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Health Care Legislation Update

The Affordable Health Care for America Act, passed the U.S. House of Representatives on Saturday, November 7, 2009. Similar legislation is now under consideration by the U.S. Senate. The following are key features of the legislation as passed by the House that are of interest to physicians:

- *Expansion of Medicaid.* Individuals and families with incomes at or below 150% percent of the federal poverty level will be eligible for an expanded Medicaid program.
- *Medicaid Payments for Primary Care Services.* To improve provider participation in this vital safety net – particularly for low-income children, individuals with disabilities and people with mental illnesses – reimbursement rates for primary care services will be increased to Medicare rates in 2012.
- *Impact on Western Wayne County.* Based upon projections by the House Energy and Commerce Committee, the legislation is anticipated to have the following impact:
 - Provide coverage for up to 134,000 uninsured residents.
 - Provide credits to help pay for coverage for up to 451,000 households.
 - Allow 38,200 small businesses to obtain affordable health care coverage.
 - Provide tax credits to help reduce health insurance costs for up to 27,900 small businesses.
 - Improve Employer coverage for 1,293,000 residents.
- *Medicare Medical Home Pilot Program.* Creates a pilot program to reward providers who agree to make their practice a “medical home” by ensuring full access to patients and providing coordinated and comprehensive care.
- *Taxpayer Surcharge.* The legislation imposes a 5.4 % surcharge on taxpayers with adjusted gross income in excess of \$1 million (married filing a joint return) and \$500,000 (single) at a rate of 5.4 percent.

Visit www.energycommerce.house.gov and select the Affordable Health Care for Americans Act for more information.



UOP Quality Assistance Program Qualifies for BCN Non-Compliant Member Bonus

Once again, UOP has devoted substantial resources in an effort to assist primary care physicians increase their quality scoring in BCN, HAP and Priority. Within the last 90 days, UOP mailed more than 25,000 reminder letters, and placed nearly 9,000 reminder phone calls to patients in need of testing. We know of no other physician organization that performs this service on behalf of its primary care physicians. UOP is well aware that improved quality performance will lead to additional revenue for physicians and will likely lead to more access to patients at some point in the future.

In addition to increasing physician quality scores, the letters and phone calls directed to BCN patients qualify the primary care physicians to receive \$20.00 from BCN for each non-compliant member. Several weeks ago UOP delivered copies of the letters and confirmation of the phone calls to PCP offices along with instructions from BCN explaining how to obtain the funds for non-compliant members. Remember, in order to receive the \$20.00 payment for each non compliant member, you must submit documentation to BCN no later than December 31, 2009.

If you have an questions regarding the UOP Quality Improvement Program or the BCN Non-Compliant Program, please contact Glenda Jaward (x25) or Cyndi Kalin (x28) at UOP at 313-240-9867.

Health e-Blue Data Entry Deadline Set For January 15, 2010

BCN has recently indicated that Health e-Blue has undergone several enhancements and now includes Web pages that are driven by timelier data.

Accordingly, BCN has moved up its deadline to January 15, 2010, for 2009 Performance Recognition Program data submissions into Health e-Blue.

BCN has made it clear that there will be no extensions to input data after January 15, 2010. Please plan accordingly.

BCBSM/PGIP Patient Centered Medical Home (PCMH) News

Each practice unit must have a series of capabilities in place to qualify. Each capability has key elements that must be met. If you wish to learn more about these program elements or wish to have an assessment of your practice, please contact Cyndi (x28) or Glenda at (x25) by calling (313) 240-9867.

Tips for Improving Your Utilization & Quality Scores:

Careful tracking of these services can improve your patient outcomes and lower your utilization scores.

Extended Access versus Emergency Department. Can you provide extended access to your practice for your patients by: Extending your hours some days each week (earlier AM or later PM, Saturday hours)

- Seeing walk in patients
- Having some day appointments available
- Refer to a reliable local Urgent Care site
- Arranging for physician coverage for your unavailable hours
- Availability by pager through your voice mail message or answering service.

If so, you may be able to keep your patients with preventable primary care sensitive conditions (cold, flu, etc.) coming to you versus going to the local emergency room.

Inpatient Utilization. The more education and individual self management support you can provide your chronic disease patients, the more successful your practice will be in keeping those patients out of an inpatient setting. Identifying and monitoring gaps in care and providing resources for patient chronic disease education can lower your patient admit rate and length of stay.

Test Tracking, Coordination of Care and Specialist Referral.

Tracking your patient's, referrals, tests, labs, etc. is always a challenge. Have you tried a tracking log? These logs can show: Patient name

- Date referral/test was ordered
- What test was ordered or Specialist referred to
- Date test results or consultation notes were received
- Date of notification to patient of test results or follow-up from consultation
- Comments regarding either test or consultation outcomes
- Date of next visit or follow up of missing results/consultation feedback.

Logs can keep errors in tracking patient care down to a minimum as well as eliminate gaps in care and dangerous overlaps in care. Missing or duplicated tests/immunizations, prescription overlapping/duplicate medication, conflicting plans of care and duplication of radiological imaging can cause harm to your patients. Careful tracking of these services can improve your patient outcomes and lower your utilization scores.

Pharmacy Update

UOP's Preferred Drug list has been updated and will be posted on our website. www.uopdocs.com.

Speaking of Generics, *Did you know?*

Prevacid (Lansoprazole) has just gone generic and has an OTC option. Not all insurance companies will cover the OTC version due to the lower 15mg dosage.

Allegra D 12 hr is now generic, however the 24 hour Allegra D is not generic.

Hyzaar is scheduled to go generic April 2010.

Benefits of Membership in UOP

In addition to the financial rewards from access to some of the best healthcare contracts in the market, membership in UOP provides other important benefits to its physicians such as:

- Discounted pricing for EMR.
- Discounted pricing for Eprescribing.
- Discounted vehicle purchasing.
- Discounted medical supplies.
- Discounted office supplies.
- Discounts on ATT & Sprint Cellular Telephones

For other benefits please visit www.uopdocs.com, and select physician benefits under the physician tab. If you would like UOP to explore discounts for other services or products, please contact Charlotte at UOP at 313-240-9867 ext. 10.

Provider Reminders

Credentialing – When you have any changes to your address, tax id, phone number, fax number please notify UOP so we may notify the appropriate Health Plans of the changes.

Also, when you receive a UOP Recredentialing Application, please complete and mail it back ASAP. UOP follows NCQA guidelines and we must recredential you accordingly or you risk de-participation with the Health Plans as well as your UOP Membership.

OHSCare – Authorization requests for services or DME require a physician's order and should be mailed or faxed (313 240 9869) directly to UOP. Requests to UOP from vendors will not be accepted.

Health e Blue – If your office has any questions regarding the use of Health e Blue, or you need help with training or loading data, please contact Glenda Jaward at UOP at 313-240-9867 x25.