

GTCIPA Specialist Newsletter

-Fall 2010-

Are You Ready for the New Medi/Medi?

Now accepting the new Evercare DH plan!

Greater Tri Cities began accepting this plan October 1st! Please be sure your office knows how to recognize these members.

- You do not need to be a Medi-Cal provider!
- Greater Tri Cities IPA will pay the member's copay!
- Members are easy to identify by their ID card!

Greater Tri Cities is offering optional informational meetings for your office staff. If you are interested in attending, please call Elizabeth Tamulis (760)941-7309 x140.

Need to Know:

Provider Relations

From Mary Beltran, Provider Relations

Effective January 17, 2011:

Appointment Access Standards – Medical (Specialists)
Updated maximum wait times are outlined in **bold** font

ACCESS TYPE	STANDARD
Access to urgent care (specialist and other) Services that require prior authorization	Within 96 hours of request
Access to non-urgent appointments with a specialist	Within 15 business days of request
In-office wait time for scheduled Appointments (PCP and specialist)	Not to exceed 15 minutes
Access to preventive health services	Within 30 business days of initial request
Non-urgent appointments for ancillary services for the diagnosis or treatment of injury, illness or other health condition	Within 15 business days

For more details go to: www.healthnet.com/provider>provider
operations manual>provider oversight>service and quality requirements>access to care and availability standards

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"We can offer help with referrals, DME, home health and overall case management of complex or non-compliant patients as well"

Claims Corner

Submitting Medi/Medi Claims:

Please be aware that you **DO NOT COLLECT COPAYS FROM EVERCARE DH PLAN MEMBERS**. Instead, GTCIPA will PAY THE MEMBER'S COPAY when the claim is submitted by the specialist. You will be reimbursed your usual contract rate WITHOUT THE COPAY REDUCTION removing the need to bill Medi-Cal for this amount.

The Importance of Authorizations:

We are happy to be able to offer your specialty care to Greater Tri Cities' members. We value your expertise and respect your medical decisions.

As you know, our Primary Care Providers refer members to your care, and as a reminder, authorizations are important when seeking further care for these patients. We expect that care is directed through the Primary Care Physician.

As always, we are here to work with you. You can reach the claims department by selecting option 3.

GREATER TRI CITIES
IPA

Independent Physicians – Providing Personal Care

Greater Tri Cities IPA is proud to be **the only locally owned and operated IPA in the Tri City area!**

My Desk to Yours: Case Management

As always, we are grateful for the care you provide our members! As case managers facing the upcoming Flu season, we are taking extra measures to educate our patients, especially those considered high risk. Some high risk patients include, children less than 5 years of age, adults 65 years of age and older, pregnant women, and individuals with preexisting medical conditions.

While Primary Care Physicians play the major role in this education, we recognize the importance of specialists. Many patients visit their specialists more frequently than their PCPs. Please take this opportunity to reiterate preventative flu measures.

The Center for Disease Control (CDC) recommends a yearly flu vaccine as the first and most important step in protecting against this illness. The CDC also recommends the following as preventative measures:

- (1) Avoid close contact
- (2) Stay home when you are sick
- (3) Cover your mouth and nose.
- (4) Clean your hands.
- (5) Avoid touching your eyes, nose or mouth.
- (6) Practice other good health habits.

The Center for Disease Control is an excellent resource for further information (www.cdc.gov). Thank you for your partnership in combating the flu this season.

Thank You,
Iselda Gentry, RN
Case Manager

Behind the Charts: Risk Adjustment

The Risk Adjustment Department concentrates on sharpening general documentation to meet CMS regulations. This extends beyond the Primary care office. Specialists have the opportunity for individualized care, but this does not mean that Risk Adjustment is not important. In many cases, members visit there Specialist more frequently than their Primary care provider. Therefore, Specialists offer a unique porthole for Risk Adjustment.

Natural tendency is to document the condition that the patient is seen for during their visit. However, the most optimal approach for patient care stresses coding all know chronic conditions. It is also important to note, the words "history of" denote the patient no longer has the condition. If the condition is instead controlled with medication, proper documentation would state "controlled on meds." The more specific the documentation, the better the patient's RAF score. Indicator words further specify patient conditions. Is the condition acute or chronic, primary or secondary, active or in remission, complicated, or a late effect of a previous condition? Please indicate so by document the condition as thoroughly as possible. (Please see the attached handout for further tips by specialty.)

In an effort to capture all appropriate diagnosis codes, the Risk Adjustment Department will be conducting chart reviews of specialists' offices. We are only looking for codes to help correctly compensate patient care. If you would like further resources or have any questions, please feel free to contact me directly.

Denie Vivas
dvivas@pdtrust.com

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Important Contacts GTCIPA **(760) 941-7309**

Kathi Toliver- Administrator- **X135**

Mary Beltran- Provider Relations- **X132**

Cheryl Burton – RN/Case Manager **X133**

Iselda Gentry – RN/Case Manager **X106**

Referrals Dept – **option 2** (9 am - 5 pm)

Claims Dept – **option 3** (9 am - 3 pm)

Spanish Line – **X197**

Office Address:
Greater Tri Cities IPA
161 Thunder Dr. #212
Vista, CA 92083

Mailing Address:
Greater Tri Cities IPA
PO Box 5059
Oceanside, CA 92052

Please visit our website
www.gtcipa.com