



network & provider  
**news**

**Lovelace**  
Health Plan

summer 2010 | [lovelacehealthplan.com](http://lovelacehealthplan.com)

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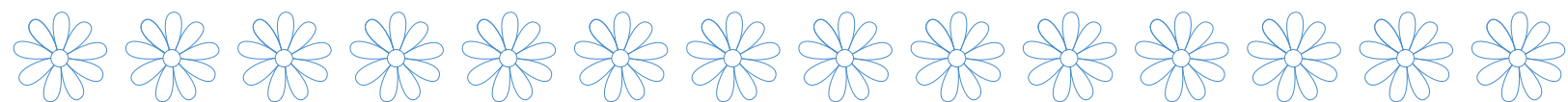
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# network & provider news

LHP Network & Provider News is a publication for Lovelace network partners  
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Heather Ingram  
*Director Customer Care*

Your hard work is helping Lovelace build the best health care team in New Mexico. Comments and questions are appreciated. Call (505) 727.5683 in Albuquerque or (800) 808.7363 statewide or write Doreen Renna, Provider Services Supervisor, Lovelace Health Plan, 4101 Indian School Rd. NE, Suite 110, Albuquerque, NM 87110

Call us toll free (800) 808.7363

#### Provider Response Team

(505) 727.5456 or (800) 808.7363

#### Network Operations Provider Services

- Bernalillo County Specialists and Eastern New Mexico - Adolfo Martinez (505) 727.5489
- Northern New Mexico - Patty Lewis (505) 727.5136
- South Central NM, Bernalillo Behavioral Health and Santa Fe County - Sonia Gonzales (505) 727.5293
- UNM, Lovelace Health System, ABQHP, CareCentrix, Chaves County, Eddy County and Lea County - Christi LaPlante (505) 727.5799
- Southwest NM and Bernalillo County PCP's - Julie Freeman (505) 727.5138

Behavioral Health Providers will utilize the Network Operations Provider Service Representatives for the above geographic regions.

#### Health Services

(505) 727.5683 or (800) 808.7363

#### Quality Management

(505) 727.5282 or (800) 808.7363

#### Disease Management & Health Promotion

(505) 727.5344 or (877) 480.9368

#### NurseAdvice New Mexico

(877) 725.2552

#### Health Status Management

(505) 727.5527

#### Fraud and Abuse Hotline

(505) 727.5384

#### Prevention and Medicaid Outreach

(505) 727.5365



# New Faces

Lovelace Health Plan is pleased to announce that Randy Hulett has joined Lovelace Health Plan as the new Assistant Vice President of Network Operations. Randy has more than 25 years of experience in managed health care.

Most recently Randy served as Vice President/Administrator for HealthSpring of Alabama in Mobile, Alabama. Prior to that Randy was Vice President of Provider Operations at Vista Health Plans in Tallahassee, Florida.

Randy has been responsible for hospital, physician and ancillary contracting for all products, network management and provider relations, and network performance measurement.

Randy received a master's in Health Services Administration from Nova University in Ft. Lauderdale, Florida.



## provider orientations coming soon!

Lovelace Health Plan is implementing Project Chrysalis this year. This project involves transitioning to the TriZetto Group for Lovelace Health Plan's core operating system technology, claims processing and enrollment. The new technology replaces multiple computer systems with a state-of-the-art integrated system, which will increase operating effectiveness and efficiency. The project will be completed by October 2010.

Lovelace Health Plan will be holding large provider orientation sessions in selected cities. The sessions will occur during the months of August and September.

If you have not received a phone call by July 16th, please contact your External Provider Service Representative.

Please be sure to attend in order to receive the important information that will be distributed to avoid any disruptions to your office. Some topics include:

- New Claims Addresses
- New Explanation of Payments (EOP)
- Overpayment Process
- NPI's and Taxonomy Numbers
- And much much MORE! ♥

Bernalillo County Specialists, Eastern New Mexico	Northern New Mexico	South Central NM, Bernalillo Behavioral Health, and Santa Fe County	LHS, ABQHP, UNM, CareCentrix, Chaves, Eddy and Lea County	Southwest NM and Bernalillo County PCP's
Adolfo Martinez 505.727.5489	Patty Lewis 505.727.5136	Sonia Gonzales 505.727.5293	Christi LaPlante 505.727.5799	Julie Freeman 505.727.5138

# new s.e.d. medical laboratories in roswell

Lovelace Health Plan is pleased to announce the opening of a new S.E.D. Medical Laboratory Patient Service Center in Roswell. The Roswell Patient Service Center opened in January of 2010. The new site offers specimen collection for medical specimens and drug test collections for employers.

S.E.D. Medical Laboratories has several locations throughout New Mexico. S.E.D. is part of the Lovelace Health System and provides excellent laboratory services for all the Lovelace Hospitals, Lovelace Health Plan and Lovelace Insurance Company members.

Below is the contact information and hours for the new Patient Service Center.

S.E.D. Medical Laboratories Patient Service Center  
311 W. Country Club Rd. Suite 1  
Roswell, NM 88201

**HOURS:**

Monday – Friday 7:00 am.- 5:30 p.m.

Saturday 7:00 a.m. - Noon



Lovelace Health Plan is implementing Project Chrysalis this year. This project involves transitioning to the TriZetto Group for Lovelace Health Plan's core operating system technology, claims processing and enrollment. The new technology replaces multiple computer systems with a state-of-the-art integrated system, which will increase operating effectiveness and efficiency. The project started in mid 2009 and will be completed by October 2010.

We are pleased to announce that Portico's Choreo Contracting Solution's software has successfully passed its Exit Gate review process, and is now operational.

Portico's Choreo Contract Solution is part of Lovelace Health Plan's Project Chrysalis. The software will transform the current paper-based provider contract process to an automated, industry standard system, which enables automated and workflow driven contract administration, negotiation and communication, and electronic storage of documents. It will create a seamless and efficient process for managing provider contracts and relationships.

Portico's Choreo Contracting Solution will enable Lovelace Health Plan to focus on its provider constituents and create a more streamlined contracting process in order to make it easier for providers to do business with Lovelace Health Plan. The automation of the provider contracting process will also increase administrative efficiencies by reducing the cycle time it takes to prepare contract documents, electronically communicate these documents with their providers and provide greater overall management visibility of the process.

# new dedicated customer service representatives for the provider line

Based on provider feedback regarding Lovelace Health Plan's Provider Line, we are excited to announce a new dedicated team of Customer Service Representatives who will be focused on answering provider inquiries related to benefits, claims and eligibility. The new team will include 17 designated representatives to answer provider phone calls. The new hours of operation will be Monday through Friday 8 a.m. to 5 p.m. and will no longer be closed during the lunch hour.

This positive change is directly related to the feedback from our provider community. Lovelace Health Plan thanks you for your support and welcomes your feedback. Lovelace Health Plan will continue to take your recommendations to make overall improvements with provider satisfaction.

We encourage and look forward to servicing our providers. Please call the below phone numbers for benefit, claims and eligibility inquiries.

(505) 727.5406 or (800) 808.7363 ♥

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## lhp's overpayment process

On October 1, 2010, Lovelace Health Plan will soon be converting to a new claims management system. Until the system is in place, the recoupment process will remain the same. Below are the current steps for recoupments:

1. Claim is paid and EOP (explanation of payment) is sent to provider.
2. Claim processing error is identified; Claim is adjusted resulting in an Overpayment; A corrected EOP is sent to the provider showing the adjustment and reason for the overpayment.
3. At the same time the corrected EOP is sent to the provider, a refund request letter stating the reason for the overpayment is also sent allowing the provider 60 days to refund the overpaid amount or dispute the overpayment.
4. After the 60th day if no refund has been received, the overpayment amount will be recovered from a current paying claim on the next EOP.
5. A spreadsheet of the overpayments will be emailed to the provider. ♥



# healthXnet

Looking for online access to Lovelace member eligibility, benefits and provider claim status information? Learn how HealthXnet can help streamline your practice by trying a 30-day FREE trial. You'll be accessing eligibility, benefit and claim status in seconds and with a few clicks of your mouse. Providers performed more than 1.8 million Lovelace Health Plan inquiries using HealthXnet in 2009. In 30 days, you'll know why.

HealthXnet is New Mexico's premier, locally owned and operated healthcare information clearinghouse. A collaborative effort designed to streamline information shared between health plans, physicians, hospitals, and other healthcare providers, HealthXnet offers eligibility verifications, claims status inquiries and more. Providers can access Lovelace Health Plan, Medicare, Medicaid and other local and national health plan inquiries through a single easy-to-use website: [www.healthxnet.com](http://www.healthxnet.com).

Plus, HealthXnet offers an Electronic Claims Management (ECM) solution, allowing users to enter claims through a batch file upload or through direct data entry to a secure web form. Users then have real time online access to professional and institutional claim status and management. Electronic remittance advices (ERAs), CPT/ICD-9 lookup, and patient statement print services are also available to ECM subscribers.

HealthXnet has established relationships with each of the New Mexico health plans and is focused on offering services for providers based in New Mexico. Their implementation, training and support staff is all local. HealthXnet's hospital and physician office customers report other clearinghouses can't match HealthXnet for ease of use and quality of data for local health plan inquiries. HealthXnet is endorsed by the New Mexico Medical Society.

Providers can realize substantial cost savings utilizing electronic payer transactions, according to the Milliman study, January 2006. Considerable savings occur because technology eliminates telephone time to check eligibility, benefit verification and claim status inquiries. Plus, the savings realized on higher volume transactions such as claims submission can contribute significantly to aggregate cost savings.

	Manual Cost	Electronic Cost	Savings (per transaction)
Claim submission	\$6.63	\$2.90	\$3.73
Eligibility & benefit verification	\$3.70	\$0.74	\$2.95
Claim status	\$3.70	\$0.37	\$3.33

Source: *Electronic Transaction Savings Opportunities for Physician Practices* by Milliman, January 2006.

For more information or to begin your 30-day free trial, contact Brett Weinstein at 505.346.0222 or 866.908.0070, or [BWeinstein@NMHSC.com](mailto:BWeinstein@NMHSC.com), or visit [www.HealthXnet.com](http://www.HealthXnet.com).



# lovelace appointment availability and after hours availability surveys

It is that time of year again. Lovelace Health Plan conducts an annual survey to assess provider appointment availability and after hours availability. The surveys are to ensure the standards are being met. Should your office be selected for the survey, it is important to participate.

As a reminder the Appointment Availability and After Hours Standards are:

ACCESS TYPE	Commercial*	Medicare**	Medicaid***	NCQA****	CAHPS+
<b>Primary Care Practitioners Appointment Accessibility</b>					
Emergent Appointment	Immediate‡	Immediate‡	Immediate‡	Not specified	
Urgent Appointment	≤ 48 hours	≤ 24 hours	≤ 24 hours	Not specified	
Routine Symptomatic Appointment	≤ 5 business days	≤ 7 business days	≤ 14 business days	Not specified	
Routine Non-symptomatic Appointment	≤ 21 business days	≤ 30 business days	≤ 30 business days	Not specified	
<b>Primary Care Practitioners Accessibility</b>					
Accessibility to members	24 hours/7 days a week	24 hours/7 days a week	24 hours/7 days a week	Not addressed	
Office wait time	15 minutes or less	15 minutes or less	30 minutes or less	Not addressed	15 minutes or less
Appropriate contact for after-hours emergency care	Appropriate contact information 100% of the time	Appropriate contact information 100% of the time	Appropriate contact information 100% of the time	Not specified	
<b>Behavioral Health Accessibility</b>					
Life- threatening emergency	Immediate‡	Immediate‡	Immediate‡	Not addressed	
Non life- threatening emergency	Immediate‡	Immediate‡	Immediate‡	≤ 6 hours	
Urgent	≤ 48 hours	≤ 24 hours	≤ 24 hours	≤ 48 hours	
Routine	≤ 5 business days	≤ 7 business days	≤ 10 business days	≤ 10 business days	
Accessibility to members	24 hours/7 days a week	24 hours/7 days a week	24 hours/7 days a week	Not addressed	
Office wait time	15 minutes or less	15 minutes or less	30 minutes or less	Not addressed	15 minutes or less
Appropriate contact for after-hours emergency care	Appropriate contact information 100% of the time	Appropriate contact information 100% of the time	Appropriate contact information 100% of the time	Not specified	
<b>Specialist Care Practitioners Appointment Accessibility</b>					
OP referral and Consultation Appointment	†Consistent with clinical need but no more than 21 calendar days	†Consistent with clinical need but no more than 21 calendar days	Consistent with clinical need but no more than 21 calendar days	Not addressed	

\* Commercial requirements from NMAC 13.10.13.11 Access to Health Care Services, B. Appointment waiting time

\*\* Medicare requirements from Medical Managed Care Manual chapter 4, 120.2 Access and Availability Rules for Coordinated Care Plans. The above timeframes are examples of reasonable standards for PCP services.

\*\*\* Medicaid requirements from NMAC Medicaid Managed Care Quality Management 8.305.8.18 Access.

\*\*\*\* NCQA 2010 HP Standards

+ CAHPS – 4.0H

†Medicaid requirement.

‡ equals ≤ 8 hours for survey purposes.

**Congratulations to the Provider's that received a "PASS" score for all areas of the 2009 Appointment Availability and After Hours Survey!** Lovelace would like to thank all providers that participated in the survey!

**SPECIALIST PROVIDERS**

ABQ Health Partners LLC General Surgery Medical Towers- Albuquerque	El Paso Foot Care PA Podiatry El Paso	Plainview Cardiology PA Cardiology/ Cardiovascular Lubbock	Patricia R. Bowen Counseling Albuquerque, Raton and Santa Fe
ABQ Health Partners LLC Obstetrics/ Gynecology Medical Towers- Albuquerque	El Paso Southwestern Cardiovascular General Surgery El Paso	Podiatry Associates of NM Podiatry Albuquerque	Gail Boyd, LMFT Counseling Albuquerque
ABQ Health Partners LLC Obstetrics/ Gynecology Journal Center- Albuquerque	Engstrom Eye Center LLC Ophthalmology Clovis & Roswell	Richard R Weber, DO Ltd Orthopedics Albuquerque	Barbara F Brown, PHD Psychology Albuquerque
ABQ Health Partners LLC Orthopedics Journal Center- Albuquerque	Eye Associates of NM PA Ophthalmology Albuquerque	Richard W Lazaro, MD PC Ophthalmology Las Cruces	Carol L Hunter PC Counseling Albuquerque & Corrales
ABQ Health Partners LLC Orthopedics Westside Pavilion Albuquerque	Eye Associates of NM PA Ophthalmology Taos	Roswell Clinic Corp Podiatry Roswell	Cochiti Health Center Social Worker Cochiti Pueblo
Adult and Pediatric Urology LLC Urology Albuquerque	Family Foot Health Specialists PC Podiatry Albuquerque	Sergio Rybka, MD Urology Carlsbad	Genevieve Davis, LPCC Counseling Santa Fe
Advanced Foot & Ankle Specialist Podiatry Albuquerque	Foot & Ankle Specialists of NM PC Podiatry Albuquerque	S. Ramasamy, MD LLC Neurology Carlsbad	Hester Balsam, MSW, LISW LLC Social Worker Albuquerque
Alamogordo Surgical Associates PA General Surgery Alamogordo	Gary S Grindstaff, DPM PA Podiatry El Paso	Sandia Ob/Gyn Associates Obstetrics/ Gynecology Albuquerque	Hilary T Hale PC Counseling Albuquerque
Albuquerque Associated Podiatrists Podiatry Albuquerque	Gregg Ludwig, DPM PC Podiatry Durango	Santa Fe Brain & Spine Associates Orthopedics Santa Fe	La Buena Vida Inc Counseling Los Lunas
Albuquerque Gastroenterology Associates Gastroenterology Albuquerque	Harmony Women's Clinic PA Obstetrics/ Gynecology El Paso	John Seibel, MD Endocrinology Albuquerque	Las Clinicas del Norte Social Worker Abiquiu & El Rito
Albuquerque Minimally Invasive Urology Urology Albuquerque	High County Macula Retina & Vitreous PC Ophthalmology Rio Rancho	Silver Health Care Neurology Silver City	Marjean Spayer, Ph.D PC Psychology Las Cruces
Albuquerque Women's Health PC Obstetrics/ Gynecology Albuquerque	Jerald J Littlefield, MD PC Ophthalmology Santa Fe	Southwest Endocrine Consultants Endocrinology El Paso	Steven S Martinez, Ph.D Psychology Santa Fe
Alta Vista Urological Specialists Obstetrics/ Gynecology Las Vegas	Jorge F Llamas-Soforo, MD PA Ophthalmology El Paso	SW Gynecologic Oncology Associates Obstetrics/ Gynecology Albuquerque	John J McCafferty, LPCC Counseling Albuquerque
American Medical Group Cardiology/ Cardiovascular Hobbs	Juergen Rebstock, MD PC General Surgery Ruidoso	Southwest Medical Associates Neurology Albuquerque	PMS- Hope Medical Center Social Worker Estancia
Antonio Soegaard-Torres, MD PA Obstetrics/ Gynecology El Paso	La Casa de Buena Salud Obstetrics/ Gynecology Portales	SWAT Surgical Associates LLP General Surgery Lubbock	Richard C Raynard, Ph.D. Psychology Santa Fe
Badshah Surgical Clinic General Surgery Tucumcari	Linda Ann Smith, MD LLC General Surgery Albuquerque	Taos Orthopaedic Institute Orthopedics Taos	Rio Grande Counseling and Guidance Social Worker Albuquerque
Center for Reproductive Medicine of NM PA Endocrinology Albuquerque	Stephen Lucero Urology Santa Fe	Transplant Surgical Associates General Surgery Lubbock	Richard Schalhouh, LPCC Counseling Albuquerque
Louisa Chavez, MD Obstetrics/ Gynecology Albuquerque	Marcos Calderon, MD PA Ophthalmology El Paso	UNM Medical Group Inc Obstetrics/ Gynecology Albuquerque	Soterios J Soter, Ph.D. Psychology Santa Fe
Children's Eye Center of El Paso Ophthalmology El Paso	Michael R Pincus, DPM Podiatry Rio Rancho	Vaspro Inc. General Surgery Albuquerque	Laurie A Stevenson, LISW Social Worker Albuquerque
Lucia Cies, MD Obstetrics/ Gynecology Santa Fe	New Mexico Gynecology Consultants Obstetrics/ Gynecology Albuquerque	Women's Specialty Services Obstetrics/Gynecology Alamogordo	Susanne Stockman, MA LPCC Counseling Santa Fe
James Cornfield, MD Podiatry Albuquerque	NM Heart Institute PA Cardiology/ Cardiovascular Roswell	Wound Care Associates Podiatry Santa Fe	The Relationship Co Inc Counseling Albuquerque
C Luis Cuadros, MD General Surgery Albuquerque	Northwest NM Women's Health Specialists Obstetrics/ Gynecology Farmington	<b>BEHAVIORAL HEALTH PROVIDERS</b>	
Deborah J Hewitt, MD, FACOG PC Obstetrics/ Gynecology Ruidoso	Pecos Valley of NM LLC General Surgery Carlsbad	Aloha Wellness Inc Psychology Albuquerque	Debra Rae Thompson, LPCC Counseling Santa Fe
Michael Cohn, MD PC Podiatry Albuquerque	Pecos Valley of NM LLC Obstetrics/ Gynecology Carlsbad	Patricia Barsch Psychology Silver City	Tri-County Community Services Inc Counseling Taos
Drs Tiku PC General Surgery Raton	Perinatal Associates of NM Ltd Obstetrics/Gynecology	Ben Archer Health Center Social Worker Deming	UNM Health Sciences Center Counseling Albuquerque
	Philip F Bartel, DPM PA Podiatry Albuquerque	Berman and Associates Social Worker Santa Fe	Valencia Counseling Services Counseling Los Lunas

# Tobacco Free Campaign

All Lovelace Health System campuses will be tobacco free by Jan. 1, 2011.

Currently, all Lovelace Health System buildings and facilities are internally tobacco free. With the new policy, no tobacco products will be allowed on the premises of any Lovelace Health System owned or leased properties or buildings, including garages and parking lots.

As a health care organization, we are committed to the health and safety of our employees, patients, visitors and our community.



## lovelace westside hospital offers weight loss surgery

Lovelace Westside Hospital is offering LAP-BAND Surgery. This procedure is a minimally-invasive surgery that involves applying a LAP-BAND around the stomach, which creates a small gastric pouch and restricts or narrows the opening to the rest of the stomach. There have been 30 surgeries since the program started in October 2009.

For more information go to [lovelacebariatrics.com](http://lovelacebariatrics.com).

Lovelace  
Westside Hospital

Bariatrics



# lovelace silver elite coming this summer

Starting this summer, Lovelace Health System will offer Lovelace Silver Elite, a complimentary program created exclusively for people age 60 and older. Designed to help seniors get more out of life, Lovelace Silver Elite provides opportunities for new friendships, social activities and valuable health screenings. Lovelace Silver Elite members enjoy complimentary breakfast socials, educational seminars and exclusive in-hospital amenities.

In addition to activities that help seniors stay healthy, Lovelace Silver Elite provides important benefits for patients who require hospital care, including special hotel-like amenities and VIP treatment throughout their stay. For more information call 505.727.0024.



## health care reform

Lovelace Health Plan has been preparing to implement the Patient Protection and Affordable Care Act . We have an audio posting on our website at [www.lovelacehealthplan.com](http://www.lovelacehealthplan.com) highlighting the major initiatives of the Health Care Reform bill. Lovelace Health Plan is working diligently to implement the various provisions once we receive the final regulations. We will continue to update you with our progress of meeting the requirements that the President and Congress have outlined in this legislation. If you have questions, please contact Marlene Baca, Chief Sales and Service Officer, at 505.727.5121.

### LOVELACE HEALTHLINK

Lovelace HealthLink is a new health care provider referral service that started in January 2010. The service is the only one of its kind offered in New Mexico and has been overwhelmingly successful. The service connects callers looking for a provider to a provider's office. When a person calls Lovelace HealthLink, they can be directly connected to a provider's office in the Albuquerque area who meets their criteria. The caller also receives a letter in the mail with a list of providers who were referred to them.

To date there has been more than 3,682 calls to Lovelace HealthLink. The top referrals have been for family medicine, internal medicine, orthopedic surgery, obstetrics and gynecology and dermatology. The service also connects callers with classes and seminars Lovelace Health System is providing.

Lovelace HealthLink is available 24 hours a day by calling 505.898.3030. There is no charge to callers for this service. ♥





*An artist rendering of the redesigned exterior of Lovelace Westside Hospital. Construction will be complete in early 2011.*

# lovelace women's hospital birthing center at westside

Lovelace Westside Hospital recently held a press conference and groundbreaking ceremony to announce the early 2011 opening of a new Obstetrics Unit – Lovelace Women's Hospital Birthing Center at Westside. The event was attended by Lovelace Governing Board members, representatives from all sectors of the community, as well as senior leadership from Ardent Health Services and Lovelace Health System.

This new Birthing Center will have nine private labor/delivery/recovery/post-partum rooms, as well as couplet care, where newborns stay in the same room with their mothers. Lovelace Women's Hospital will staff and operate the Birthing Center, bringing their high level of quality of care and expertise to the Westside. In fact, last year they delivered and welcomed more than 3,600 babies at Lovelace Women's Hospital. The Birthing Center will be equipped with state-of-the-art technology and family-friendly amenities, such as in-room sleeping accommodations for a guest, Wi-Fi and flat screen TVs.

Lovelace Westside Hospital will be renovating approximately 9,300 sq. ft. on the second floor of the hospital to accommodate the Birthing Center. The project investment is approximately \$4.5 million. The Birthing Center will be staffed by 10 new, full-time Lovelace employees and is expected to grow to 18 by 2014. At this time, credentialed providers for the Center will include Albuquerque Health Partners and Women's Specialists of New Mexico.

Lovelace Westside Hospital will also add 7,700 sq. ft. of new construction for an expanded lobby and registration area. The exterior of the hospital will be redesigned and updated with expansive new windows that are energy efficient. The project investment for this renovation is approximately \$3.1 million.



*Lovelace Health System board members, CEOs, and physicians break ground for the new Lovelace Women's Hospital Birthing Center at Westside.*



*Example of labor/delivery/recovery/post-partum rooms that will be at Lovelace Women's Hospital Birthing Center at Westside.*

# COPD Essentials For Health Professionals

- Primary care providers have a key role in the diagnosis and management of COPD.
- Consider diagnosis of COPD in adults with shortness of breath, with or without symptoms of cough and sputum production.
- Risk factors other than cigarette smoking history are important. Ten to 20 percent of cases may be due to environmental and occupational exposures.
- Pulmonary function testing is useful for determining the severity of COPD and distinguishing from asthma.
- Therapies are effective. Proactive treatment can improve the quality of life for patients with COPD.

## WHY COPD? WHY NOW?

- While other major causes of death have been decreasing, COPD mortality has continued to rise.
- COPD is the 4th leading cause of death.
- 12 million Americans are diagnosed with COPD; research shows that many do not get optimal treatment.
- An additional 12 million Americans may have COPD and remain undiagnosed.
- Recent advances in treatment for COPD offer real opportunities to improve your patient's quality and length of life.

## RISK FACTORS

- Look for COPD in patients who are over 40 and have:
  - Persistent or progressive dyspnea.
  - Chronic cough or sputum production.
  - Decline in level of activity.
- COPD is more likely if there is a history of smoking.
- Genetic factors and environmental or occupational exposures may also play a role: as many as 1 out of 6 Americans with COPD has never smoked.

## DIAGNOSIS: PULMONARY FUNCTION TESTING

- Perform or refer for a lung function test—spirometry—to determine the severity. Spirometry with bronchodilator testing may distinguish COPD from asthma.
- A criterion for diagnosis of COPD is a post-bronchodilator  $FEV_1/FVC < 0.7$ .

## TREATMENT

- Aggressive management of COPD can make a difference for the patient.
- Advances in therapies have been shown to improve survival or quality of life for COPD patients.
- COPD patients should receive professional assistance for smoking cessation.

# new prior authorization requirements

Prior authorization requirements are reviewed regularly by Lovelace Health Plan's Outcomes Medical Management (formerly Health Services). Effective on March 1, 2010, Lovelace Health Plan implemented minor changes to the Lovelace Health Plan's authorization grid.

The most recent version of the prior authorization grid will be posted to the website. Highlights of the changes are listed below. Please refer to the actual grid for specific codes needing prior authorization.

## CHANGES

Product tabs have been consolidated, which should make navigating easier. New permanent codes were added for cardiac CT's and myocardial perfusion imaging. Genetic testing requirements were clarified, and codes and descriptions included where possible.

## ADDED/ EXPANDED

Speech generating devices and accessories; cochlear implants and components; orthotic joint additions; unlisted lower extremity orthoses; unlisted cranio-maxillofacial procedures; AlloSkin-AlloDerm; enteral formulae and pumps; medical foods and supplements; non-emergency transportation; epidural steroids; in vitro fertilization and services; occupational, physical and speech therapy provided in the home; facial implants, all elective dental services; and certain breast reconstruction procedures (S-codes).

## DRUGS NOW REQUIRING PRIOR AUTHORIZATION

Eculizumab, Soliris, Paliperidone Palmitate, Abobotulinumtoxin, Dysport, C1 Esterase Inhibitor (human), Cinrzye, Certolizumab Pegol, Cimzia, Plerixafor, Mozobil, Rilonacept, Arcalyst, Romiplostim and Nplate.

Questions regarding prior authorization requirements may be directed to Nancy Beacher at 505.727.5228 or Mary Karler at 505.727.5314. ♥



# bariatric surgery for salud members



Effective March 15, 2010, Bariatric surgery was no longer a covered benefit for Salud Members. Lovelace Health Plan's Case Managers are reaching out to patients that had surgery scheduled after March 15, 2010, to notify members of the change. Members may contact the Case Managers at 505.727.5660 or 877.894.4783 with any questions. ♥

# Go With the Guidelines

Did you know that alcohol use is one of the most common preventable causes of death in the United States? Research has shown that people who have alcohol or other substance abuse disorders have better outcomes the longer they stay in treatment. If you suspect substance abuse in one of your patients, please make sure to screen and refer for treatment if screening is positive.

Many individuals with behavioral health disorders experience comorbidities. Complex cases often involve overlapping symptoms making differential diagnosis difficult. If you would like additional validated screening and diagnostic tools to assist in your practice, please contact the Lovelace Health Plan Quality Management Department at 505.727.5265. We will provide a screening toolkit for many of the most common behavioral health disorders including a "symptom roadmap" that outlines clusters of symptoms that occur in one or more disorders.

Has one of your members been hospitalized for a behavioral health condition? Remember, behavioral health follow-up appointments within seven days of discharge from an inpatient setting help prevent re-admission and support quality care.

Continuity and coordination between physical and medical care is standard medical practice. Remember to inform other practitioners of your plan of care when you treat the same member. Use the Confidential Exchange of Information Form available on our website under the "Providers", "Resources and Forms" page. Scroll down this page until you see "Miscellaneous Forms" and click on Confidential Exchange of Information Form.



# primary care and behavioral health: care coordination for co-existing conditions

It is the responsibility of both PCPs and BH practitioners to assist members in accessing all appropriate services and to coordinate care across the continuum. PCPs and all behavioral health providers are encouraged to obtain consultations and assistance with psychopharmacotherapy and diagnostic evaluations from a psychiatrist or other BH specialist with prescribing authority when clinically appropriate. If the member has Lovelace Salud!, please make sure that any referrals for behavioral health assistance are to an OptumHealth New Mexico (OHNM) provider at 866.660.7182 or by visiting [www.optumhealthnewmexico.com](http://www.optumhealthnewmexico.com).

When a PCP refers a member to a BH practitioner, the BH practitioner should communicate with the PCP within seven days after the member is seen. Communication should be written and should contain sufficient information regarding the outcome of the evaluation. The BH practitioner should coordinate care by communicating with the PCP about all medication therapy, laboratory and radiology results, hospitalizations, emergencies, incarcerations, transitions in level of care and discharge from services. It is also the responsibility of the PCP to keep the BH practitioner informed of medication therapies, laboratory and radiology reports, medical consultations and hospitalizations or emergencies. By coordinating in this way, care will be more effective and outcomes will be more positive for members.

Some common situations a PCP may want to consider a referral to a BH provider include the following:

- suicidal/homicidal ideation or behavior
- at risk of hospitalization due to a BH condition
- children or adolescents at imminent risk of out-of home placement in a psychiatric acute care hospital, residential treatment facility or treatment foster care placement
- trauma victims including possible abused or neglected members
- serious threat of physical or sexual abuse or risk to life or health due to impaired mental status and judgment, mental retardation or other developmental disabilities
- request by member, parent or legal guardian of a minor for BH services
- clinical status that suggests the need for BH services
- identified psychosocial stressors and precipitants
- treatment compliance complicated by behavioral characteristics
- behavioral, psychiatric or substance abuse factors influencing a medical condition
- victims or perpetrators of abuse and neglect
- non-medical management of substance abuse
- follow up to medical detoxification
- an initial PCP contact or routine physical examination indicates a substance abuse or mental health problem
- a prenatal visit indicates a substance abuse or mental health problem
- positive response to questions indicates substance abuse, observation of clinical indicators or laboratory values that indicate substance abuse
- a pattern of inappropriate use of medical, surgical, trauma, urgent care or emergency room services that could be related to substance abuse or other BH conditions
- the persistence of serious functional impairment

We appreciate all the efforts of our practitioners to coordinate the care of members with co-existing physical and behavioral disorders. A form to coordinate care can be downloaded from the "Providers" tab on our website.

# Medicare Additional Preventive Services

**E**ffective January 1, 2010, and covering dates of service from December 8, 2009, all Medicare Advantage plans must cover both standard and U.S. Food and Drug Administration (FDA)-approved (HIV) rapid screening tests for:

1. Annual voluntary HIV screening of Medicare beneficiaries at increased risk for HIV infection per U.S. Preventive Services Task Force (USPSTF) guidelines, including:

- Men who have had sex with men after 1975;
- Men and women having unprotected sex with multiple partners;
- Past or present injection drug users;
- Men and women who exchange sex for money or drugs, or have sex partners who do;
- Individuals whose past or present sex partners were HIV-infected, bisexual or injection drug users;
- Persons being treated for sexually transmitted diseases;
- Persons with a history of blood transfusion between 1978 and 1985;
- Persons who request an HIV test despite reporting no individual risk factors, since this group is likely to include individuals not willing to disclose high-risk behaviors.

2. Voluntary HIV screening of pregnant Medicare beneficiaries

*This preventive screening requires no cost-sharing for the testing on Lovelace Senior Plan (HMO).*



# chronic health conditions as related to hierarchical condition categories

The Centers for Medicare and Medicaid (CMS) is using risk adjustment factors based on an enrolled member's health status to adjust capitation amounts.

Risk adjustment data used by CMS is captured through claims data submitted by Lovelace Health Plan to group patients into risk adjustment categories and assign payments based on a member's condition. Lovelace Health Plan must ensure the accuracy of risk adjustment data and make certain that providers submit accurate and valid diagnosis codes. Incomplete or inaccurate data can cause Lovelace Health Plan to submit inaccurate data to CMS.

There are a limited selection of diagnosis codes included in the CMS HCC model. Disease hierarchies are a way to determine the severity of the disease. Provider documentation ensures patient's health status is conveyed accurately and completely while capturing appropriate reimbursement.

Providers should assess all chronic health conditions such as hypertension, chronic kidney disease, depression, etc., at least once a year. Providers should also be listing all coexisting conditions such as diabetes mellitus, congestive heart failure, chronic obstructive pulmonary disease and congestive heart failure. These and other condition combinations increase the cost to care for the patient and if not documented, cannot be coded.

Providers need to ensure complete documentation of these conditions not just stating their existence. For example, a provider may list "history of" for conditions considered chronic. Documentation such as this will not qualify those diagnosis for capture. To qualify as a diagnosis, the provider must state the status of the condition, such as "well controlled", list a medication used to treat the condition, or order further testing and relate them to the condition. The key if for providers to show that he/she has assessed or addressed the condition, and that it is still a current or ongoing disease.

CMS's HCC risk adjustment model follow standard ICD-9-CM coding guidelines.



# Electronic Claims Transmission Requirements

In accordance with the New Mexico Human Services Department (HSD) regulations, contracted practitioners and providers are required to file claims electronically for their SALUD! and State Coverage Insurance (SCI) membership.

ECT can save your office staff time and money, and makes the claims process significantly more efficient. Lovelace processes electronically submitted claims faster than hard copy claims. Electronic submission also saves you postage, paper and provides you with the following services:

- Quicker confirmation of claims receipt and integrity of data
- Higher percentage of claims accuracy, resulting in faster payment
- Formatting of claims data into HIPAA required ANSI-X12 837 claims format

A Provider Services Representative from a contracted Managed Care Organization (MCO) may be contacting your office soon to conduct an informational survey either in person or telephonically to obtain feedback related to any barriers your office may be facing regarding this requirement. Should you have any questions or would like additional information, please contact the MCO Representatives listed below:

MANAGED CARE ORGANIZATION	CONTACT INFORMATION/REPRESENTATIVE
Lovelace Health Plan	Provider Services: 1.800.808.7363

# Lovelace

Health Plan

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