

Provider Report™



Buckeye's Affirmative Statement About Incentives

All individuals involved in Utilization Management decision-making at Buckeye Community Health Plan (Buckeye) are asked to sign an Affirmative Statement About Incentives.

Staff receive this statement upon hire and annually thereafter. This statement is distributed upon initial contracting with practitioners and providers and annually thereafter to all network providers.

Buckeye's employee statement:

I understand that decisions regarding the provision of healthcare services shall be based solely on appropriateness of care and services and the existence of coverage. I understand that Buckeye **does not:**

- Employ incentives to encourage barriers to care and services.
- Specifically reward practitioners or other individuals conducting utilization review for issuing denials of coverage or service care.
- Provide incentives for utilization management decision-makers that result in underutilization.

If you have questions about this statement, please contact our Provider Services Department at 1-866-296-8731.

Information regarding Buckeye's Quality Improvement Program description is available for review upon request.

A Silent Danger

Together, we can prevent lead poisoning in Ohio's children.

By Laura Lance, Program Coordinator, Buckeye Community Health Plan

Lead poisoning is the No. 1 environmental threat to America's children. It is imperative that we acknowledge its presence and make lead screening a priority. Since lead poisoning doesn't present itself until untreatable, preventive efforts are critical.

Children receiving Medicaid are at great risk for elevated lead levels due to their surroundings. According to the latest county and state testing rates gathered by the Ohio Department of Job and Family Services, 66 percent of all one- and two-year-olds receiving Medicaid live in what has been designated a high-risk ZIP code for possible lead poisoning. Of this percentage, only half were registered as having been screened. Ohio law now requires all Medicaid-eligible children between ages 12 and 24 months to have an actual blood lead level screening.

Even low levels of lead indicated in the blood can cause health concerns and need to be addressed. Please discuss with patients the hazards that exist when residing in an older house and proper nutrition for those with elevated levels of lead, and refer patients to Help Me Grow and Women, Infants and Children (WIC) programs for additional assistance and education.

When children are indicated with

extremely high lead levels, 20 ug/dl and above, they should be referred to a specialist for continued treatment. Buckeye Community Health Plan's medical management staff is prepared to offer assistance for your patients who have been screened as having lead levels present.

Buckeye understands the current issues regarding our members' susceptibility to lead poisoning and is taking steps to create awareness by educating those involved in caring for our children. During the past year, we attended state lead meetings and served on two major state coalition workgroups regarding lead poisoning prevention. Our medical management staff has been educating families about the long-term effects of this disease and the importance of having each child tested, as well as offering a gift incentive to families that had their children properly screened.

By increasing lead poisoning awareness among the Medicaid population, we can offer a more hopeful and encouraging future for today's children. Ohio Governor Ted Strickland has proclaimed the week of June 7 through 13, 2009, as Childhood Lead Poisoning Prevention Week. Let's work together in supporting this opportunity by taking all preventive measures to keep Ohio's children lead-free.

2 News and Updates From Buckeye

3 Getting Patients in on The Handwashing Act

4 Diabetes Resources Available in Spanish

CVS Caremark Provides Specialty Pharmaceuticals

Check out the many services they offer.

CVS Caremark is Buckeye's preferred provider of specialty injectable and oral pharmaceuticals. Caremark will ship drugs and supplies directly to a member's home or to the physician's office.



Caremark is available for the following services:

- Phoned-in or faxed prescriptions.
- Consultation with an experienced pharmacist specially trained in injectable drugs.
- Patient support and service from pharmacists and customer staff.

- Enhanced compliance to prescribed therapy.
- Education about injectable drugs and disease states.
- Injectable drug refill reminders and a convenient drug reorder process.

Most injectables require prior authorization to be approved for payment. Please refer to the Buckeye website at www.bchpohio.com. Click Provider Home, then Resources, then Forms

for Caremark specialty drug prior authorization forms. Caremark can be reached toll-free at 1-800-237-2767 for further information.

Prior Authorization News

As you are aware, Buckeye Community Health Plan [Buckeye] now has prior authorization services available in our Akron, Cleveland, Toledo and Columbus offices. As a result, there are dedicated nurses available to handle your pre-service and concurrent review requests right away.

Buckeye is also pleased to announce that our average turnaround time for all provider requests is currently less than three days. This is significantly less than the state requirement of 14 days or less for nonurgent requests. Our Buckeye goal is to handle all urgent requests in less than 24 hours, and nonurgent requests within three to five days.

We are proud of our turnaround time, and we hope you are seeing improved service based on this fact. And, while we are certainly pleased with these numbers, we are always looking for ways to improve the quality of the services that we provide to you as our providers. Therefore, please reach out to us, and let us know how we are doing. Your opinion matters!

BUCKEYE DRUG LIST ONLINE Buckeye Community Health Plan [Buckeye] is pleased to remind you that the Buckeye drug list (DL) is available online at www.bchpohio.com under Provider Home in the Provider Quick Links section. Please refer to the DL for the most current list of covered medications.

All drugs covered under the Ohio Medicaid program are available for Buckeye members. However, Buckeye may require prior authorization of drugs differently than the Ohio Medicaid program does. The Buckeye DL includes all drugs available without prior authorization and some that do require prior authorization. Name-brand drugs that have generic equivalents are not listed on the Buckeye DL and require prior authorization. The Buckeye DL does not:

- Require or prohibit the prescribing or dispensing of any medication.
- Substitute for the independent professional judgment of the physician/clinician or pharmacist.
- Relieve the physician/clinician or pharmacist of any obligation to the patient or to others.

Buckeye Drug List Updates

Recent additions to the Buckeye drug list not requiring prior authorization include:

- Peak flow meters
- Orapred
- Unisom

Drugs that have been removed from the Buckeye drug list and require prior authorization include:

- Lamictal starter kits, due to lamotrigine being available in generic form



Did You Know?

InterQual criteria are available for your review by request.

Wanted: Washed-Up Docs

A little nudge from your patients can help you clean up your act.

Did you wash your hands? It's estimated that healthcare practitioners comply with recommended hand-hygiene procedures less than 50 percent of the time. So, although most patients probably won't ask you that question, they should—for their own protection. Unfortunately, most patients don't feel comfortable challenging healthcare professionals, especially about something as basic as hand hygiene.

In a recent study published in *Quality and Safety in Health Care*, British surgical patients were asked about their willingness to ask certain questions of doctors or nurses. They were least willing to ask

challenging questions related to patient safety, including “Have you washed your hands?” Those least willing to challenge healthcare staff were male, unemployed and less-educated patients. Doctor support makes a difference, however:

Provider Pointer

Here's the recommended three-for-all strategy to address obesity in adults and children:

1. Perform body mass index (BMI) assessments to identify obesity risk.
2. Track annual changes in BMI.
3. Provide counseling on nutrition and physical activity.

Patients said they would find it easier to ask those same questions if a doctor instructed them to ask.

Empowering patients to take more responsibility for their own safety can effect positive change. Hand-washing compliance increased by 50 percent in a UK program in which participating hospital patients asked “Did you wash your hands?” of all healthcare workers having direct contact with them.

Consider launching an ongoing, office-wide campaign to empower your patients. Use simple “Ask me if I've washed my hands” signs, stickers and waiting-room handouts. Or wash your hands in front of patients while encouraging them to ask.

Diabetes Info en Español

An estimated one in eight Hispanics takes a prescription drug for diabetes. A new publication can help these patients better understand their condition and compare oral medications. *Pastillas para la diabetes tipo 2* is a free Spanish-language consumer guide available from the Agency for Healthcare Research and Quality (AHRQ). You'll find it a useful tool in provider-patient discussions about how various

diabetes drugs work to control blood sugar, their potential side effects, comparisons of dose and average cost and appropriate doses when the drugs are taken in combination. The guide compares 10 generic and 13 brand-name diabetes medications.

To view the Summary Guide online and its English version, *Pills for Type 2 Diabetes*, visit effectivehealthcare.ahrq.gov and click Consumers. There's also a link to Summary Guides for

clinicians at that site. You can order copies of the consumer guide for your patients by phone at 1-800-358-9295, or by e-mail at AHRQpubs@ahrq.hhs.gov. Request AHRQ Publication Number 07(08)-EHC010-2B or 07(08)-EHC010-2A for the English version.

The AHRQ consumer and clinician guides are based on the 2007 evidence-based report "Comparative Effectiveness and Safety of Oral Diabetes Medications for Adults with Type 2 Diabetes," which is a review of 216 scientific research studies.

Sounds Like Diabetes

Once you've established treatment plans for your patients with diabetes, your top priority is to monitor how well each plan is working. To do that, you'll need to regularly review the results of each patient's lab tests and eye exams. Spot something curious or an unexpected deviation from the usual pattern? Discuss it with the patient and explain any changes you make to the treatment plan. The best way to stay ahead of diabetes complications is to stay on top of lab tests and eye exams.

When speaking with diabetic patients, be aware of their increased risk for hearing loss. In a recent study published

in the *Annals of Internal Medicine* of more than 5,000 adults ranging in age from 20 to 69 years, prevalence of hearing loss was 21 percent among those with diabetes, compared with 9 percent among nondiabetics. The study subjects reported no other factors that could cause the hearing loss, including smoking, exposure to loud noises and use of ototoxic medication. The degree of hearing loss ranged from mild to moderate.

Although current treatment guidelines don't recommend a routine hearing test for diabetic patients, you're in a frontline position to determine which patients are likely to benefit from such an intervention.

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