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Substantial Increase In Hospital Expenditures To Result In Large Deficit For 2009 BCN Settlement

We have received financial information from BCN in connection with your 2009 performance that we would like to share with you to make you aware of the financial impact on your 2009 BCN Settlement. The information indicates there will be a deficit in the 2009 BCN Contract due to an unanticipated significant increase in expenditures for inpatient services. As you will see in the attached document from BCN, there is a deficit of \$3,656,636.00 in the Inpatient Risk Sharing Fund compared to a surplus of \$822,204 in the Outpatient Risk Sharing Fund.

Despite the fact that UOP physicians have improved their quality score and GUR to nearly 81%, and are practicing cost effective medicine; in accordance with your BCN Contract, your withhold funds will likely be used to partially offset the deficit and as a consequence you will probably not be receiving a BCN Settlement for 2009. (Please note that the deficit will not impact the quality incentive monies BCN provides, so please continue your good work with practicing quality medicine and remember to check your scores on Health e Blue.)

Based upon our experience in 2009, going forward, it will be necessary for our physicians to carefully monitor and review inpatient utilization.

Please be advised that UOP will be holding meetings to further explain this and other significant issues facing physicians, and consider our options.



Incentive Programs Provide Additional Source of Revenue for PCPs

Improved quality performance as defined by health plans and the government can lead to additional revenue for PCPs. Below is a brief summary of the incentives available to UOP PCPs:

BCN

- Base PRP -- Payout at \$.50, \$.75, or \$1.25 pmpm based on the PCP's composite target rate.
- Blue Reward\$ -- E-prescribing incentive.
- Pay As You Go -- One payment up to \$25.00 per member for each PAYG service performed in 2010.
- 2010 BCN Advantage -- payments up to \$100 per eligible member per service.

Priority

- Partners in Performance -- payouts ranging from \$10 to \$200 per measured member for specific services performed.
- Payouts for e-prescribing and generic prescribing rates.
- After Hours Services -- payment for services covered by CPT codes 99050, 51 & 53.
- Telephone & E-visits -- payment for services covered by CPT codes 98966, 67 & 68, 99442, 43 & 44.

Molina

- Administrative Bonus -- up to \$1 per member per month for open panel status.
- Bill Aboves ranging from \$25 to \$75 per eligible service.
- Chronic Disease Comprehensive Diagnosis Exam Program -- \$100 per service rendered
- Chronic Illness Reporting Program -- \$10 per eligible member per year.
- Medicaid Special Needs-- \$100 per service rendered.
- Year end bonus -- up to \$2 per member per month for qualifying members based upon percentile rank for the performance of qualifying measures

Total

- Payments ranging from \$10 to \$25 per member for each qualifying service performed in 2010.

If you have any questions regarding the above programs or need help with your quality scoring, please contact Glenda Jaward (x25) or Cyndi Kalin (x28) at UOP at 313-240-9867.

PCP Corner

Cancer Risk in CT Scans

According to a US study published in the journal Archives of Internal Medicine, the cancer risk associated with obtaining a CT is routinely quoted as approximately one in 1,000 patients. However, the study also indicated that in regard to certain groups of patients that undergo a CT scan, the risk of getting cancer in connection with certain kinds of scans was as high as one in 80. We need to become more aware of the importance of controlling the use of a Hi Tech radiology testing as additional information regarding the cumulative effective of radiation becomes available.

Patient Centered Medical Home (PCMH) News

Blue Cross Blue Shield of Michigan is currently conducting its site visits of our 21 nominated practice units. Congratulations to Allenwood Family Health Care PC (Dr. Terry Hahn and Dr. Mark Wein) who received a special recognition award for their work in PCMH and were selected as a training site by BCBSM for their site evaluation team. We wish them good luck in their pursuit of a PCMH designation. If you wish to learn more about the PCMH program elements or wish to have an assessment of your practice unit done by our staff, please contact Cyndi at ext. 28 or Glenda at ext. 25 by calling (313) 240-9867. We will work with you and your staff to determine how PCMH ready your practice unit is.

Evidence Based Care Measures and Preventive Services

At the end of 2009, UOP sent 2 waves of over 26,000 letters and made over 8,000 phone calls to physicians and patients regarding their gaps in care. If you have patients needing immunizations, or preventive/chronic disease testing that haven't contacted your office, please notify them of the need to schedule an appointment to receive these services. If you are unsure how to enter their results into their health plan electronic systems please contact Glenda at ext. 25 by calling (313) 240-9867. These steps will improve your utilization and quality scores. *TIP: Using a patient registry log to track these patients needing services can save you time and eliminate slippage.* Contact Cyndi at ext. 28 for more information regarding a patient registry.

EMRs and E-prescribing

CMS has released proposed rules for demonstrating "meaningful use" of EHRs/E-prescribe and receiving incentive payments. The new rules extend the timeline for beginning to receive payments but the deadline to avoid penalties remains 2015. Payments will not be made without the sustained demonstration of "meaningful use" by a provider.

Molina Capitation and Bonus Rates Maintained!

Recently, the Michigan Department of Community Health (MDCH) reduced the Medicaid Fee Screen by 4% in July 2009 and 4% in October 2009 resulting in a total reduction of 8%. Molina Healthcare has announced that Primary Care Capitation rates are remaining intact and Molina is working to ensure that Primary Care Providers are appropriately compensated for the services rendered to Molina Healthcare Members especially in these trying economic times.

In addition, Molina has announced the following Molina Healthcare payments have NOT been reduced:

- Immunization bonus rates
- EPSDT rates
- Administrative bonus rates
- CDPS Bonus rates
- Annual bonus rates
- Inpatient Hospital Services
- Outpatient Hospital Services
- Nursing Facilities

If you have any questions regarding Molina payments, please contact Molina Provider Services at 1-866-449-6828, ext. 155822. If you are not a Molina provider and would like to become one, please contact Joyce Dunlap at UOP at 313-240-9867 x21.

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. Remember there is no cost for recredentialing, but because UOP follows NCQA guidelines, we must recredential you accordingly or you risk de-participation with the Health Plans and 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.