

Info-Link

FALL 2004

Volume V Issue 2

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HEDIS 2004 RESULTS

It is that time of the year again! Every year since 2000 Inter Valley Health Plan has shared its HEDIS scores with our physician network. HEDIS is a set of standardized measures designed to compare the performance of managed health care plans. The goal is to effectively use HEDIS measures to improve quality.

Old Measures

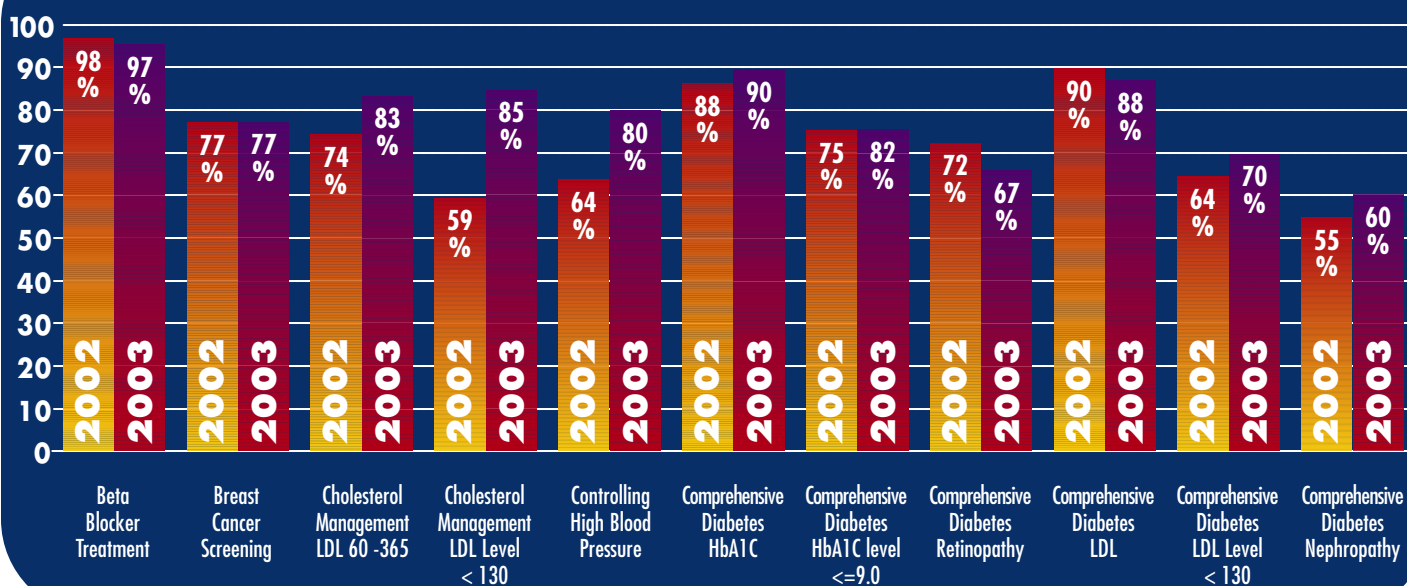
In 2004 Inter Valley showed improvement in eight out of eleven Effectiveness of Care Measures (see graph below). Two Comprehensive Diabetes Care measures are of concern to the Plan, i.e. the rate of annual dilated retinal examination decreased by seven percent, and the percentage of LDL testing in diabetics decreased by two percent. The good news is that we showed improvement in controlling high blood pressure, in HgBA1C values indicating better glycemic control in diabetics, and in nephropathy screening.

Of equal concern are low results on the following new 2004 HEDIS measures:

- LDL value < 100 mg % after an acute cardiac event.....37%
- Colorectal Cancer screening45%
- LDL < 100 mg% in diabetics40%

continued on page 3

2002 - 2003 EFFECTIVENESS OF CARE MEASURES



DISEASE MANAGEMENT UPDATE

Inter Valley Health Plan's Disease Management Program has identified 1,383 members with Congestive Heart Failure (CHF) and stratified them according to risk factors based upon the following criteria:

- **HIGH RISK:** any emergency room visit/hospital admission and two or more co-morbidities,
- **MEDIUM RISK:** at least two office visits and two or more co-morbidities, or
- **LOW RISK:** office visit only—no inpatient or emergency room visit and no co-morbidities.

The CHF members were identified through:

- Health Risk Assessment for new enrollees
- Hospital/Physician/Member Referrals
- Encounter data ■ QAPI Project ■ Chart Review

A packet was mailed to the High-Risk members which included educational materials, a SF-36 Health Status Questionnaire, and a welcome letter. Although this program is voluntary, we strongly encourage members to join so we may help coordinate their care and improve

their self-management efforts.

Case Managers collaborate with the PCPs and other staff to develop effective coordination strategies and patient care plans based on patients' clinical, emotional, and psychosocial needs, and in accordance with the practice guidelines. In addition, other methods of engaging and retaining members in an active program of education, support, and advocacy are utilized to reduce cost, and facilitate health status improvements.

Inter Valley Health Plan believes that the PCP plays an important role in the success of our Disease Management Program. This program is designed to support you, the PCP, with the care of your patients. The process begins when you refer patients to our program and continues through our updates about your patients' health status.

If you have any questions, please contact Cindy Ninofranco, CHF Case Manager, at (909) 623-6333, extension 298. Please send any referrals of CHF patients for inclusion in the Program by fax at (909) 620-8092.

BENEFITS FOR 2005

2005 is fast approaching and Inter Valley will be notifying our Service To Senior members about our annual change of benefits. Member should receive this information by November 1. This year we are delighted to report that there will be very minor changes. The benefit changes are enhancements to the overall benefit package. In addition, we have added several Brand Name Drugs to our approved list. You will find those pharmacy enhancements on the Pharmacy Update insert of this newsletter.

Below is a list of the benefit highlights most important to the physician offices and the members.

Los Angeles County	2004 Copay	2005 Copay
Health Plan Premium	\$0	\$0
PCP Visit	\$5	\$5
Specialist Visit	\$10	\$10
Hospital Copay	\$75 a day – max \$375	\$75 a day – max \$375
Outpatient Surgery	\$100	\$100

Members in Los Angeles County will receive a Part B Premium refund of \$10 every month for being a member of Inter Valley Health Plan.

San Bernardino & Riverside Counties	2004 Copay	2005 Copay
Health Plan Premium	\$0	\$0
PCP Visit	\$5	\$5
Specialist Visit	\$10	\$10
Hospital Copay	\$100 a day – max \$500	\$75 a day – max \$600
Outpatient Surgery	\$100	\$100

QUALITY MEASURES FOR TREATMENT OF DEPRESSION

The point prevalence for major depressive disorder in the Western industrialized nations is 2.3% - 3.2% for men and 4.5%-9.3% for women. Risk factors for major depression include female gender, a history of depressive illness in first-degree relatives, and prior episodes of major depression. Patients with major depressive disorder have substantial amounts of physical and psychological disability, as well as occupational difficulties.

One of the HEDIS* measures is "Antidepressant Medication Management (AMM)". Consumers, purchasers and providers consider this measure important and valuable as an indicator for the quality of care given the patients with depressive disorders. This standard consists of the following three different measurements.



1 Optimal Practitioner Contacts for Medication Management

Members who are diagnosed with a new episode of depression and treated with antidepressant medication should have at least three visits with either a mental health provider or non-mental health provider during the 84-day (12 week) Acute Treatment Phase.

2 Effective Acute Phase Treatment

Members who are diagnosed with a new episode of depression and treated with antidepressant medication, and who remained on an antidepressant drug during the entire 84-day (12 week) Acute Treatment Phase

3 Effective Continuation Phase Treatment

Members who are diagnosed with a new episode of depression and treated with antidepressant medication, and who remained on an antidepressant drug for at least 180 days (6 months)

In this age of quality measurements, physicians not only should provide quality care, but they should document this by using the appropriate codes. When treating depression in conjunction with other medical disorders, a mental health diagnosis or service code must be used with the Evaluation and Management Codes. The mental health codes for depression are as follows: ICD-9 Codes: 296.2, 296.3, 298.0, 300.4, 309.1, 311 or DRG 426.

*HEDIS is a registered trademark of NCQA

HEDIS 2004 RESULTS CONTINUED

- Osteoporosis Management in women who had a fracture17%
- Antidepressant management11%
- Alcohol and other drug dependency follow-up with a provider.....11%

Inter Valley Health Plan strives to improve the quality of care received by members based on evidence-based guidelines. This we hope to accomplish by working with physicians for necessary interventions, such as patient education, physician reminders, case management and disease management.

KUDOS CORNER

As talked about in the last issue of Info-Link, Inter Valley has started a Provider Appreciation Program designed to recognize our providers for all they do to further the success of the Plan. As such, we 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 for Citrus Valley Physicians Group, Eastland Medical Group and West Covina Medical Clinic — Credentialing Audit
- Heritage Victor Valley — Claims Processing Audit
- St. Mary Medical Center — Claims Processing Audit
- Prime Partners IPA Medical Group — Claims Processing Audit
- Riverside Medical Clinic — Utilization Management, Quality Management and Credentialing Audits

Additionally, we would also like to take this opportunity to congratulate the following physician and/or staff 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:

Physicians attending the workshop

Tiffany Endo M.D.	Sudath Jeerreddi M.D.
Craig Endo M.D.	Hedy Loa M.D.
Richard F. DiThomas M.D.	Glenn Miya M.D.
Redemption Geronimo M.D.	Claudia Pena M.D.

Physician staff attending the workshop

Mohamed Ali M.D. Office	La Verne Medical Group Physicians
Mario Diaz M.D. Office	Sadiq Mandalawi M.D. Office
Family Foot Center	Yogesh K. Paliwal M.D. Office
Herman M. Geller M.D. Office	PVHMC Family Medicine
Sudath Jeerreddi M.D. Office	Stephen Rathbun M.D. Office
King-Yee Yu M.D. Office	Gerald Rude M.D. Office
Ewa Konca M.D. Office	Daryoosh Valamanesh M.D. Office
Alaa Latif M.D. Office	

Congratulations to all and keep up the good work.



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Inter Valley Health Plan
SERVICE TO SENIORS



pharmacy

UPDATE

PHARMACY BENEFIT CHANGES IN 2005

Inter Valley strives to provide its members with a pharmacy benefit (Brand-Generic) in all counties. We are also committed to maintain an easy to understand benefit and have chosen to minimize the changes to the pharmacy benefit for 2005. Please note the few changes in 2005, which may impact some of your patients.

LOS ANGELES COUNTY

Drug	2004 Benefit	2005 Benefit Change
ACTOS	Covered on tier 3	Not Covered (Use Avandia)
CIPRO	Covered on tier 2	Not Covered Use generic Cipro (Ciprofloxacin)
KETEK	Not covered	Covered on tier 2
LANTUS	Covered on tier 3	Covered on tier 2
LORATADINE (OTC)	Not covered	Covered on tier 1 generic Claritin
MIACALCIN NASAL	Not covered	Covered on tier 3
NOVOLOG HUMOLOG	Covered on tier 3	Covered on tier 2
ZITHROMAX	Covered on tier 3	Covered on tier 2

RIVERSIDE/SAN BERNARDINO COUNTIES

Drug	2004 Benefit	2005 Benefit Change
ACTOS	Covered on tier 3	Not Covered (Use Avandia)
ARAVA	Not Covered	Covered on tier 3
CIPRO	Covered on tier 2	Not Covered Use generic Cipro (Ciprofloxacin)
KETEK	Not covered	Covered on tier 2
LANTUS	Covered on tier 3	Covered on tier 2
LORATADINE (OTC)	Not covered	Covered on tier 1 generic Claritin
MIACALCIN NASAL	Not covered	Covered on tier 3
NOVOLOG HUMOLOG	Covered on tier 3	Covered on tier 2
ZITHROMAX	Covered on tier 3	Covered on tier 2

BRAND DRUGS SOON TO BE GENERICS

Generic medications are the best value for our members from a cost accounting and copayment perspective. Our Inter Valley providers are excellent prescribers of generic medications. Inter Valley's generic utilization is greater than 70% based on prescription count.

The following table provides a list of the drugs coming off patent through 2006. The patent life of a drug is 17 years from the time the chemical entity is identified in a lab. It can take another 10 years before the drug is ever tested in humans. Therefore, each new drug is guaranteed a minimum of 5 years patent exclusivity before any generic drugs can be manufactured and marketed. Patent dates are subject to change based upon pediatric exclusivity extensions, new indication extensions, and new dosage forms that are identified for the original chemical entity. Patent dates are continuously being updated and changed. Please consult the FDA web-site at <http://www.fda.gov/cder/ob/default.htm> for the most up-to-date information.

DRUGS FOR 2003

BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME
Ciloxan	Ciprofloxacin	Dalgan	Dezocine	Ortho Novum 7/7/7	Ethinyl Estradiol
Cipro	Ciprofloxacin	Diprolene AF	Betamthasone	Ortho-TriCyclen	Ethinyl Estradiol
Combivent	Albuterol	Dyncirc	Isradipine	Renormax	Spirapril
Concerta	Methylphenidate	Glucophage XR	Metformin	Semprex-D	Acrivastine
Cosopt	Dorzolamide	Lotensin	Benazepril	Serzone	Nefazodone
Covera-HS	Verapamil	Nizoral	Ketoconazole	Sonata	Zaleplon
Cutivate	Fluticasone	Ocuflox	Ofloxacin	Topamax	Topiramate
Cyclessa	Desogestral				

DRUGS FOR 2004

BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME
Adenoscan	Adenosine	Lupron	Leuprolide	Romazicon	Flumazenil
Cognex	Tacrine	Magnevist	Gadopentetate	Rowasa	Mesalamine
Diflucan	Fluconazole	Maxair	Pirbuterol	Taxol	Paclitaxel
Dipentum	Olsalazine	Metadate CD	Methylphenidate	Vicoprofen	Hydrocodone/IBU
Duragesic	Fentanyl	Paraplatin	carboplatin	Wellbutrin SR	Bupropion
Ergamisol	Levamisole	Protropin	Somatrem	Xenical	Orlistat
Flomax	Tamsulosin	Prozac Weekly	Fluoxetine	Yasmin	Drospirenone
Livostin	Levocabastine	Zyban	Bupropion		

DRUGS FOR 2005

BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME
Actiz	Fentanyl	Lamisil	Terbinafine	Tilade	Nedocromil
Altace	Ramipril	Mobic	Meolxicam	Volmax	Albuterol
Amaryl	Glimepiride	Nascobal	Cyanocobalamin	Zithromax	Azithromycin
Cholybar	Cholestyramine	Nuromax	Doxacurium	Zocor	Simvastatin
Combivir	Lamivudine & Zidovudine	Pravachol	Pravastatin	Zofran	Ondansetron
Dostinex	Cabergoline	Prevacid	Lansoprazole	Zoladex	Gosereline
Ganite	Gallium Nitrate	Relenza	Zanamivir	Zoloft	Sertraline
Gliadel	Carboplatin	Retin-A Micro	Tretinoin	Retrovir	Zidovudine

DRUGS FOR 2006

BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME	BRAND DRUG	GENERIC NAME
Aceon	Perindopril	Hivid	Zalcitabine	Oxycontin	Oxycodone
Ambien	Zolpidem	Imitrex	Sumatriptain	Patanol	Olopatadine
Androderm	Testosterone	Macrobid	Nitrofurantoin	Prandin	Repaglinide
Aromasin	Exemestane	Maxaquin	Lomefloxacin	Prohance	Gadoteridol
Betimol	Timolol	Metrogel	Metronidazole	Videx	Didanosine
Cardene	Nicardipine	Neutrexin	Trimetrexate	Gastromark	Ferumoxsil
Demadex	Toremide				
Omniflox	Temafloxacin				