAGEMENT PROGRAM *Zoning in on Diabetes*

The program was started in December 2004 to make use of established interventions and new technologies to improve diabetic care and health outcomes. The diabetes registry now consists of 2,262 members, showing a diabetes prevalence of 17% in Inter Valley members.

■ 1,942 diabetics have been identified as high and moderate risk. Of these, 635 have received packets introducing the program, together with a Health Status Survey and an educational pamphlet “Taking Control of Your Diabetes.”

■ 415 have voluntarily participated in case management and will receive a welcome letter, additional educational materials, a resource list and a “passport” to store health information.

■ Telephonic case management is being conducted by nurse case managers who focus on assessment of disease severity, the need for coordination of care and education regarding their disease. Clarification of treatment plans is accomplished through medical record review. Physicians are notified when their diabetic member participates in the program. Their help is solicited when a member who should be on case management chooses not to participate in the program. Case managers will discuss the importance of adherence to their treatment plan, especially for members identified as non-compliant with dietary and drug regimens.



CHF DISEASE MANAGEMENT PROGRAM *At Home With Heart Failure*

There are 1,352 members in Inter Valley Health Plan's CHF registry. The program continues to target high risk and moderate risk CHF members with telephonic case management, education and coordination of care. In this program, those classified as low risk will receive educational mailings only.

■ 177 high risk members have opted to participate

■ 31 have opted not to participate. Physicians may get a call from a case manager if we need your help in convincing patients who may benefit from case management. If the member's personal physician emphasizes the importance of participating in the program, this support can be very powerful.

■ Welcome packets sent to participating members included a welcome letter and “Heartstrong,” an educational newsletter.

WILL TELEMEDICINE BENEFIT YOUR CHF PATIENT?

For NYHA class III or IV patients with multiple admissions, who are determined by case managers to be progressively more symptomatic, a referral for Telemedicine may be requested and coordinated by a case manager.

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DISEASE MANAGEMENT UPDATE...CONTINUED

The service, provided by the Visiting Nurse Association, has the following components:

- Disease-specific education by VNA Disease Management nurse for patients and their family/support system.
- Daily biometric home telemonitoring to monitor compliance with medical therapies and progression of disease.
- Timely reports to physicians regarding clinical information collected by the VNA, allowing for early intervention.
- Home visits as necessary for safety evaluation, to reinforce education and lifestyle changes, and to promote patient compliance with diet and medication regimen.

CHF QAPI RESULTS

The Center for Medicare and Medicaid Services requires HMOs to conduct Quality Assessment Performance Improvement (QAPI) projects annually. Each project must be a minimum of three years-Baseline measurement, Demonstrable Improvement and Sustained Improvement. Once a baseline measurement is completed, interventions are then developed to improve the scores of the project.

Inter Valley Health Plan recently completed the third year of our Congestive Heart Failure Project. The Plan had to present documentation of the two CHF measures:

- 1** A Left Ventricular Assessment was completed on the member with a diagnosis of CHF
- 2** An ACEI dose of at least 100% of the effective dose was prescribed if the Left Ventricular Assessment documentation was 40% or below.

The results below demonstrate our physicians have increased the number of LVF assessments completed and the percentage of members are currently receiving 100% of the effective ACEI dose recommended.

We still have room for improvement, but the Plan expresses its appreciation to the physicians who are caring for our members.

Q A P I P R O J E C T R E S U L T S

	LVF Assessment	100% ACEI effective dose
Baseline Measurement	66%	38.7%
Demonstrable Improvement	91.9%	41%
Sustained Improvement	96%	52.4%

KUDOS CORNER

Inter Valley Health Plan would like to recognize the following Provider Groups and/or Hospitals for successfully passing their audits of delegated functions with a score of 95% or above:

- Combined Management Services (MSO for Citrus Valley Physicians Group, Eastland Medical Group and West Covina Medical Clinic) - Credentialing Audit
- High Desert Primary Care Medical Group - Claims Processing Audit
- Desert Valley Medical Group - Claims Processing Audit
- St. Mary Choice Medical Group - Claims Processing Audit
- Valley Health Systems - Claims Processing Audit



Additionally, we would also like to take this opportunity to congratulate the following offices for obtaining their certification in Older Adult Sensitivity by attending one of the training sessions co-sponsored by Inter Valley

Health Plan and Pfizer Pharmaceuticals:

- Sophia Beyene, DO, Medical Office
- Chaparral Medical Group
- Maria Diaz, DO, Medical Office
- William Good, MD, Medical Office
- Hemet Community Medical Group
- Thumati, Muthiah & Moy, MDs Medical Office
- Bola Oyeji, DO, Medical Office
- C.K. Rao, MD, Medical Office
- Stephen Rathbun, MD, Medical Office
- Gurbinder Sadana, MD, Medical Office
- Daryoosh Valamanesh, MD Medical Office

Congratulations to all and keep up the good work.

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pharmacy

U P D A T E

FULL PHARMACY BENEFIT FOR ALL MEDICARE BENEFICIARIES IN 2006

On January 1, 2006, Medicare will offer an outpatient pharmacy benefit to all Medicare beneficiaries. The new benefit, established as Part D of the Medicare program Prescription Drug Improvement and Modernization Act of 2003 (MMA) is designed to provide prescription drugs for beneficiaries at an affordable cost via coinsurance or copayment. This program is expected to reduce out-of-pocket expenditure for drug spending for 65% of the Medicare beneficiaries in 2006.

Under the standard Medicare drug benefit, a minimum of two drugs in each of the 146 therapeutic classes will be required by any health plan providing a Part D benefit. The two drugs rule will suffice, if these drugs can adequately treat a medical condition. In some cases the two drugs rule will not suffice; and the number of drugs required in a specific class will be determined by the medical condition. The regulations clearly state that Part-D will cover only prescription drugs approved by the FDA and are used and sold in the United States for medically accepted indications. These drugs will include biologicals, insulin, and vaccines currently covered under section 351 of the Public Health Services Act. Additionally, medical supplies necessary for the administration of insulin are also covered to include: needles, syringes, alcohol swabs, and gauze. These regulations also exclude certain agents:



- Agents when used for anorexia, weight gain, or weight loss.
- Agents when used to promote fertility
- Agents when used for cosmetic purposes or hair growth
- Agents when used for symptomatic relief of cough and colds
- Prescription vitamins and mineral products (exception prenatal vitamins and fluoride preparations)
- Non-prescription drugs
- Outpatient drugs for which the manufacturer seeks to require that associated tests or monitoring services be purchased exclusively from the manufacturer or a designee as a condition of sale
- Barbiturates
- Benzodiazepines

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FULL PHARMACY BENEFIT CONTINUED

For this benefit (Part-D) beneficiaries in fee-for-service Medicare will pay in 2006 an average premium of \$37 per month plus a \$250.00 deductible. Under this new program health plans like Inter Valley have the option to enhance the benefit that can include full or partial premium subsidies and elimination of the deductible. Additionally, member copayments will be significantly reduced from the 2005 levels.

Since this program is complex and confusing, we are minimizing the changes to the formulary in 2006. The required therapeutic classes do not specify drugs by name; therefore, we are meeting the requirements by providing highly utilized drugs within our current formulary and other necessary drugs to meet the standard.

Along with a new enhanced 2006 formulary, Inter Valley will include Prior Authorizations guidelines, Step Therapy procedures, and our Medication Therapy Management Program (MTMP) as dictated by regulation. Medication Therapy Management is a program that needs to be developed and implemented by all Part-D providers. This program focuses on members with multiple drugs and medical conditions that have a drug expenditure of \$4000 or more annually.

Part-D providers will also develop and implement quality assurance programs that address issues such as fraud & abuse, compliance, inappropriate drug use, adverse drug reactions, etc.

Inter Valley Health Plan has submitted its formulary, supporting policy, procedures, and programs as required by the Centers for Medicare and Medicaid Services (CMS). Inter Valley's 2006 formulary is currently under review by CMS and this should be approved on or before June 2005.

Inter Valley Health Plan is committed to its partners to provide the smoothest transition possible and will keep you informed of new development and changes required to meeting Part-D program standards in 2006.



resources

for senior patients

The importance of seniors being able to maintain their independence and dignity is key to their quality of life. However, for many seniors, living independently requires the social, physical and emotional support of others. Fortunately, there are numerous services available to seniors that help ensure their safety, health, productivity, social connections and emotional well-being. Inter Valley Health Plan is pleased to provide the following overview of resources, which we hope you will find to be a valuable referral tool when identifying specific areas of need amongst your senior patients.

GENERAL ASSISTANCE NUMBERS

- **Elder Abuse Hotline 877-565-2020 Senior Information & Assistance 800-510-2020** - Services to seniors and at-risk individuals to improve or maintain choices, independence and quality of life.
- **Elderly Eye Care Helpline 800-222-EYES (3937)** - Provides people 65+ with free eye care information and referrals to local volunteer ophthalmologists. (Glasses not included.)
- **Nursing Home 24/7 Crisis Line & Ombudsman Program 800-231-4029** - Free and confidential; local ombudsman will speak directly with nursing home residents; investigates and resolves range of complaints on behalf of long-term care facility 60+ residents.

POMONA VALLEY INCLUDING COVINA, WEST COVINA AREA

Key services in this area are uniquely managed by Community Senior Services, a single non-profit organization. Easy access to a range of services via an extensive database of agencies serving seniors in the Pomona, East San Gabriel and West Inland Valleys is available by calling the organization's **Senior Help Line at: 909-596-1111**.

- **Get About Transportation** - Door-to-door transportation system available to any location within Pomona, Claremont, San Dimas and La Verne.
- **In-Home Respite** - Contact information for screened, qualified companions to free caregivers for a few hours.
- **Respite Enrichment Center** - Supervised activities for frail/confused elderly in safe, friendly group setting, allowing caregivers time to themselves.
- **Retired and Senior Volunteer Program (RSVP)** - Seniors can put their experience and talents to work via a range of community services (i.e., tutoring, delivering meals to the homebound).
- **Senior Companion Program** - Stipend volunteer work lets low-income seniors assist others, more frail seniors in their home on a variety of levels.
- **Senior Peer Counseling** - Trained paraprofessional counselors guide fellow seniors to problem-solving solutions through private consultations or support groups.
- **Senior Resource Directory** - Convenient, comprehensive guide to area agencies and organizations offering services and assistance to seniors.

RIVERSIDE COUNTY

■ **In-Home Supportive Services (IHSS) 888-960-4477** - Services focused on enabling elderly/disabled persons to safely remain living independently include meal preparation, cleaning, shopping, bathing, dressing and personal care.

■ **C.A.R.E (Curtiling Abuse Related to the Elderly) Program 800-475-7506** - Under umbrella of Adult Protective Services, multidisciplinary teams assist victims of consumer fraud, provide anti-fraud education, and recognition and reporting of elder/dependent adult abuse.

■ **Representative Payee Program 800-491-7123** - Voluntary money management services to legally competent adult clients requiring assistance in timely payment of living expenses.

■ **Cash Assistance Program for Immigrants (CAPI) 800-491-7123** - State program providing cash assistance to elderly and disabled immigrants who may not qualify for Supplemental Security Income (SSI).

SAN BERNARDINO COUNTY INCLUDING HIGH DESERT

■ **Age Wise, Rialto 800-451-5633** - Mental health services and peer counseling for seniors sponsored by San Bernardino Department of Mental Health.

■ **Department of Aging and Adult Services, Elder/Dependent Adult Abuse, Victorville 760-843-5100** - Investigates all complaints regarding adults/seniors in danger of death, injury, sexual abuse, neglect or exploitation; in-home services (income/disability must qualify) for seniors and disabled people unable to care for themselves.

■ **Department of Aging and Adult Services, San Bernardino 909-891-3900** - In-home services (income/disability must qualify) for seniors and disabled people unable to care for themselves.

■ **Hesperia Leisure League, Hesperia 760-224-3223/3202** - Active senior group sponsors thrift shop, dancing, crafts, workshops, etc. (Fees may apply.)

■ **Health Insurance Counseling and Advocacy Program, Victorville 760-245-7902** - Assistance and objective information for Medicare beneficiaries to facilitate good decisions about health care coverage.

■ **Inland Caregiver Resource Center, Colton 800-675-6694 or 909-387-9440** - Provides families and caregivers of brain-impaired adults with a broad range of information and resources including referrals, respite care (based on ability to pay), free consultation and limited legal/financial counseling.

■ **Inland Counties Legal Service, Victorville 760-241-7072** - Legal counsel for seniors; fees on donation basis.

■ **Meals on Wheels, Victorville 760-245-7047** - Provides noon meals to seniors and 60+ homebound (Victorville, Adelanto, Apple Valley, Barstow, Hesperia, Lucerne Valley and Needles). Meals free, \$2 donation suggested.

■ **Seniors Helping Seniors, San Bernardino Counties 800-648-1936** - Services that provide companionship to seniors.