



NEWSLETTER Second Quarter 2002

NovaHealth is an Independent Practice Association established to ensure that participating providers have the economic freedom to focus on improving their patients' health status and to partner with patients to manage care.

QUALITY INITIATIVES

Low Back Pain Project Update



TIPAAA Best Practice Award

The IPA Association of America at its annual conference in San Diego recognized the work of the Low Back Pain Task Force. Nova was one of four recipients of the 2002 Best Practices Award.

handouts including Managing Acute Back Pain: Information, Stretches and Exercises, Intermediate Exercises and Advanced Exercises. The handouts were presented to the physicians at the April Shareholder meetings and were presented to the nurse practitioners and physician assistants at a special education program. Each physician has received handouts. Please contact Heather if you need additional copies.

The next steps outlined by the Task Force include the piloting of a group visit curriculum to help manage recurrent acute situations and the development of a pain management team for chronic back pain patients.

HPHC QUALITY AWARD 2002

Harvard Pilgrim announced in May its selection of quality award recipients. The number and depth of applicants actually delayed the decision making process. Nova was once again selected to receive a grant of \$25,000. The amount of the grant is determined by Nova's HPHC membership size. The funding was provided to support the work outlined by the Back Pain Task Force relative to recurrent acute and chronic back pain.

The first step in addressing the recurrent acute patients was the development of the patient

MAY 2002 MID LEVEL PROVIDERS DINNER MEETING

Nurse Practitioners and Physician Assistants from several InterMed and PrimeCare family practice, pediatric and internal medicine offices met in May at the Saco Conference Center to participate in an interactive education program presented by Paul Simonsen, PT and John Pier, MD regarding the low back pain initiative. We appreciate the time Paul and John spent developing an outstanding program, including the use of case studies. Each attendee received the recently developed Acute LBP Stretches and Exercises. Heather will forward materials and

notes from the evening to those who were unable to attend.

REMINDER: The LBP Video and Brochure can be reviewed on the website www.nova-health.org

NETWORK DEVELOPMENT

**Sarah Street Taylor, P-MH,
N.P., M.S., C.S.
Joins**



Integrated Behavioral Healthcare is pleased to announce that Sarah Street Taylor, P-MH N.P., M.S., C.S. has recently joined our staff. Ms. Taylor is a certified Psychiatric/Mental Health Nurse Practitioner. She received her undergraduate degree from Miami University in Oxford, Ohio, and her master's degree in nursing from the University of Southern Maine.

We are also delighted to report that, on a recent thirty-six item site-review survey by ValueOptions, the behavioral health carve-out for Harvard Pilgrim Health Care, Integrated scored 100%.

Please contact Heather at 846-5621 if you are in need of Integrated brochures – a revised version is now available.



Heather Cabading has been introducing the clinical staff at each Nova site to Jeni Shields

from New England Life Care (NELC). NELC has been providing an overview of their Home Infusion and Respiratory Therapy services, answering questions and offering helpful hints (i.e., Medicare referral requirements). Meetings are also underway with hospital Care Coordinators from SMMC, MMC, Mercy and Goodall in order to facilitate NELC's early involvement in the discharge of appropriate patients. In addition to the site meetings, Andy Heindl presented information regarding NELC to the mid level providers attending the May Education Program.

NOTE: If you have any questions, Jeni can be reached at 878-1288.

PEER TO PEER

Allergy Tests in the Primary Care Office

Richard Tockman, MD

Allergy testing can be done in the primary care physician's office with screening allergy tests for common allergens. It allows the primary physician to decide whether a patient is in need of a more extensive allergist's consultation and can often give specific information as to what patients are reacting to. At our office, we skin test for histamine and glycerin control and fourteen common allergens. The test takes about a half hour to develop and a physician or nurse can read the results. We have found the test to be convenient, safe and cost effective. If there are only one or two reactions, specific advice and treatment can be given. If there are multiple reactions, then it is appropriate to refer the patient to an allergist.

For further information about the specific tests and safety measures, refer to the physician section of the nova-health.org website.

CONTRACTING NEWS

MHMC Informing Patients and Rewarding Practitioners Project

Drs. Claffey and Albaum currently serve on the IPRP initiative designed to improve the quality of care for persons with chronic disease through identifying the physician practices delivering the best chronic illness care, letting employers and employees know who they are, and financially rewarding those practices for their superior care.

The employers are responding to two recent developments. One is the rapidly rising cost of health care, disability, and the other costs of poor health, especially chronic disease. The other is the growing recognition that their employees and their families are looking for meaningful comparative quality information on providers in order to make choices for themselves and family members. The employers feel there are many high quality providers in Maine, and want to help their employees go to them.

The four main areas of focus of the initiative are:

- A survey of the systems in place in physician offices to help manage the care of persons with chronic disease (e.g. diabetes, asthma, depression, and cardiovascular disease).
- Analysis of how well practices follow the best evidence based guidelines for administering the recommended tests and treatments for persons with chronic disease.
- Compilation of the outcomes of care (i.e. how much better a person is after treatment) of the leading practices.
- Finding ways to increase both financial and non-financial rewards to those practices delivering the best quality care to employees and their families.

The group hopes this effort will lead to increased quality improvement efforts within practices to improve the quality of care for persons with chronic disease all across Maine. We are encouraging the Committee to focus on process and structure measures rather than disease specific outcomes.

Maine Partners / Anthem Update

InterMed has concluded initial discussions with Anthem regarding participation in the Maine Partners product. InterMed will continue participation through the PHO until June 30, at which time the Anthem agreement will apply. Patients will not experience any disruption in services and the transition should be transparent.

We continue to appreciate the support Anthem has shown for our quality initiatives and our ability to begin to lay the foundation for a partnership committed to improving quality.

ANTHEM / HMO MAINE

Ahead of Budget for 2001;
Withhold Return Due for 2000

The most recent Anthem report showed spending \$4.27 per member per month under budget based upon 67,012 member months.

Preliminary numbers from 2000 – 2001 show a partial return of withhold due. We have forwarded questions to Anthem, based upon the Meritus analysis and anticipate a resolution shortly.

CIGNA HEALTHCARE

The Medical Expense Target (MET) for 2001 is \$115.55 per member per month. The most recent Cigna reporting for the time period January – December 2001 showed spending \$5.86 over budget with 50,745 member months. The Payer Issues Committee met

recently with representatives from CIGNA to discuss concerns relative to administrative and payment problems. Please contact Heather Cabading if you have specific examples of issues needing attention.

ADMINISTRATIVE ISSUES

MedUnite's Mission

To lower healthcare administrative costs for providers and payers by replacing today's slow and inefficient paper-based system with one that works in real-time using Internet-based technology.

Nova met recently with a representative from MedUnite – a company founded by seven major national Payers including Aetna, Anthem and Cigna, that operates an internet-enabled connectivity system to handle healthcare transactions such as claims processing, pre-certifications, eligibility verification, formulary compliance, and electronic payments. We anticipate participation with MedUnite for purposes of entering referrals and pre-certifications, and for checking eligibility and claims status within the next few months.

AETNA / MEDSOLUTIONS

With overall medical costs – and premiums – increasing each year, imaging utilization for Maine markedly higher than the national average, and the cost of certain imaging tests equal to the cost of a day in the hospital, Aetna feels that appropriate utilization of high tech imaging is a reasonable goal. Aetna has contracted with MedSolutions for coordination of their radiology utilization management program. MedSolutions was chosen because they already have a presence in and familiarity with this market. It has been reported that Cigna has realized a 17% decrease in imaging costs since they began their pre-certification program utilizing

MedSolutions. Aetna hopes for similar results.

The forms developed to streamline the process outline the requirements to be met for authorization. They also track with the clinical thought process that evidence based medicine shows to be effective management of care. Office notes can be attached to the form in lieu of filling out portions of the clinical information. There is an option to have MedSolutions place a conference call with the patient and imaging service facility to schedule the testing, rather than utilizing practice staff to perform the scheduling task.

Effective June 1, 2002 the program requires precertification for all outpatient, elective MRIs, MRAs, CTs, PETs and Nuclear Cardiac Imaging Studies for Aetna members with HMO, QPOS, Open Access HMO, Choice POS and USAccess products. We are currently working with Aetna to define the criteria for Gold Card status in the program. Indications are that the decision will be made locally. Aetna is committed to analyzing the data in six months and awarding some level of exemption to the groups who are able to demonstrate appropriate utilization.

In the interim, if you have any questions about the pre-certification requirements or the details of the process, or if you are having difficulty with a specific request, please do not hesitate to contact Heather at 846-5621 or hcabading@nova-health.org. Cindy Stewart is our Aetna Provider Rep. and can be reached at 791-7922 or stewartcl@aetna.com; Patrick Dawson is our contact at MedSolutions and can be reached at 888-295-2954 or Patrick.dawson@medsolutions.com.

CIGNA HEALTHCARE

Cigna has announced that as of May 13, 2002, they have extended the number of days allowed for a retroactive referral from fourteen to thirty.