Opioids –
Patient Safety and Pain Management

According to the 2016 Morbidity and Mortality Weekly Report on Increases in Drug and Opioid-Involved Overdose Deaths, drug-related deaths nearly tripled from 1999 to 2014. In 2014, 60.9 percent of drug overdose deaths involved an opioid. The published data showed that from 2014 to 2015, other synthetic opioid deaths increased 72.2 percent and natural/semi-synthetic opioid deaths increased by 2.6 percent. These numbers are alarming. But with your help, this trend can be reversed and the safety of patients can be maintained.

To tackle this nationwide problem, utilization of the following resources is key. Visit www.hpsj.com/opioids/ to learn more about the topics listed below:

1. CDC Guideline for Prescribing Opioids for Chronic Pain.
2. UCSF Substance Use Management Clinician Consultation:
   - Substance Use Warmline: 855.300.3595
   - Peer-to-peer consultation from physician, clinical pharmacists and nurses
   - Monday – Friday, 10 a.m. – 6 p.m., EST

Figure 1: Although there are several different analysis strategies for opioid overdose deaths, all show there is an upward trend in deaths. However, these are likely underestimates because many overdose deaths do not specify the drug(s) involved.
3. SAMHSA Opioid Treatment Program Directory.
5. Medical Board of California Guidelines for Prescribing Controlled Substances for Pain.
6. CURES 2.0.
7. Opioid Risk Assessment Tool:
   • Considers future abuse, diversion, or misuse if prescribing opioids to high-risk patients
8. National Institute on Drug Abuse Opioid Prescribing Resources.
9. SMARTCARE California:
   • Curbing the Opioid Epidemic checklist
   • Resources for Opioid Prescribers
10. California Health Care Foundation: Understanding the Epidemic Through Data:
    • The California Opioid Overdose Surveillance Dashboard
11. Food and Drug Administration MedWatch Safety Alerts for Human Medical Products:
    • Most recent update April 20, 2017: all prescription codeine- and tramadol-containing products are contraindicated in all children under 12.1

References


It’s Official – It’s Flu Season

We want to help your HPSJ patients get the preventive care they need. Sometimes it can be as simple as a reminder, or fliers posted in examination rooms, or starting the conversation at check-in.

In need of educational materials to post in your office? The CDC is a great resource for printable materials. They also have widgets and other promotional services that can get the word out to those you serve. See what’s available online at www.cdc.gov/flu under Communication Resources. You can search for materials by demographic, to ensure that your patients get the message you want to send about flu vaccines.

Flu vaccines are a covered benefit for HPSJ members and we want to make sure that your patients know to get the vaccines when appropriate.

HPSJ’s pharmacy benefit coverage for the flu vaccine is as follows:

• All vaccines EXCEPT the FluMist and Fluzone HD (high dose)
• Only for patients age 19 and older

24/7 Support

We know flu season can be tough for families and the clinics that serve them. HPSJ is committed to ensuring that all of our members have access to reliable health information 24 hours a day, whenever they need it. HPSJ’s HealthReach Nurse Advice Line includes 24/7 support and now includes a live physician telephone service.

For non-emergent needs and a list of urgent care locations, HPSJ members can call HPSJ’s HealthReach Nurse Advice Line – the number is on the back of their member ID Card. Visit www.HPSJ.com for more information on flu resources and HPSJ’s Nurse Advice Line Services.

For patients under 19 years of age the flu vaccine is covered under the VFC program. We encourage our members under 19 to visit their doctor’s office.
It’s one of the questions we hear most often: **How can I improve the rates for my practice, when it comes to “health care effectiveness data information sets” (HEDIS)?**

First things first. Please know that your involvement is key to the success of member health care outcomes and the health of our communities in San Joaquin and Stanislaus counties.

On a practical level, as HPSJ’s close and valued partner, it is important that you are aware of the care your patients need and that you are able to provide – and document – the regular and timely delivery of that care.

HEDIS measures both the health of our individual members, and – in the aggregate – the broader health and viability of our community. To do this, we look at effectiveness of care, access and availability of care, experience and utilization of care. Within each area, there are nationally recognized measures that represent the highest quality of care to your HPSJ patients.

Some measures are of such great importance that we encourage our providers to address them with their HPSJ patients during every visit. These measures are for:

- **Disease management** – such as diabetic testing, eye exam, controlling blood pressure and asthma medication management
- **Medication management** – those patients with long term medications are expected to fill prescriptions regularly and in a timely way
- **Preventive care** – annual wellness exams, cancer screenings and immunizations for children
- **Obstetrical care (as appropriate)** – prenatal care (as early in the pregnancy as possible), frequent prenatal visits and timely postpartum care which includes a complete exam

**After the appointment – Working with HPSJ members for best health outcomes**

HPSJ understands getting the patients in for care is only half the challenge. The other half is encouraging compliance with your treatment plans and recommendations. We are working to increase the education for our members so they can better work with you to improve their care. Here are some of the ways we are doing this:

- Member incentives that encourage compliance with wellness exams and disease management.
- Increased member outreach in treatment areas that have lower than desired compliance rates, as well as those treatment areas where we hope to increase collaboration of care across multiple treatment areas.
- Programs for OB care which show members their providers and HPSJ are working together to support their healthy pregnancies and babies.

The recently enhanced HPSJ Prenatal/Postpartum Program includes mailings with education and information that is specific for each trimester, as well as outreach calls to members with specific information and reminders of milestones throughout pregnancy and after delivery.

**HPSJ goes beyond: Provider Incentives & Support**

Our year-round efforts to improve reporting of the care our members receive is a never-ending quest.

- **Quarterly provider payouts** for key items have been added to the annual incentive payouts.
- **Provider education** related to claims and encounter data are regularly offered – timely and accurate submissions will always be essential so we can capture the services delivered.
- **Provider tools** continue to be enhanced – for example, the HEDIS Provider Tip Sheet – along with other resources to ensure HPSJ is communicating clearly and efficiently with each of our providers.

In the spirit of collaboration, we encourage you to continue our two-way communication.

- **What barriers are you experiencing in your practice?** HPSJ will work quickly to resolve those barriers.
- **What are we doing that is working?** Good to know, so we can keep doing what works for your practice and our members.

To provide us your feedback, call our Provider Services Department at **888.936.PLAN (7526)**.
Antibiotic resistance is a significant health concern. There are a growing number of reports of antibiotic resistant infections and the R and D pipeline for new antibiotics does not look promising.

There is increasing awareness of the rise of unkillable superbugs. Earlier this year a woman in Reno passed away due to an infection that was resistant to all 26 antibiotics available in the United States. In September, doctors in China reported a new strain of Klebsiella pneumoniae that is both hyper-resistant and hyper-virulent. While antibiotic exposure is linked to the emergence of antibiotic resistance, it can be slowed by the appropriate use and the appropriate choice of antibiotics.

At least 30% of antibiotics prescribed in the outpatient setting are unnecessary, meaning no antibiotic was needed at all. Most of these are for acute viral respiratory conditions such as bronchitis, pharyngitis, asthma, allergies and influenza.

Unnecessary antibiotic prescribing in primary care is a complex phenomenon that is mainly related to factors such as non-specific symptoms, diagnostic uncertainty and a patient's perceived expectations. Many patients often carry misconceptions about the advantages and disadvantages of antibiotics. Some patients also believe that antibiotics treat viral infections. It is important to openly convey to patients the true benefits and risks of antibiotics. If antibiotics are not needed, symptomatic treatments can be promoted instead. Shared decision making is a great way of having a collaborative discussion about whether antibiotics are actually needed.

Care Management

Managing a patient is no longer a one-person job. Everyone is demanding more of health care services and sometimes you do not have the resources to provide optimal care. As a Health Plan of San Joaquin (HPSJ) provider, you have the option to refer your HPSJ patients to the supportive services they need.

Do you have an HPSJ patient struggling with any of the following?

- Diabetes
- Asthma
- Heart Disease/Congestive Heart Failure
- COPD
- Medications Management
- Transportation to appointments
- Depression
- Anxiety
- Substance Abuse

In case management, we have registered nurses, social workers and health navigators. Each is trained to help guide your patient to the right services. You do not always have the time to discuss all patient resources. Let us help you start that conversation.

You can refer any HPSJ member, at any time, via the Case Management/Disease Management Referral form. Find the form online under “Provider Forms/Documents” or call us at:

Case Management: 209.942.6352
Disease Management: 888.318.7526
Beacon Health Strategies (Behavioral Health): 888.581.7526
One of our Key New Year Wishes for HPSJ Network Practices & Providers

Our goal this year is to increase encounters – and therefore billings – coming to us from our PCPs for capitated services. We believe this could increase your quarterly provider incentive payments. To learn more, call our Provider Services Department staff 209.942.6340.

Less PCP Practice Churn Equals Stability – For HPSJ patients, and providers!

We all want our members, your patients, to have a stable medical home, and to give you and your practice the best possible opportunity to serve as a gate keeper for their health care needs.

Here are some ideas, if you’re not already trying them, to retain HPSJ members. We hope these will reduce all-around disruptive churning of HPSJ patients, rotating in and out of your PCP care:

a. Schedule non-urgent appointments that are not too far out on the calendar.

b. Always place reminder calls the day before the appointment and remind members/patients about HPSJ’s capability to offer transportation to ensure appointments are kept.

c. If you have multiple PCP providers in your practice, whenever possible try to schedule appointments for your patients with the same PCP – this will encourage a bond, a relationship of trust and the continuity between doctor and patient that are so important for patients’ best health outcomes.

d. Make HPSJ patients aware that HPSJ can assist with transportation needs to ensure appointments are kept – either your practice staff or the patient can call our Customer Service Department at 888.936.PLAN (7526) to make arrangements.

e. Allow for a certain percentage of urgent appointments daily to accommodate sudden illness and to keep the members/patients out of the emergency room.

Information on the Web

Health Plan of San Joaquin (HPSJ) would like to remind you about our website www.hpsj.com/providers/.

We include information about many topics of interest on our website. You can view and/or download information about the following topics on the website.

• The process for facility staff, including discharge planners, to refer members to case management.
• HPSJ’s policy prohibiting financial incentives for utilization management (UM) decision-makers.
• Credentialing and re-credentialing processes.

• What are the rights and responsibilities of HPSJ members?
• How to obtain a copy of criteria used in UM decisions
• Staff availability for UM decisions

If you have any questions about accessing our website or if you would like more information, please call the Provider Services Department at 888.936.PLAN (7526).

The most recent information about HPSJ and our benefits and services is always available on our website at www.hpsj.com/providers/.
Worth the Effort: Bridging the Gaps – Language / Literacy / Cultural Differences

Provider Office Language Assessment Attestation – ANNUAL REQUIREMENT

A key component to new care delivery models – from patient-centered medical homes to accountable care organizations – is the will and skill to engage and educate patients about their health status. HPSJ understands that while doing this can be challenging with all patients, for diverse patient populations it can be even more so, due to language barriers, health literacy hurdles and cultural differences in communication styles.

As required by the California Department of Health Care Services (DHCS), Health Plan of San Joaquin asks that annually you submit your Linguistic Capabilities Assessment. The assessment provides us with valuable information regarding what languages are spoken, written and read in your office. This information is used for our provider directory and helps Limited English Proficient (LEP) members decide on a provider that may best fit their language needs.

If you have not received the Employee Language Skills Self-Assessment tool for Clinical and Non-clinical Staff, please contact the HPSJ Provider Service Department at 888.936.PLAN (7526) for a copy.

Cultural Competency Training – ANNUAL REQUIREMENT

*NEW CHANGE - Providers will receive a Cultural Competency designation in the Provider Directory after attesting to taking a training.

As part of Provider Education for the Medicaid program, Health Plan of San Joaquin (HPSJ) is required to provide annual Cultural Competency training to our participating provider network and delegated entities.

The training is mandated by DHCS and CMS (Centers for Medicare and Medicaid Services, within the federal Department of Health and Human Services) to ensure providers and delegated entities are meeting the unique and diverse needs of all members. As part of new federal requirements, Cultural Competency training will be included in the Provider Directory.

Please go to www.hpsj.com/cultural-competency-training/ to see the training resources available to help you become more culturally and linguistically competent in providing care to our patients. You may download any of the training materials. Some of the trainings available are:

- Optimizing Transgender Health Training - located on the Provider Portal
- A Physician’s Practical Guide to Culturally Competent Care
- Cultural Competency Training for Healthcare Providers: Connecting with your patients
- Cultural Awareness and Sensitivity in Women’s Health Care

Please fill out the attestation form located on the website and fax that back to the Provider Services Department at 888.936.PLAN (7526).

Cultural Competence: Health Care

The ability to provide care to patients with diverse values, beliefs and behaviors, including tailoring health care delivery to meet patients’ social, cultural and linguistic needs.

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Language Assistance Program

Communicating Through An Interpreter

Professionally trained health care interpreters can reduce liability; help ensure appropriate utilization, and increase client adherence and satisfaction with services. Trained interpreters help to assure effective communication between patient and provider, support effective use of time during the clinical encounter, and improve outcomes.

Professional interpreter services for medical encounters must be offered to Health Plan of San Joaquin (HPSJ) non-English speaking or limited English proficient (LEP) Medi-Cal members. Members have the right to receive oral interpreter services on a 24-hour basis at no cost to them. Interpreter services may be provided through an in-person interpreter or telephone language service.

As a subcontracted HPSJ provider, you are required to ensure access to interpreter services for all LEP members. You must document a member’s preferred language (if other than English) in the medical record.

The following are some additional, required provider responsibilities –

- You are required to ensure access to interpreter services for all LEP members.
- At the time an appointment is made with the PCP, interpretive services should be offered to Limited English Proficient (LEP) patients.
- Using family members or friends to interpret should be discouraged.
- It is especially important to discourage minors from acting as interpreters.

- If your patient still refuses an interpreter after being offered one, document the refusal in their medical record. Documentation protects you and your practice. It also ensures consistency when your medical records are monitored through site review audits.

If you are unable to provide services in a member’s language, please contact us. We can provide an interpreter for HPSJ members, 24-hours a day, 7 days a week, at no cost to you or the member. Interpreter services include face-to-face and sign language options as well.

HPSJ is dedicated to working with you to effectively deliver quality health care services to our culturally and linguistically diverse membership.

If you would like to schedule an interpreter for your HPSJ patient, please call Customer Service at 888.936.PLAN (7526).

If you would like to use a face-to-face interpreter, please contact us:

- Five (5) to seven (7) business days in advance, for any language need
- Ten (10) business days in advance, for sign language

Help us use our public funding wisely.

If your office cancels or reschedules a member’s appointment that requires an interpreter, please call HPSJ right away so we can cancel the interpreter and reschedule. Each month a number of the interpretation sessions we are billed for are for cancelled appointments.

If a member calls to cancel an appointment – and you know they have scheduled an interpreter, please remind them (kindly and clearly) to call HPSJ Customer Service to cancel their interpreter or offer to do it for them.
HPSJ Formulary & Coverage Policies – Available Online!

HPSJ’s full formulary is available online for viewing and reference. Please go to www.hpsj.com/formulary.
The online formulary contains:

→ Prior Authorization and Step therapy rule summaries and identifiers
→ Specialty pharmacy restrictions
→ Generic alternatives
→ Formulary changes

Full coverage policies are also available at www.hpsj.com/pharmacy! Coverage policies explain in greater detail what is covered, why it is covered, and the clinical justification behind it. These are available online and are updated quarterly with P&T changes.