Provider Newsletter

Quality

How Care Management Can Help You

Care Management helps members with healthcare or social needs. It pairs members with a Care Manager. The Care Manager is a registered nurse, a licensed clinical social worker or other licensed health professional who can help the member with issues like:

- Complex medical needs
- Solid organ and tissue transplants
- Children with special health care needs
- Lead poisoning

We're here to help you!

Please contact us at **1-866-635-7045** for more information on our program. A WellCare staff member will tell you about the program. This no-cost program gives you access to a registered nurse (RN) or licensed clinical social worker (LCSW), Monday through Friday from **8 a.m. to 5 p.m. Eastern Time.**

In This Issue

Join the Conversation on Social Media

Join our digital and social communities for up-to-date information on how we're working with you and others to help our members live better, healthier lives.

WellCare®
Beyond Healthcare. A Better You.

WellCare: Taking Additional Steps to Protect Members' Health Amid COVID-19 Outbreak

As we continue to learn more and address the novel coronavirus and its resulting illness COVID-19, we want to update you on important coverage information around its testing, treatment and care.

WellCare will be extending coverage for COVID-19. This important step is being taken in partnership with other major insurers and with the support of the White House Coronavirus Task Force.

We intend to cover COVID-19 testing and screening services for your Medicare and Medicaid members and are waiving all associated member cost share amounts for COVID-19 testing and screening. To ensure that our members receive the care they need as quickly as possible, **WellCare** will not require prior authorization, prior certification, prior notification or step therapy protocols for these services.

This coverage extension follows the Centers for Medicare & Medicaid Services' (CMS) guidance that coronavirus tests will be fully covered without cost-sharing for Medicare and Medicaid plans, a decision that **WellCare** fully supports for our members covered under these programs. We also support the administration's guidance to provide more flexibility to Medicare Advantage and Part D plans.

The specific guidance includes:

- ☑ Waiving cost-sharing for COVID-19 tests
- ☑ Waiving cost-sharing for COVID-19 treatments in doctor's offices or emergency rooms and services delivered via telehealth
- ☑ Removing prior authorizations requirements
- ☑ Waiving prescription refill limits
- ☑ Relaxing restrictions on home or mail delivery of prescription drugs
- ☑ Expanding access to certain telehealth services
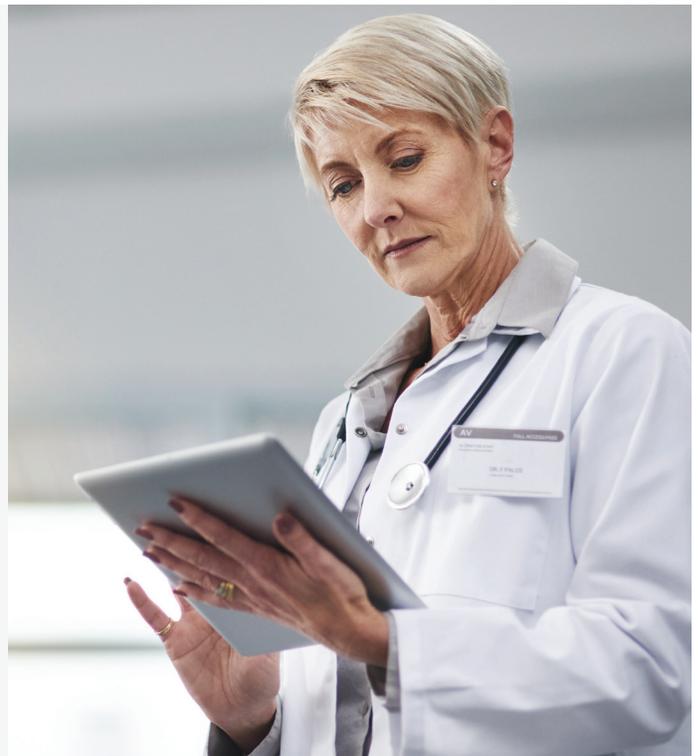
WellCare has been working in close partnership with state, local and federal authorities to serve and protect patients during the COVID-19 outbreak, including ensuring that its members and providers have the most up-to-date information to protect themselves and their families from the virus. We remain committed to protecting our communities during the outbreak.

To ensure you are keeping your environment safe from the coronavirus, please refer to the CDC guidelines here: **https://www.cdc.gov/coronavirus/2019-ncov/downloads/workplace-school-and-home-guidance.pdf**

Effective Communication with Patients

The ability to effectively and compassionately communicate information is key to successful patient-provider relationships. The present health care environment has increasing demands on productivity and affords less time with each patient, which can hinder effective communication.

Here are some things providers can do to communicate more effectively with patients:

- Listen carefully to the patient and respect their point of view
- Remember the patient has come to you for help. Be empathetic and acknowledge their feelings.
- Reassure the patient you are available to help them
- Check often for patients' understanding
- Respect the patient's culture and beliefs
- Explain medication in simple, easy to understand language. Tell them why they may want to take the medication and why they may not want to take the medication.

Successful communication can impact patient outcomes. Open communication leads to more complete information, which enhances the prospect of a more complete diagnosis, and can potentially improve adherence to treatment plans.

Source: ACOG,

"Effective Patient-Physician Communication", retrieved from:
https://www.acog.org/Clinical-Guidance-and-Publications/Committee-Opinions/Committee-on-Health-Care-for-Underserved-Women/Effective-Patient-Physician-Communication

Engaging your Patients in Medication Adherence Discussions

According to the American Medical Association, patients only take their medications half of the time. Adherence is defined as a patient who takes their medications at least 80% of the time, and with the current rate of 50% adherence in the general public, this is an area worth addressing. To combat this lack of adherence, engaging with your patients is essential.

Below are some tips on how to assess for medication adherence in your patient.

1 Create a routine by asking every patient about their adherence to medications.

2 Ask open ended questions:

    a. Can you tell me how you are taking this medication?

    b. What do you think about this medication?

    c. How do you remember to take your medicine?

3 Ask the patient about barriers that hinder them from taking their medication.

    a. What bothers you about this medication?

    b. What stands in the way of you taking your medicine?

4 Offer a supportive, non-judgmental atmosphere by utilizing motivational interviewing:

    a. Listen to the patients concerns

    b. Ask the patient about their health goals

    c. Avoid arguments and adjust to resistance

    d. Support optimism and give encouragement

    e. Understand and respect patient values and beliefs

5 If the patient states he/she is non-adherent, thank him/her for sharing before continuing to assess.

6 Develop a plan to address barriers the patient is experiencing and involve the patient in your decisions. One way to do this is to offer clinically appropriate options for them to choose from.

    a. Utilize the word "we".

    b. We can try option 1 or option 2. What do you think about these options? Which of these do you think best suits you?

! We value everything you do to deliver quality care to our members – your patients.
Thank you for playing a role in assessing and improving medication adherence in your patients.

Reference:

1. AMA Ed Hub and Society of General Internal Medicine, "Medication Adherence Improve Patient Outcomes and Reduce Costs," retrieved from:
    https://edhub.ama-assn.org/steps-forward/module/2702595

2. AMA. "Nudge theory explored to boost medication adherence," retrieved from:
    https://www.ama-assn.org/delivering-care/patient-support-advocacy/nudge-theory-explored-boost-medication-adherence

3. Treatment Improvement Protocols Series, "Chapter 3-Motivational Interviewing as a Counseling Style," retrieved from:
    https://www.ncbi.nlm.nih.gov/books/NBK64964/

4. American Association of Diabetes Educators, "Fostering Medication Adherence Tips and Tricks," retrieved from:
    https://www.diabeteseducator.org/docs/default-source/living-with-diabetes/tip-sheets/medication-taking/fostering_med_adherence.pdf?sfvrsn=4

Clinical Practice Guidelines

Clinical Practice Guidelines are best practice recommendations based on available clinical outcomes and scientific evidence. WellCare Clinical Practice Guidelines reference evidence-based standards to ensure that the guidelines contain the highest level of research and scientific content. Clinical Practice Guidelines are also used in efforts to improve the quality of care in our membership. The Clinical Practice Guidelines listed below are available on the WellCare Provider Resources website: **https://www.wellcare.com/Provider/CPGs**

Autoimmune
- Rheumatoid Arthritis

Behavioral Health CPG's
- ADHD
- Anxiety Disorders
- Autism Spectrum Disorder
- Behavioral Health Conditions and Substance Use in High Risk Pregnancy
- Behavioral Health Screening in Primary Care Settings
- Bipolar Disorder
- Child and Adolescent Behavioral Health
- Depressive Disorders in Children and Adolescents
- Eating Disorders
- Gender Reassignment, Transgender Issues
- Opioid Use Disorder and Treatment
- Persons with Serious Mental Illness and Medical Comorbidities
- Post-Traumatic Stress Disorder
- Schizophrenia
- Substance Use Disorders
- Suicidal Behavior

Cardiology
- Cardiovascular Disease
- Cholesterol Management
- Congestive Heart Failure
- Hypertension

Children and Adolescent
- Congenital Disorders
- Congenital Metabolic Disorders
- Neonatal and Infant Health
- Special Healthcare Needs for Children and Adolescents

Dental
- Dental and Oral Health

Endocrine
- Diabetes in Adults
- Diabetes in Children
- Obesity in Children and Adults

Hematology and Oncology
- Cancer
- Hemophilia
- Palliative Care
- Sickle Cell Disease

Infectious Disease
- Hepatitis
- HIV Screening and Antiretroviral Treatment
- Managing Infections
- Pneumonia

Neurology
- Epilepsy
- Neurodegenerative Disease
- Pain Management
- Traumatic Brain Injury (TBI)

Preventive
- Adolescent Preventive Health
- Adult Preventive Health
- Fall Risk Assessment
- Frailty and Special Populations
- Older Adult Preventive Health
- Pediatric Preventive Health

Pulmonary
- Asthma
- COPD
- Tobacco Cessation

Renal
- Acute and Chronic Kidney Disease

Women's Health
- Osteoporosis
- Preconception and Inter-Pregnancy
- Pregnancy and Post-Partum Care

Clinical Policy Guiding Documents (CPGDs)
- CPG Hierarchy
- Health Equity, Literacy, and Cultural Competency
- Long Term Services and Support (LTSS)
- Quality Improvement

New Medicare ID cards for 2020

WellCare is changing our Medicare Member ID cards for the 2020 plan year. The new layout utilizes a larger font, making it easier for our members to read.

Learn what else is changing in your state: AL, AR, AZ, CT, GA, IL, LA, ME, MS, NC, SC, TN, TX

Please Note: *No card change content for IN, MO, NH, OH, or WA as these are new CARE markets for 2020.*

RxEffect Provider Tool

RxAnte offers an innovative quality platform called RxEffect. The platform is free to WellCare provider groups and offers targeted patient lists, daily claim updates, and strong workflow support for your practice to support improved medication adherence for your WellCare members. Active use of the RxEffect tool has been shown to improve quality measure outcomes and help streamline effective member outreaches to support adherence.
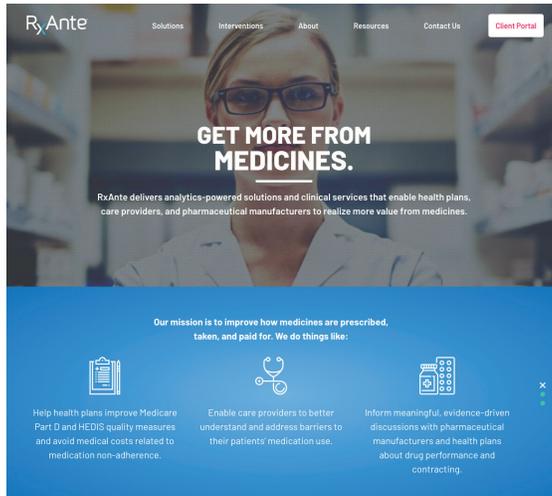
Be on the lookout for some exciting new RxEffect Enhancements in 2020, including:

- New PCP Attribution - allowing more groups to engage more effectively in RxEffect
- Saving Filters Modification - improving workflow efficiency by allowing practice-users to save more filters
- Polypharmacy Measures – added to improve a provider's ability to manage medication adherence and outreach to members

Check out the RxEffect Video here: **https://www.youtube.com/watch?v=loEKiM7veZQ**

For more information on RxEffect, please visit the website at **www.rxante.com** and speak with your WellCare Provider Relations and Quality Representative.

Medication Adherence and RxEffect™

To help with medication adherence, WellCare engages our members with refill reminder phone calls, off-therapy (missed dose) phone calls and letters as well as utilizing our network pharmacies to help counsel our members. However, there is nothing as powerful as a reminder from the member's primary care provider about the importance of medication adherence.

RxEffect™ is an online platform available to WellCare Medicare provider groups to help improve members' medication use and compliance.

Talk to your WellCare associate today to get users from your office access to the RxEffect™ portal.

This web portal:

- ☑ Is sponsored by WellCare – so there is no cost to our provider partners
- ☑ Uses predictive modeling to target the patients who need it most
- ☑ Uses real-time monitoring of pharmacy claims and is updated daily
- ☑ Includes opportunity flags for 30-day conversions, diabetic patients not on statins, Appointment Agendas and high-risk medications

Skilled Nursing and Home Health Billing Updates

Medicare Fee-for-Service (FFS) is introducing new payment methodologies for HH and SNF services. For FFS SNF and HH providers, the Skilled Nursing Facility Patient Driven Payment Model (PDPM) will be effective October 1, 2019 and the Home Health Patient Driven Groupings Model (PDGM) will be effective January 1, 2020. These new payment models introduce new HIPPS code sets for HH and SNF services.

- SNF encounters with "from" dates on or after October 1, 2019 and HH encounters with "from" dates of service on or after January 1, 2020 may be submitted using the existing HIPPS codes or the new HIPPS codes.
- SNF encounters with "from" dates of service prior to October 1, 2019 should continue to be submitted with existing HIPPS codes.
- For SNF stays lasting 14 days or less in which an Admission assessment was not completed prior to discharge, MAOs may submit the HIPPS code from another assessment that took place during the stay or submit a default HIPPS code.

The default HIPPS code for encounters with a "from" date of service prior to October 1, 2019 is "AAA00." The default HIPPS code for encounters with a "from" date of service on or after October 1, 2019 is "ZZZZZ."

- HH encounters with "from" dates of service prior to January 1, 2020 should continue to be submitted with existing HIPPS codes.

Please ensure your billing offices are aware of the new billing requirements and have your systems updated accordingly.

Electronic Funds Transfer (EFT) through PaySpan®

Five reasons to sign up today for EFT:

- ☑ **You** control your banking information.
- ☑ **No** waiting in line at the bank.
- ☑ **No** lost, stolen, or stale-dated checks.
- ☑ Immediate availability of funds – **no** bank holds!
- ☑ **No** interrupting your busy schedule to deposit a check.

Setup is easy and takes about five minutes to complete. Please visit **www.payspanhealth.com/nps** or call your Provider Relations representative or PaySpan at **1-877-331-7154** with any questions.

We will only deposit into your account, **not** take payments out.

Updating Provider Directory Information

We rely on our provider network to advise us of demographic changes so we can keep our information current.

To ensure our members and Care Management staff have up-to-date provider information, please give us advance notice of changes you make to your office phone number, office address or panel status (open/closed). Thirty-day advance notice is recommended.

New Phone Number, Office Address or Change in Panel Status:

Please call us at **1-855-538-0454**.

Thank you for helping us maintain up-to-date directory information for your practice.

Community
Connections HELP Line
1-866-775-2192
We offer non-benefit resources such as help with food rent and utilities

Provider Formulary Updates

There have been updates to the Medicare formulary. Find the most up-to-date, complete Formulary at **www.wellcare.com**. Select your state from the drop-down menu and click on Pharmacy under Medicare in the Providers dropdown menu.

You can also refer to the Provider Manual to view more information regarding WellCare's pharmacy Utilization Management (UM) policies and procedures. To find your state's Provider Manual visit **www.wellcare.com**. Select your state from the drop-down menu and click on Overview under Medicare in the Providers drop-down menu.
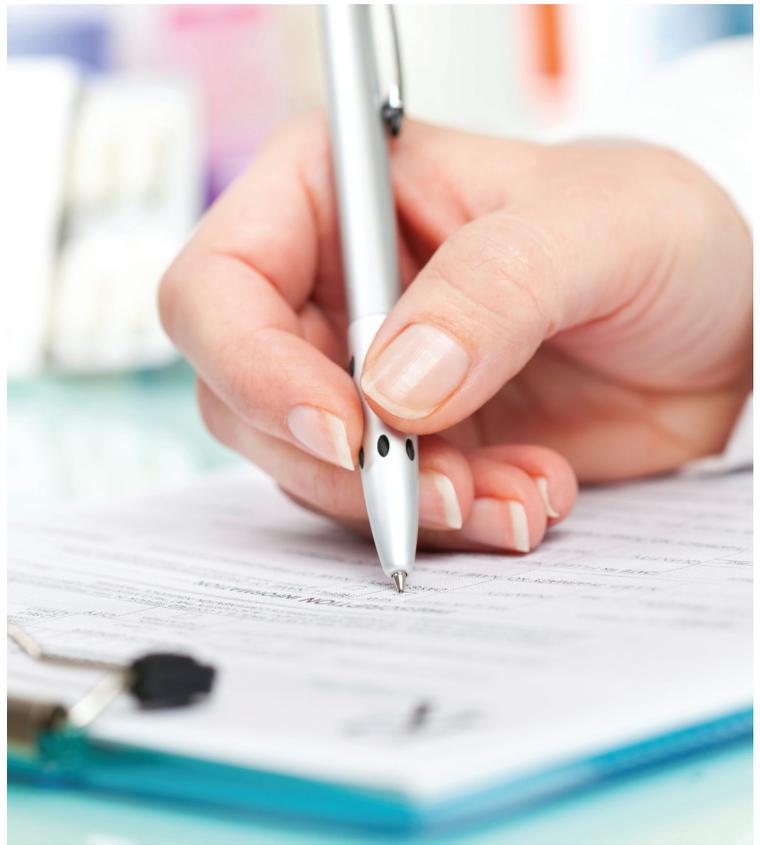
We're Just a Phone Call or Click Away

WellCare Health Plans, Inc.: 1-855-538-0454

www.wellcare.com/providers

Representing the following states: AR, CT, GA, IL, LA, MO, MS, NH, NY, SC, TN, TX, WA

Provider Resources

Provider News – Provider Portal
Remember to check messages regularly to receive new and updated information. Access the secure portal using the Secure Login area on our homepage. You will see Messages from WellCare on the right.

Resources and Tools
Visit **www.wellcare.com/Providers** to find guidelines, key forms and other helpful resources. You may also request hard copies of documents by contacting your Provider Relations representative.

Refer to our *Quick Reference Guide*, for detailed information on areas including Claims, Appeals and Pharmacy. These are at **www.wellcare.com/Providers**, click on Resources under your state.

Please remember that all Clinical Guidelines detailing medical necessity criteria for several medical procedures, devices and tests are available on our website at **www.wellcare.com/Providers**, click on Clinical Guidelines under your state.