

**PUBLISHED FOR INTER VALLEY HEALTH PLAN PHYSICIANS**

# Info-Link

**Spring 2009**

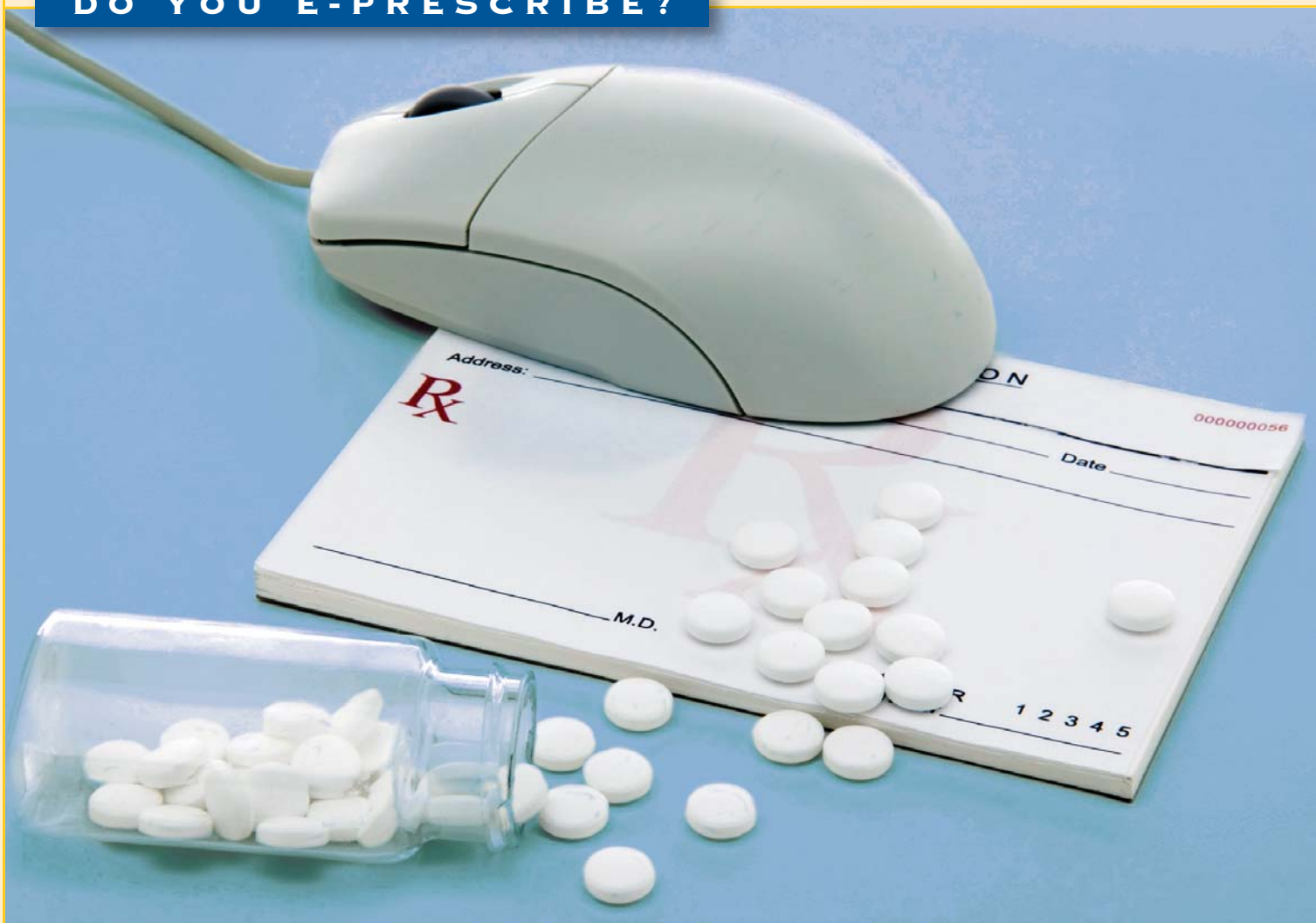
 **Inter Valley Health Plan**  
For health. Not for profit.

## **DO YOU E-PRESCRIBE?**

**E-PRESCRIBING HELPS ELIMINATE  
MEDICATION ERRORS AND IMPROVES  
PATIENT CARE. DETAILS INSIDE**



## DO YOU E-PRESCRIBE?



Electronic prescribing or e-prescribing, allows physicians to electronically send a clear and accurate prescription directly to a pharmacy. With just a few clicks and keystrokes you can help ensure that each of your patients is getting the correct medication.

Need more incentive? In 2009, fee-for-service physicians and providers who e-prescribe may be eligible for an incentive payment of 2% of their entire Medicare allowed charges.

To qualify for this incentive, doctors will need to use an e-prescribing system that can:

- Communicate with a patient's pharmacy
- Identify appropriate drugs and offer lower cost alternatives
- Provide information on formulary medications
- Alert doctors to possible concerns such as improper dosing, allergies, or adverse drug interactions.

Medicare will provide information and education to help you decide which e-prescribing system is right for you.

E-prescribing helps eliminate medication errors and improves patient care. What more incentive do you need?



## THE COST OF DIABETES

Approximately 1 in 10 health care dollars in this country is spent on diabetes. In 2007, diabetes cost the nation \$174 billion, according to the American Diabetes Association (ADA). This is an increase of 32%, or \$42 billion, since 2002. The ADA also reports that the medical costs for a person with diabetes are 2.3 times higher than for someone without it.

Here are some stunning figures from The State of Diabetes in America report:

- In 2006, the nation spent about \$22.9 billion on direct medical costs related to diabetes complications.
- Annual healthcare costs for a person with type 2 diabetes complications are about three times that of the average American without diabetes.
- Diabetes complications, which include heart disease, stroke, eye damage, chronic kidney disease and foot problems leading to amputation cost almost \$10,000 per person each year.
- People with diabetes complications pay on average nearly \$1,600, sometimes as high as \$3,400, for costs that are not reimbursed by insurance.

How can doctors help curb these skyrocketing costs? One of the key ways is prevention. The National Institute of Diabetes and Digestive and

Kidney Diseases (NIDDK) reports that we could reduce instances of type 2 diabetes by 58% through “intensive lifestyle interventions.” By continuing to encourage patients to adopt healthy diet and exercise habits, doctors can save lives, and dollars.

For those already suffering from diabetes, medications can be costly. Inter Valley Health Plan’s **FOCUS SNP** (Special Needs Plan) is designed to provide diabetes patients with better access to more affordable medications.

Under **FOCUS SNP** approved medications\* used to control blood sugars are offered in TIER 3 at:

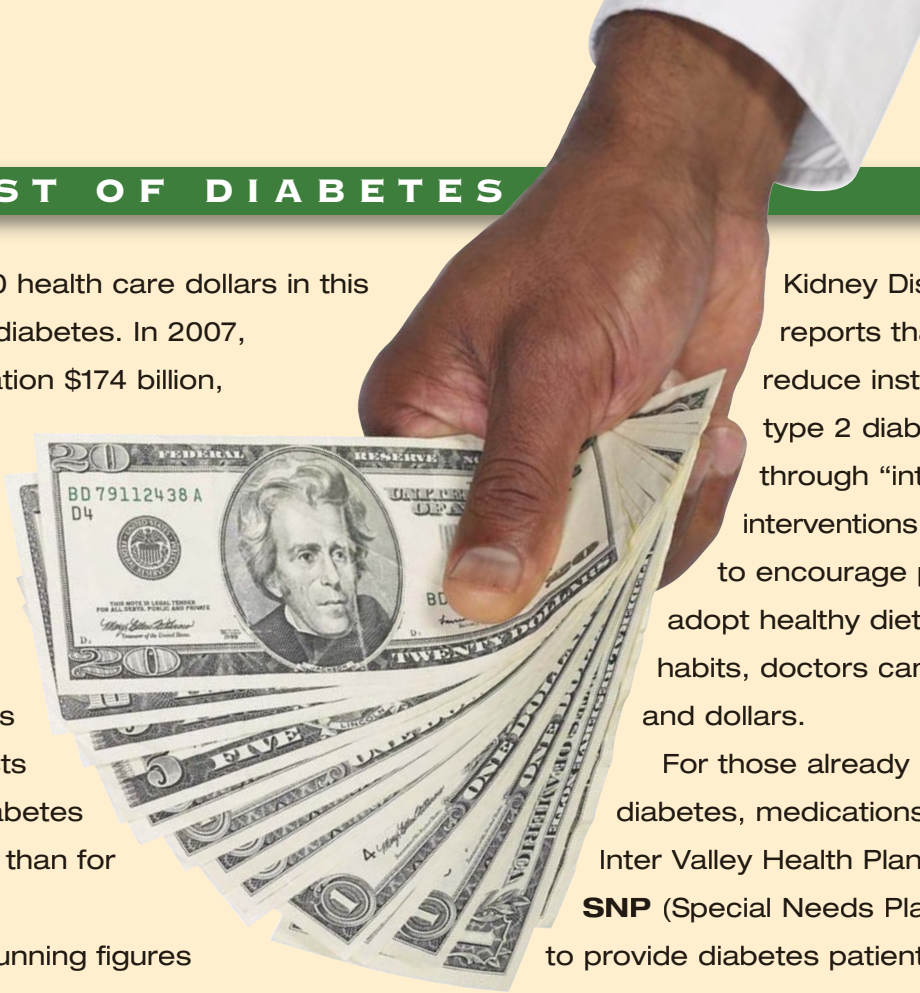
- \$7 for a one month fill or \$14 for a three month fill via mail order

This Tier 3 cost is also available to members in the coverage gap when they would usually be responsible for the entire cost of medications.

The **FOCUS SNP** also offers members:

- A transportation benefit
- A one-time in-home comprehensive assessment
- Access to Inter Valley’s Care Management Team made up of nurses and a social worker who can provide care coordination, coaching, education and motivation over the phone.

With **FOCUS SNP**, members with diabetes can get the treatment they need and the peace of mind they deserve.



\*See approved medications in the FOCUS SNP Formulary.

## HOW DOES THE HEALTHCARE YOU PROVIDE MEASURE UP?



The results are in and the 2008 State of Health Care Quality report, published by the National Committee for Quality Assurance (NCQA), showed improvements in 24 of 45 measures of care. Two of the standouts were the persistence of beta-blocker treatment after a heart attack and the proper management of antidepressants. But it wasn't all good news. The NCQA also reported some unsettling declines in screening rates for breast and colon cancers. The numbers don't tell the whole story, but they do highlight the year's ups and downs for Medicare health plans.

With these facts in mind, Inter Valley Health Plan would like to commend its providers for their commitment and achievements in several dimensions of care.

Though many of the report's results were positive, there will always be areas that need improvement. Our 2008 HEDIS results revealed just what some of those areas are.

MEASURE	INTER VALLEY RATES		2008 NCQA BENCHMARKS		
	2007	2008	50%	75%	90%
Controlling Blood Pressure	64.96	<b>69.59</b>	58	62	67
Comprehensive Diabetes: Lipid Profile	85.4	<b>89.05</b>	86	89	93
Comprehensive Diabetes: Monitor for kidney disease	86.37	<b>87.59</b>	86	90	94
Comprehensive Diabetes: BP <130/80	26.28	<b>74.94</b>	30		41
Comprehensive Diabetes: BP <140/90	59.61	<b>92.94</b>	58		69
Cholesterol Mgmt w CV Cond: LDL Screening	89.05	<b>92.21</b>	80	90	93
Comprehensive Diabetes: HbA1c Testing	88.56	86.37	90	93	94
Comprehensive Diabetes: Eye Exam	60.34	51.09	63	73	82
Cholesterol Mgmt/LDL-C <100	49.64	54.50	56		69
Breast Cancer Screening	74.07	70.98	73	79	84
Colorectal Cancer Screening	53.77	52.80	53	70	
Persistence of Beta Blocker Treatment	67.65	64.18	71	77	87

Several doctors deserve special recognition for their commitment and performance in controlling blood pressure. These doctors were able to help control the blood pressure of 90% of their patients with documented hypertension, helping Inter Valley Health Plan to score in the top 10 percent of health plans nationwide.

Site/Provider	% of Members with controlled blood pressure
Paliwal, Yogesh K.	90.00
Ahn, Kyu D.	92.86
Riverside Medical Clinic – Corona	100.00
Mantha, Usha	100.00
Kusunis, Keith	100.00

## NEW HEDIS MEASURES IN 2009

MEASURE	SCREENING, TEST OR CARE NEEDED
<p><b>Adult BMI Assessment*</b> Members 18-75 years of age who had an outpatient visit in the measurement year and had their body mass index documented.</p>	<p><b>Medical record documentation must include:</b> Date of the BMI BMI value <i>Documentation of only height and weight does not meet HEDIS criteria.</i></p>
<p><b>Medication Reconciliation Post-Discharge*</b> Patients aged 65 and older for whom medications were reconciled on or within 30 days of discharge from January 1 to December 1 of the measurement year. SNP-only reporting</p>	<p><b>Medical record documentation must include:</b> Evidence of medication reconciliation 30 days after discharge from acute or non-acute facility Date of actual medication reconciliation</p>
<p><b>Care for older adults*</b> Patients aged 65 and older who had each of the following during the measurement year: Advance care planning Medication review Functional status assessment Pain screening SNP-only reporting</p>	<p><b>Medical record documentation must include:</b> Advance care plan or initiation of discussion Medication list and evidence of a review Functional status assessment Pain screening results or pain management plan</p> <p style="text-align: right;"><i>*Measures collected with medical record review</i></p>

For 2009, the NCQA has added three new measures to the HEDIS review which focus on obesity screening and senior care. Have a look at the table above to see what these measures are and what they will require.

Inter Valley thanks all the providers who participated in the 2008 HEDIS review. We appreciate your cooperation and efforts and look forward to even better results next year.

The ultimate goal of any health care provider should be to elevate the quality of care and quality of life for patients and their families. This is why Inter Valley's Medical Director, Dr. James Reilly, urges all health care providers to keep striving to meet that goal.

### INTER VALLEY HEALTH PLAN HAS A SOCIAL WORKER ON STAFF

In an effort to continuously care for our members, we have an experienced Social Worker to assist your Inter Valley patients so they can remain as independent as possible to live and thrive in their community.

Our Social Worker employs the use of bio-psycho/social assessments to develop short term and long term goals. Patients are screened to determine if they qualify for programs such as Medi-Cal, In-Home Supportive Services, or other low income subsidies. Families can get information on hiring a private caregiver, or how to make plans for healthcare placement.

For information on how to get help from our Social Worker for your Inter Valley patients, call 800-251-8191. Please use the enclosed Social Work Referral Form to help your patients.



## A NEW PARTNERSHIP FOR MEDICARE BENEFICIARIES

Two of the most respected names in senior health care are pleased to announce a new partnership—just for people on Medicare!

Inter Valley Health Plan and Desert Oasis Healthcare introduce a new Medicare Advantage health plan called Desert Preferred Choice!

The new health plan is available to all Medicare beneficiaries residing throughout the Coachella Valley. Members of Desert Preferred Choice will enjoy a wide range of benefits including physician visits, dental care and prescription coverage.

Desert Oasis Healthcare has been serving patients in the Coachella Valley since 1981. In addition to a network of over 110 primary care physicians, nurse practitioners, pharmacists, social workers, and physical therapists, Desert Oasis brings a wealth of knowledge and experience in serving the healthcare needs of seniors.

“We are always looking for ways to improve service to our members,” said Desert Oasis Medical Director, Marc Hoffing. “Partnering with a stellar organization like Inter Valley Health Plan will enable us to do just that.”

As part of their broad scope of health programs for seniors, the Living & Aging Well program at Desert Oasis healthcare emphasizes wellness and disease management. Working as a team, physicians, nurse practitioners, and social workers care for home-bound, medically complex, and custodial (long-term care) seniors.

DESERT  OASIS  
HEALTHCARE

Your Health. Your Life. Our Passion.

## EXPANDING PHARMACY OPTIONS



In 2009, Inter Valley Health Plan is expanding members' options by offering two mail order pharmacies instead of one. We will continue our relationship with **Walgreens** while forging a new one with **Integrated HMO Pharmacy**.

Mail order can be used for many maintenance prescriptions and Inter Valley offers 90 day fills for Service To Seniors, Focus and Value plans on most brand and generic drugs. Remember, the Inter Valley copay for a 90-day supply from our mail order pharmacy is less than it would be at a retail store. To find out which copay amounts have changed, see the new 2009 Comprehensive Formularies. You can find the updated formularies at [www.ivhp.com](http://www.ivhp.com).

If you have any questions, please contact our courteous Pharmacy Staff at 800-523-3142.

## PHARMACY INCLUSIONS AND EXCLUSIONS

Inter Valley Health Plan's Pharmacy and Therapeutics Committee will review all drugs for formulary inclusion or exclusion. And, as some drugs that are included in the formulary may require prior authorization, Inter Valley believes that our physicians should be kept up to date of the Committee's decisions. Physicians can stay informed through *Info-Link*.

Change Sep - Dec 2008	Covered Name	Alternate Name	Strength	Dosage Form	Route
PA Removed 2009*	Pravastatin	Pravachol	All	Tablet	Oral
PA Removed 2009*	Avodart	Dutasteride	0.5mg	Capsule	Oral
PA Removed 2009*	Requip	Ropinirole	All	Tablet	Oral
PA Removed 2009*	Mirapex	Pramipexole	All	Tablet	Oral
PA Removed 2009*	Casodex	Bicalutamide	50mg	Tablet	Oral
Moved to preferred Tier in 2009	Celebrex	Celecoxid	All	Capsule	Oral

\*(i.e. no longer requires Prior Authorization)

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### EDITOR'S NOTE:

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



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## MEDICAL GROUPS TAKE ADVANTAGE OF OLDER ADULT SENSITIVITY TRAINING

As a health care provider, you see many older patients that need that extra care and sensitivity when they go to your office. We have professional healthcare liaisons who conduct educational training for your frontline staff to give them tips on how to communicate effectively with senior patients. Your staff will learn how to make your older patients more comfortable, and to encourage trust and good communication.

This in-service is at no-cost to you and your medical staff. Just call us at 909-623-6333 ext 625 and we can schedule this training.

Inter Valley would like to acknowledge the following medical groups for utilizing this important senior-friendly training!

**Desert Valley Medical Group**

**HealthCare Partners Medical Group**

**San Bernardino Medical Group**

