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For articles specific to your area of interest, look for the appropriate icon.

- A** Administrative
- F** Facilities/Hospitals
- M** Medicare Providers
- P** Practitioners/Specialists
- Rx** Pharmacy

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A Message from Our CMO

Jacqueline R. Simmons, M.D., M.P.H., C.P.E.



Living the Mission

“To improve the health and quality of life of our members” ... On many occasions, in this newsletter and other publications, I’ve shared the Passport Health Plan mission statement with you. I’m pleased to report that this brief statement continues to guide our operations and decision-making.

As we celebrate another successful year, I want to use this opportunity to highlight some of our accomplishments in 2005. Our team – our participating practitioners, providers, advocates and associates, are equally responsible for the multiple achievements of the last calendar year:

- Maintaining our NCQA “Excellent” accreditation status
- As of November 1, 2005, Passport Health Plan began covering prescriptions written by psychiatrists. The transition has been smooth overall.
- On January 1, 2006, we unveiled Passport Advantage, a Medicare Advantage Special Needs Plan for our dual-eligible members. We continue to work diligently to assist members, providers, and pharmacies with their questions and concerns.
- Hiring additional Medical Directors for Passport Health Plan and Passport Advantage

Quality at its Best

I am also very proud to announce that Passport Health Plan maintained its “Excellent” Accreditation status after our recent National Committee for Quality Assurance (NCQA) review. This is the highest accreditation status for service and clinical quality given to a health plan that meets or exceeds NCQA’s rigorous standards.

Along with maintaining our “Excellent” Accreditation status, U.S. News and World Report’s recent report, “NCQA’s America’s Best Health Plans 2005,” list ranks Passport Health Plan #18 of all Medicaid health plans in the country. Passport Health Plan was recognized in the top 25 and is the only Medicaid health plan in Region 4 to achieve “America’s Best Health Plan” badge. Region 4 includes Alabama, Georgia, Mississippi, North Carolina, South Carolina, Florida, Tennessee, and Kentucky as cited in the NCQA Accreditation Benchmarks. The rankings are based on clinical performance, member satisfaction and NCQA Accreditation. America’s Best Health Plans is a trademark of U.S. News & World Report.

Provider Updates and Reminders Column



Passport Advantage: Claims

Claim Submission: Use the complete 13-digit member identification number for paper and electronic claims. The complete number includes the “Q4M” prefix, the 8-digit member identification number, and the “00” suffix.

Statement of Remit (SOR): The SOR will reflect the unique 8-digit member identification number in addition to the 2-digit person code “00” for a 10-digit number. The “Q4M” prefix will not be displayed.

Electronic Remittance Advice (ERA): The ERA will display the entire 13-digit member identification number including the “Q4M” prefix and “00” suffix.

Additional billing information is available in the 837 Institutional and Professional Companion Guides. These useful tools are available online by accessing the link to Passport Advantage at www.passporthealthplan.com and logging into the Provider Center.

Passport Advantage: Permanent Payer I.D. Number for Professional Claims

Passport Advantage is pleased to announce that we have received confirmation from Emdeon (formerly WebMD) regarding use of the permanent payer identification number (SX154) for professional claims (CMS 1500).

Please note, the temporary payer identification number will continue to be active until May 15, 2006 – allowing providers adequate time to update their systems.

If you have any questions, please contact Provider Services at 1-800-578-0775.

Sign up for Passport Online Information Service (POIS)!

We have a new communication tool! POIS (formerly known as ListServ) is our new email service and is a great

way to receive important notifications and information from the Plan. POIS is free and available to all Passport Health Plan and Passport Advantage providers. To enroll, simply go to our web site, click the POIS Sign Up line under “News and Information,” and enter your Passport Health Plan or Passport Advantage Provider ID number to access the POIS Sign Up screen. POIS has unlimited user access. We encourage you and your staff to sign up today!

Provider Workshops

Provider Workshops on topics related to both Passport Health Plan and Passport Advantage began in January. Please check our web site regularly (www.passporthealthplan.com) for workshop dates and other specifics. If you are unable to attend and would like a copy of workshop materials, please contact Melina Whitley at (502) 585-7946. Workshop presentations will also be available online.

The National Heart, Lung, and Blood Institute

The National Heart, Lung, and Blood Institute has recently updated their clinical practice guideline, “Diagnosis, Evaluation, and Treatment of High Blood Pressure in Children and Adolescents.” You may access this guideline by logging onto www.nhlbi.nih.gov.

Medical Office Notes

Medical Office Notes are an important resource for you as we work together to reduce the number of claim denials. Recently distributed Medical Office Notes are now available online and include the following topics:

- The National Provider Identifier - What You Need to Know
- Online Communications Feature Coming Soon: List Serve! (*now called POIS*)
- Passport Health Plan to Implement NCCI Claim Edits Effective January 1, 2006
- Online Billing Manual

Best Practices Spotlight:



Kentuckiana Oral & Maxillofacial Surgery Association (KOMSA) PSC

The Kentuckiana Oral & Maxillofacial Surgery Associations (KOMSA) is featured in this issue's Best Practices Spotlight.

Under the direction of Drs. Babcock, Noonan and Walters, KOMSA provides our members with a well-established practice offering many unique services not usually performed in an Oral Surgeons office, including orthognathic services and treatment of trauma. Also offered are wisdom teeth removal, biopsies, and oral cancer screenings. KOMSA often offers same day services for anesthesia and infection management.

KOMSA serves Passport Health Plan members of all ages in Jefferson, Bullitt, Spencer and Hardin counties, including the Elizabethtown area. KOMSA's genuine concern for our members is recognized through their outreach in the community. They participate in many community health fairs and will be represented at the Bullitt County Health Fair in March. Thank you to KOMSA for working to improve the health and quality of life for our members!

ER Notification for Asthma



It is important for our members with asthma to follow up with their practitioner following an emergency room (ER) visit. Unfortunately, this visit does not always occur. Practitioners may not be aware the member has had multiple asthma-related ER visits before a scheduled office visit.

The failure of members to follow up with their practitioner following an ER visit keeps the practitioner from properly diagnosing asthma, ordering controller medication, providing education and an asthma action plan, and making referrals to asthma specialists when appropriate. According to the National Institute of Health (NIH) guidelines, anyone with persistent asthma symptoms should be placed on a daily controller medication.

The Plan's Asthma Program is working to assist our practitioners with this problem. In collaboration with Kosair Children's Hospital (KCH) and Hardin Memorial Hospital,

the Asthma Program is seeking to identify members who are seen in the ER for an asthma diagnosis. Each week, KCH and Hardin Memorial Hospital identify Passport Health Plan members who were seen in the ER for asthma. The Asthma Disease Managers at PHP then mail a letter to each of these members encouraging them to do the following:

- Follow up with their practitioner after an ER visit
- Discuss controller medication
- Take controller medication daily, if ordered by their practitioner

The Asthma Disease Managers also notify the practitioners of their patients who were seen in the ER. We hope this will assist members:

- in seeking follow-up care after an ER visit
- in providing the practitioner with knowledge of members' persistent asthma symptoms, which may require controller medication.

A Reminder For Medicaid and Medicare Behavioral Health Providers

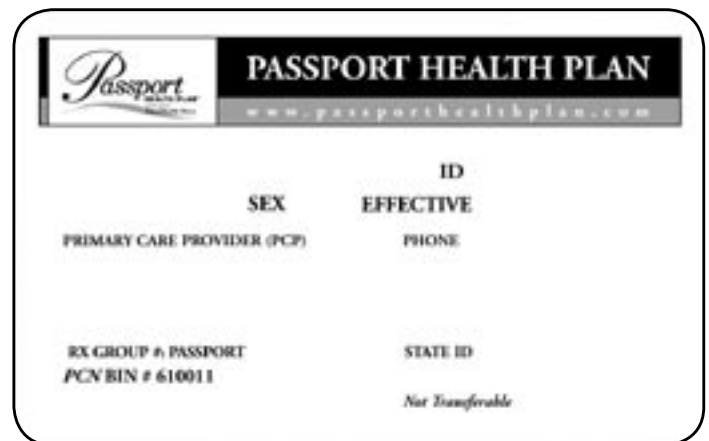


Effective November 1, 2005, Passport Health Plan (in conjunction with Perform RX) assumed responsibility for adjudicating and processing payments for behavioral health pharmaceutical drug claims submitted on behalf of Passport Health Plan members. This service is for prescriptions written by psychiatrists for medications dispensed at a retail pharmacy.

All point-of-service edits, and prior authorization (PA) protocols related to safety (e.g. dosage, days supply, and quantity limits) will continue to be enforced. However, PHP is suspending the use of “step edits” for behavioral health drugs prescribed by psychiatrists. PHP is continuing to define the review process for injectable drugs. In the meantime, for injectable drugs written by a psychiatrist, step edits will be lifted but safety edits will be maintained. During this transition period, PHP will continue to define and review the process for injectable drugs as well as review drug utilization and physician prescribing patterns. This information will be used to define subsequent PA requirements and “step edit” protocols for behavioral health drugs.

The Pharmacy and Therapeutics (P&T) Committee has reviewed and approved the PHP formulary related to behavioral health drugs. The formulary is available on our web site at www.passporthealthplan.com. We will continue to communicate any changes to you. You may also visit our web site for additional information.

- Pharmacy providers should contact the Perform Rx Help Desk at 1.800.578.0898.
- Practitioners (providers) should contact the Provider Services Help Desk at 1.800.578.0775.
- View www.passporthealthplan.com/pharmacy for Frequently Asked Questions and Communications.
- Members should contact Member Services at 1.800.578.0603.



On January 1, 2006 Passport Advantage (PAD), a Medicare Advantage Special Needs Plan, for dual-eligible members, became effective. PAD members are individuals who have Passport Health Plan coverage and Medicare Parts A and B. They will receive their behavioral health care (both medical and pharmacy benefits) from PAD. Please be aware that Passport Advantage members will be issued a gold ID card to indicate they have enrolled in the Plan.

Controlling High Blood Pressure (A) (P)

Per HEDIS® 2004 calendar results, there was a 3.04 percentage point decrease in the Plan's members ages 46 to 85 diagnosed with hypertension whose blood pressure was considered controlled.

The Plan is naturally concerned about this decrease and has identified opportunities and ongoing interventions to educate our members about managing their hypertension:

- We will educate our members via outreach and distribution of literature on the risks associated with high blood pressure and appropriate lifestyle changes that can be of assistance in lowering high blood pressure
- We will emphasize the importance of the practitioner-patient relationship and patient motivation in successful treatment
- We will provide feedback to our practitioner network regarding clinical practice guideline assessment results
- We will distribute adult preventive health guidelines to members and practitioners recommending blood pressure screenings
- Every member newsletter will focus on some aspect of high blood pressure screening and treatment, as well as the risks associated with high blood pressure
- Through the on-hold sound care message system, we will remind members with high blood pressure to take their medicines as prescribed and encourage office visits for blood pressure monitoring
- Passport Advantage members diagnosed with hypertension will be enrolled in the new Coronary Artery Disease (CAD) Management Program

As many of our members are affected by hypertension, our goal is use these interventions to prevent complications associated with this disease and improve their overall well-being.

The Practitioner Satisfaction Survey (A) (P)

Passport Health Plan would like to thank all the primary care and high volume specialty providers, as well as their office managers and staff for participating in the 2005 Practitioner Satisfaction Survey. Your feedback is very valuable, and your responses help us identify opportunities for improvement.

We will be posting the results of the survey in an upcoming edition of the newsletter. Remember – your input adds greatly to the success of our partnership!

Helping Members Make the Most of Their Passport Health Plan Benefits (A) (P)

Utilization Management (UM) wants all members to know about the Plan's decision-making policies. Many members have questions about their benefits and how the plan decides what benefits are authorized for payment. We hope you will join us in reminding members of the following important points:

- The purpose of UM is to validate that services are medically necessary and covered by the Plan
- Passport Health Plan does not reward anyone, including providers, for denying services to members
- The Plan does not incentivize associates or providers to make decisions that keep members from getting the care they need

Like you, our first concern is that members receive appropriate care in a timely manner. Therefore, if members who visit your office have questions about the UM process or benefit decisions, please refer them to Member Services at 1-800-578-0603 (TTY/TDD 1-800-691-5566). We will be happy to assist them with questions or concerns.

Breast and Cervical Cancer Screening Rates

(A) (P)

In an effort to increase breast cancer and cervical cancer screening rates for our female members, Passport Health Plan has created a campaign to research past screening rates, educate our members, and encourage mammograms and Pap tests. The Plan has removed barriers to obtaining these important tests – for example, a referral is not required for females seeking a mammogram at participating facilities or a pap smear during an annual GYN exam.

Here is a general overview of what we've learned:

BREAST CANCER SCREENINGS:

During the last three years, PHP's Breast Cancer Screening Rate has not significantly changed. In calendar year 2004, just over 50% of eligible females between the ages of 52 and 69 received a mammogram.

The Plan is working to improve screening rates through mail and telephone campaigns. PHP sends out reminder post cards twice a year to females who have not had a mammogram within the last 2 calendar years. Of the nearly 1,200 females identified for telephone contact, almost 400 were reached. Fortunately, nearly every female contacted knew the significance of obtaining a mammogram. Unfortunately, when the plan inquired about the reason(s) they had not obtained a mammogram, many stated they were unaware of the need for a yearly mammogram and were surprised their PCP had not reminded them to obtain one. (Other concerns included not wanting to know whether they had breast cancer and the fear of the test itself. Females who had never had a mammogram particularly feared pain associated with the test.)

CERVICAL CANCER SCREENINGS:

PHP's cervical cancer screening rate has steadily increased during the last three years. In calendar year 2004, 63.5% of the eligible females between the ages of 21 through 64 obtained at least one Pap smear within a 3 year time period. Numerous interventions have been attempted to reach females who have not had a Pap smear. In addition to frequent newsletter articles in the member newsletter, the Plan mails reminder postcards twice a year to females who have not had a Pap smear within the last 3 years. These post cards are followed with a reminder phone call. Again, the number one reason female members have not obtained a Pap smear was "my PCP has not told me I needed one." In fact, many females who are no longer in their child bearing years, who are menopausal, or who are no longer sexually active reported that they were unaware they still needed a Pap smear.

We hope that sharing this information with you will encourage you to remind our female members of the importance of these necessary tests. Thank you for your cooperation!

Prenatal Vitamins and Childhood Iron Deficiency Anemia

(A) (P)

We hope you will join the Plan in working to meet the Healthy Kentuckians 2010 goal of reducing childhood iron deficiency anemia. The 1998 Pediatric Nutrition Surveillance System reports 14.1% of children ages 1 and 2 and 13.8% of children ages 3 and 4 as iron deficient.

You can help reduce the incidence of iron deficiency anemia by providing individual education to our patients about the importance of iron-rich foods with high levels of Vitamin C. For members who are pregnant, discuss the WIC program, stress the importance of iron in the prenatal period, and encourage the use of prenatal vitamins daily during pregnancy. 2004 baseline results for use of prenatal vitamins indicated that only 58.1% of those women who delivered live births in 2004 filled at least one prescription for prenatal vitamins.

Remember, members may obtain vitamins over the counter if you issue them a prescription. Together, we can increase awareness of prenatal vitamins and work to decrease the incidence of iron deficiency anemia.

Encouraging Well-Child Checkups for Children Ages 3 to 6 (A) (P)

Passport Health Plan (PHP) is dedicated to educating our members about the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program. As part of this goal, we hope you will join us in informing the members you serve of the importance of the well-child checkup, including:

- Getting a physical exam.
- Checking for growth and development.
- Examining height, weight, and blood pressure.
- Discussing nutrition, injury, and violence prevention.
- Checking hearing, vision, and dental health.
- Giving immunizations, if needed.

Please encourage parents with child(ren) ages 3 to 6 to schedule an EPSDT well-child checkup. The complete EPSDT well-child schedule is as follows:

EPSDT WELL-CHILD SCHEDULE	
1 month	24 months (2 years)
2 months	3 years
4 months	4 years
6 months	5 years
9 months	6 years
12 months (1 year)	8 years
15 months	Once a year for
18 months	ages 10 – 20

Members who have questions about EPSDT or well-child checkups may call the Plan’s EPSDT department at 1-800-578-0603.

Fraud and Abuse – (Rx) We Need Your Help!

Medicaid and Medicare fraud wastes important health care dollars that could be used to increase provider fees or provide additional member benefits. In an effort to decrease instances of fraud and abuse, the Plan would like to share the following list from the Department of Health and Human Services, which includes common practices associated with this problem:

- Billing for “phantom patients” who did not really receive services
- Billing for medical services or goods that were not provided
- Billing for old items as if they were new
- Billing for more hours than there are in a day
- Billing for tests the patient did not need
- Paying a “kickback” in exchange for a referral for medical services or goods
- Charging Medicaid for personal expenses that have nothing to do with caring for a Medicaid recipient
- Overcharging for health care services or goods that were provided
- Concealing ownership in a related company
- Using false credentials
- Double-billing for health care services or goods that were provided

If you suspect any of these practices or other possible fraud, please report it to either Passport Health Plan at (502) 585-8350, or by calling the Department for Medicaid Services at (800) 372-2970.



Utilization Management Reminder (A) (F) (P)

Remember, you may contact our Utilization Management department at anytime! Call 1-800-578-0603 between the hours of 8:00 a.m. and 5:30 p.m. If you call after hours, please leave a message. You may also send a fax to (502) 585-7989.

Appropriate Treatment for Children with Upper Respiratory Infection (URI) (A) (F) (M) (P) (Rx)

2004 data indicates that nearly 38% of Passport Health Plan members between the ages of 3 months to 18 years of age with a diagnosis of URI are treated with an antibiotic. The common cold is normally viral in origin, so antibiotics should be reserved for more serious illnesses caused by bacteria. For viral illnesses, patients should be given home care and call back instructions when not exhibiting more serious symptoms or complicating factors.

To educate patients on this topic, the Plan has a handout available on the Passport Health Plan web site in the Member Center entitled "When Your Child has a Cough or Cold". As a courtesy to our providers this and other member educational materials are available for downloading and can be given to members who visit your office. Remember, for these interventions to be truly effective, it is the practitioner's responsibility to prescribe antibiotics only when necessary.

A Message from Our CMO

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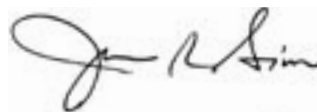
While I am extremely proud of these accomplishments, I know this level of achievement is not attainable without a collaborative partnership between the Plan and our providers. Thank you for your continued support.

Welcome to our new Medical Directors!

Please join us in welcoming the following new Medical Directors to Passport Health Plan and Passport Advantage.

Dr. Janet Seng is our new Medical Director for Passport Advantage. Dr. Seng, who is board certified in Family Practice, comes to us with an extensive background in utilization management and quality review. She has worked previously at Humana and SHPS. Dr. Seng will be responsible for the medical reviews in our Passport Advantage program.

Dr. Janice Bray and Dr. Tom Brown have joined the Plan as our new Medical Directors for Behavioral Health. Dr. Bray, is board certified in both Psychiatry and Forensic Psychiatry. She has extensive experience in Medicaid managed care having worked with the Massachusetts and Phoenix behavioral health managed care systems and practicing for 10 years. Dr. Brown, who is also board certified in Psychiatry, has extensive experience in the managed care arena also, having worked at Seven Counties Services. Drs. Bray and Brown will be responsible for behavioral health reviews in the Passport Advantage program.



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