

# Info-Link

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## DON'T FORGET THE EYES

Blindness or low vision affects 3.3 million Americans age 40 and over, or one in 28, according to the National Eye Institute. (NEI) The study reports that low vision and blindness increase significantly with age, particularly in people over age 65.

Glaucoma, diabetic retinopathy and age related macular degeneration are lifelong conditions, but proper treatment can prevent or delay loss of vision. Treatment can only begin after the diagnosis is made. That means that every senior member should have a dilated eye exam done annually.

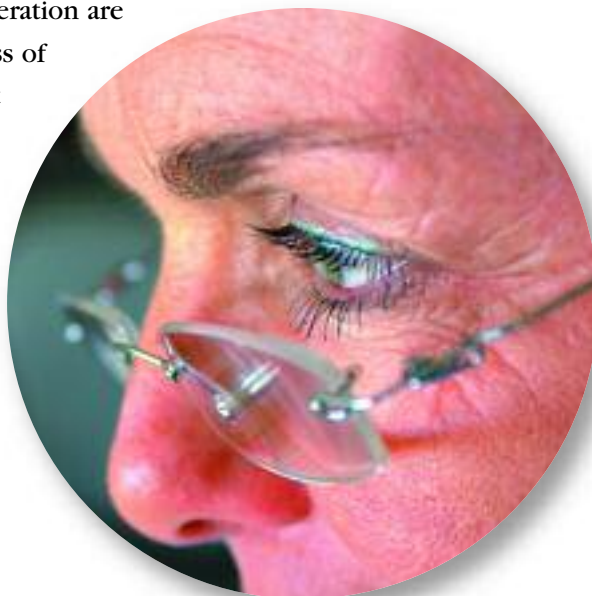
**Members of Inter Valley Health Plan have two choices of vision providers:**

**1. Vision Service Plan (VSP).** This plan offers one dilated eye exam per year with a VSP provider. Prior authorization is not required (depending upon the Provider Group). Have your patient contact our Member Services Department if they have any questions on authorizations.

**2. Ophthalmologists and optometrists** contracted with your Provider Group also do dilated eye exams.

Please make sure a complete eye exam is done annually on the senior members.

Good vision improves quality of life.



### EYE DISEASE PREVALENCE AND PROJECTIONS\*

(Number of adults 40 Years and Older in the US)

	Current Estimates	2020 Projections
Advanced Age-Related Macular Degeneration	1.8 million	2.9 million
Glaucoma	2.2 million	3.3 million
Diabetic Retinopathy	4.1 million	7.2 million
Cataract	20.5 million	30.1 million

\*NEI data

## DISEASE MANAGEMENT

Inter Valley Health Plan is adding a Disease Management (DM) program to its roster of services for its Medicare Advantage members.

**Definition:** Disease Management is defined as a system of coordinated health care interventions and communications for populations with conditions in which patient self-care efforts play a significant role.

Criteria for selecting a disease state for a DM program:

- Incidence of disease
- Magnitude of treatment costs
- Amount of practice variation in treating the disease
- HEDIS requirements
- The potential for documenting overall improvement, and
- The chronic nature of the disease

The program complements the patient-by-patient approach doctors previously have taken with a population-based focus to help ensure that all patients

with diabetes, congestive heart failure or other targeted illnesses get better or more consistent care. DM Programs are offered at no additional cost to the members. Disease Management programs are put in place to:

- Support the physician patient relationship and plan of care
- Prevent exacerbations and complications by promoting patient self-care and utilizing practice guidelines
- Improve overall health by continually evaluating health outcomes or results of treatment and improving treatment coordination and education as necessary.

Implicit in any Disease Management Program is the requirement that patients take an active role in caring for themselves. Accordingly, programs must educate patients effectively about how to do this. They must also inform physicians of opportunities for improving individual patient's care.

### CONGESTIVE HEART FAILURE (CHF) DISEASE MANAGEMENT PROGRAM

This program has been initiated and already has several members enrolled. The program's goal is to help members learn how to take the best possible care of themselves in their own homes.

#### The Process

1. Inter Valley Health Plan's Health Services Department identifies members with the above diagnosis.
2. Once identified, the member will receive a call from a nurse case manager who will recommend their enrollment in the program.
3. Case Manager conducts a telephone assessment of the enrolled members' needs
4. Case Manager mails a survey pertaining to their current health status to enrolled members

#### 5. Services provided through the program include:

- Health Education materials
- Regularly scheduled telephone calls from a case manager - to check on how members are feeling and discuss questions they may have about their condition
  - Tips on understanding and following the doctor's instructions on:
    - Taking one's medication
    - Eating a heart healthy diet
    - Monitoring one's weight
- 6. Information on community and national resources
  - Finding community resources to help with non-medical needs, such as meals, transportation and support groups
  - Information on national organizations like the American Heart Association



*continued on page 3*

## DISEASE MANAGEMENT...CONTINUED

7. Physician interaction is an important part of this program. Case managers will inform physicians of their patients enrolled in the program and obtain their advice as to how care can be better coordinated. The case manager sends physicians a Patient Status Report periodically. The program does not provide treatment. The doctor will continue to provide one's treatment and plan of care.

### Measurement

To analyze the effectiveness of the program, baseline measurements of the following will be compared with measurements six to twelve months after implementation of the program:

1. Hospitalizations, Emergency Room visits
2. Adherence to medications
3. Quality of Life and functional status of enrolled members

## DIABETES MANAGEMENT

Almost seventeen per cent (16.7%) of Inter Valley Health Plan members have been diagnosed with diabetes mellitus. Diabetes care is one area of medicine in which most patients could benefit from receiving more medical services than they typically get today. While it takes more than an ounce of prevention to avert the serious complications of diabetes, a pound of cure can scarcely do any good later.

The Diabetes Management program is being developed and will be operational soon.

To learn more about Inter Valley's Disease Management Program, call Cindy Ninopranco at (909) 623-6333 ext. 298.

## INFLUENZA UPDATE

During the 2003-2004 influenza season, influenza activity in the United States began and peaked earlier than usual and was more severe than the previous three seasons. Influenza A (H3N2) viruses were most commonly isolated, with a small number of influenza B and influenza A (H1) viruses identified. A substantial number of laboratory-confirmed, influenza-associated pediatric deaths were reported in the United States. Beginning with the 2004-2005 season, the Advisory Committee on Immunization Practices (ACIP) recommends that all children aged 6-23 months and close contacts of children 0-23 months receive annual influenza vaccination. The other primary target groups recommended for annual vaccination are: \*

- groups who are at increased risk for influenza-related complications (e.g. persons aged >65 years and persons of any age with certain chronic medical conditions;
- persons aged 50-64 years, because this group has an elevated prevalence of certain chronic medical conditions;
- persons who live with or care for persons at high risk (e.g. health care workers and household members who have frequent contact with persons at high risk and can transmit influenza to persons at high risk;

The optimal time to receive influenza vaccine is during October and November. However, because of vaccine distribution delays, the Advisory Committee on Immunization Practices (ACIP) recommends that vaccination efforts in October focus on persons at greatest risk for influenza-related complications and health care workers, and that vaccination of other groups begin in November. Vaccination efforts for all groups should continue into December and later, for as long as vaccine is available.



\*Reference: CDC. Prevention and Control of Influenza: recommendations of the Advisory Committee on Immunization Practices

## PROCESS IMPROVEMENT AT INTER VALLEY HEALTH PLAN

The most recent execution of process improvement includes a Provider Appreciation Program. Inter Valley recognizes the importance of providers in the member's overall experience and perception of the health plan. The Plan recently developed a program to reward providers who go the extra mile on behalf of Inter Valley members and; when working cooperatively with the health plan. A taskforce developed the Provider Appreciation program, which was implemented in June.

Inter Valley plans to recognize individual providers and staff, provider groups, hospitals, pharmacies and ancillary providers when they go the extra miles. We know these providers work hard for our members and we want to show our appreciation with various gifts. Some of the actions we plan to recognize include:

- Successful audits (Claims, QM, UM, Credentialing)
- Sales Referrals
- Cooperation with Member Services Issues
- Cooperation with Grievances and/or Appeals
- Meeting and/or improving HEDIS measures
- Performing "above & beyond" for the benefit of our Members

Thank you to all of our Providers and keep up the good work!



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**EDITOR'S NOTE:** We value your opinion. If you have any comments on this issue of Info-Link or have a topic suggestion for future issues, please contact Cyndie O'Brien at 909/623-6333 or e-mail [cobrien@ivhp.com](mailto:cobrien@ivhp.com).

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InterValley Health Plan  
HEALTH SERVICES



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# pharmacy

U P D A T E

## MAXIMIZING OUR PHARMACEUTICAL DOLLAR

Through the years health plans have promoted generic and OTC medications to its members and the prescribers in an effort to maximize the value of the dollar both for its members and it the health plan.

In recent years many blockbuster medications have become available in OTC or generic form thereby relieving some financial stress on the pharmacy budget. Unfortunately, this vacuum is quickly occupied by new medications. In some cases old blockbuster medications have been chemically altered in order to be considered a new chemical entity and qualify for a new patent. These “Me Too” medications offer little or no advantage to the original compound but the cost differential can be astronomical.

Inter Valley Health Plan similar to all competitor plans have promoted generic medications for its members. The generic utilization at Inter Valley averages 70% across all counties and this utilization rate is partly attributed to key therapeutic categories having a generic medication available. With the cooperation of our providers and incentive to our members, Inter Valley Health Plan has maximized the financial advantage of generic medications. This has allowed Inter Valley to maintain key brand medications necessary to treat certain diseases available to our members. Additional cost reduction may be achieved by prescribing brand medications (if generic is not available) that have flat pricing across all dosage strengths and promoting tablet splitting to members.

At Inter Valley the top 50 brand and generic medications by volume represents over 56% of all the prescriptions written and accounts for 52% of the pharmacy expenditure. (see table on back)

Pharmacy expenditure continues to increase at a faster rate than most other cost in health care. The new medications and biological agents on the horizon will continue to financially stress the health system. Our commitment is to continue working with our providers to maximize the purchasing power of pharmaceutical dollar in order to provide the best possible care to our members.



*Continued on back*

### TOP 25 GENERIC MEDICATIONS BY VOLUME

PERCENT OF TOTAL CLAIMS	DRUG	COST/RX
4.23%	LISINOPRIL	\$17.19
3.38%	ATENOLOL	\$8.53
3.22%	LOVASTATIN	\$42.57
2.35%	FUROSEMIDE	\$4.89
2.12%	METOPROLOL	\$7.19
2.10%	HYDROCHLOROT	\$5.11
1.92%	LEVOXYL	\$13.10
1.88%	HYDROCO/APAP	\$13.19
1.71%	METFORMIN	\$31.97
1.44%	KLOR-CON	\$9.70
1.22%	GLIPIZIDE	\$13.62
1.20%	TRIAM/HCTZ	\$8.55
1.16%	POTASSIUM	\$11.12
1.16%	WARFARIN	\$17.95
1.07%	LORAZEPAM	\$17.50
1.07%	DIGITEK	\$7.12
1.05%	ENALAPRIL	\$17.65
1.02%	RANITIDINE	\$18.99
0.95%	GLYBURIDE	\$20.84
0.94%	ALBUTEROL	\$19.21
0.88%	PROPO-N/APAP	\$15.89
0.86%	VERAPAMIL	\$18.50
0.83%	DILTIAZEM	\$30.44
0.79%	TERAZOSIN	\$28.02
0.76%	TRIAMT/HCTZ	\$11.26
<b>39.29%</b>		<b>\$16.36</b>

### TOP 25 BRAND MEDICATIONS BY VOLUME

PERCENT OF TOTAL CLAIMS	DRUG	COST/RX
1.52%	LIPITOR	\$105.10
1.27%	LESCOL	\$72.65
1.21%	FOSAMAX	\$89.47
1.18%	SYNTHROID	\$17.72
1.09%	PLAVIX	\$141.72
1.06%	PREMARIN	\$39.67
1.04%	ACTONEL	\$80.68
0.82%	XALATAN	\$64.00
0.70%	PROTONIX	\$107.07
0.64%	BENICAR	\$52.37
0.59%	CELEBREX	\$114.85
0.58%	NORVASC	\$61.31
0.53%	NEURONTIN	\$117.42
0.50%	EVISTA	\$98.19
0.50%	HUMULIN	\$61.30
0.49%	ARICEPT	\$148.03
0.45%	FLOMAX	\$77.79
0.42%	VIOXX	\$102.39
0.42%	LOTENSIN	\$42.13
0.39%	TOPROL	\$34.75
0.38%	AMBIEN	\$78.86
0.37%	LANOXIN	\$7.52
0.36%	LEXAPRO	\$70.57
0.36%	DETROL	\$103.22
0.33%	ADVAIR	\$171.98
<b>17.20%</b>		<b>\$81.55</b>