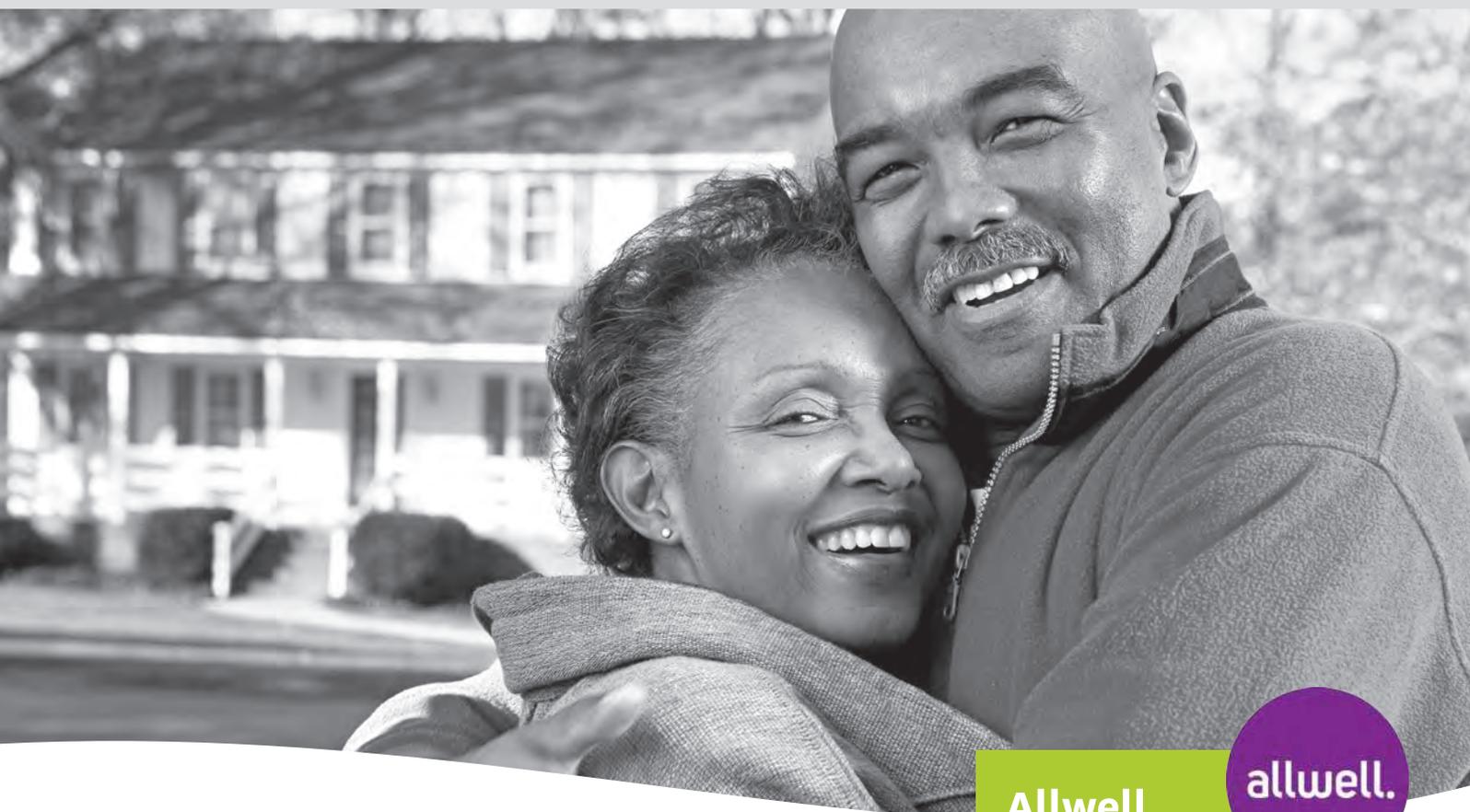


ProviderReport



Introducing Allwell

This year, Arkansas Health & Wellness is offering a new Medicare Advantage health plan: Allwell. This plan offers the confidence, peace of mind, security and happiness our members strive for—and that we deliver through outstanding benefits and superior service, accompanied by the compassionate and expert care of you, our valued providers.

Allwell is available for Medicare-eligible Arkansans in the following counties:

- Benton
- Crawford
- Garland
- Pulaski
- Saline
- Sebastian
- Washington

Allwell MAPD plans deliver top-quality, comprehensive coverage for your patients. But the focus doesn't stop there. Our coverage will extend far beyond your office to offer valuable health management programs and educational tools for your patients, making it easier for them to achieve their best possible health.

We share your commitment to your patients and understand the importance of keeping them covered and healthy. We hope you have seen this dedication through your experience with the Allwell sister product on the health insurance marketplace, Ambetter.

As our partner, you can count on us for access to industry knowledge, programs and support. We are committed to working with you to ensure your patients receive the quality and affordable healthcare they deserve. If you have any questions, please contact us at **1-855-565-9518**.

Providers in the counties listed above that are interested in joining the Allwell network can contact our Contracting team at **1-800-294-3557** or **ArkansasContracting@CENTENE.COM**.

Allwell networks

The Allwell logo, consisting of the word "allwell." in white lowercase letters inside a purple circle.

Allwell offers plans that use two distinct networks of providers, Allwell Medicare HMO and Allwell Medicare HMO Select. When searching for a participating provider on the "Find a Provider" tool at **Provider.ARHealthWellness.com**, please make sure you select the network that corresponds to the network listed on the member's identification card. Networks are indicated on the top right-hand corner of Allwell ID cards.





Supporting member health



Ambetter from Arkansas Health & Wellness' disease management programs help members with chronic conditions, such as diabetes, self-manage their health. The programs do this by ensuring that referrals are made to the proper providers, providing health education, promoting coordination among providers and encouraging adherence. We educate patients and provide support and tools needed to help them understand and control their condition, all with the goal of fewer complications.

In addition to disease management programs for members with chronic illnesses, we offer case management for members with complex medical needs. If you have a member you think would benefit from these services, call us at **1-877-617-0390** (TTY/TDD **1-877-617-0392**).

Help your Ambetter patients **earn rewards**

Our My Health Pays rewards program gives your Ambetter patients the opportunity to earn reward dollars for taking charge of their health. This program provides incentives when your patients take advantage of their preventive care benefits by helping them earn up to \$200 per year in rewards. Ambetter members earn rewards by completing healthy behaviors. These include having an annual wellness exam, getting a flu vaccine in the fall, completing a personalized health plan and taking part in physical activities. These rewards are automatically added to a Visa® Prepaid Card.

Your patients can redeem their rewards to help offset the cost of:

- Doctor copays*
- Coinsurance
- Deductibles
- Monthly premium payments

Together we can help your patients take advantage of their preventive services and earn rewards. An informative guide to billing these preventive services can be found on the "Provider Resources" section of our website. Look under "Reference Materials" for the "Wellness and Preventive Services Fact Sheet." Please call our provider services team at **1-877-617-0390** to learn more.

**My Health Pays™ rewards cannot be used for pharmacy copays.*



We appreciate your feedback

Ambetter from Arkansas Health & Wellness recently conducted our annual Provider Satisfaction Survey. If you participated, thank you.

Survey questions covered topics including provider relations, coordination of care, utilization, finance and overall satisfaction. Addressing continuity of care and sharing information among providers are important parts of providing quality care for our members. Your feedback will guide our improvement efforts over the next year.

Specifically, we plan to focus on the following areas of improvement:

- Provider relations
- Quality management



HEDIS measures performance

HEDIS, the Healthcare Effectiveness Data and Information Set, is a set of standardized performance measures updated and published annually by the National Committee for Quality Assurance (NCQA). HEDIS is a tool used by most U.S. health plans to measure performance on important aspects of care and service.

HEDIS is designed to provide purchasers and consumers with the information they need to reliably compare the performance of healthcare plans. Final HEDIS rates are typically reported to NCQA and state agencies once a year. Through HEDIS, NCQA holds Arkansas Health & Wellness accountable for the timeliness and quality of healthcare services (acute, preventive, mental health, etc.) delivered to its diverse membership. Arkansas Health & Wellness also reviews HEDIS rates on an ongoing basis and continually looks for ways to improve our rates. It's an important part of our commitment to providing access to high-quality and appropriate care to our members.

Please consider the HEDIS topics covered in this issue of the provider newsletter: diabetes, hypertension and cardiac health. You can also review Arkansas Health & Wellness' clinical practice guidelines and additional HEDIS information at ARHealthWellness.com.

Arkansas Health & Wellness case management staff members are available to assist with patients who have difficulty managing their conditions, adhering to prescribed medications or filling their prescriptions. If you have a member you think could benefit from our case management program, please contact Arkansas Health & Wellness Member Services at **1-877-617-0390** (TTY/TDD **1-877-617-0392**) and ask for medical case management.

Notice: Policy updates

This notification is to inform you that Arkansas Health & Wellness is amending or implementing new policies. The effective date for the policies listed below is March 1, 2018.

- **CP.MP.12** Vagus nerve stimulation
- **CP.MP.40** Gastric electrical stimulation
- **CP.MP.43** Functional MRI
- **CP.MP.49** PT OT ST
- **CP.MP.53** FerriScan R2 MRI
- **CP.MP.57** Lung transplantation
- **CP.MP.86** Neonatal abstinence syndrome guidelines
- **CP.MP.92** Acupuncture
- **CP.MP.97** Testing select GU conditions (DV)
- **CP.MP.98** Urodynamic testing
- **CP.MP.108** AHCT for sickle cell anemia
- **CP.MP.119** Balloon sinus ostial dilation
- **CP.PHAR.84** Abiraterone (Zytiga)
- **CP.PHAR.88** Belimumab (Benlysta)
- **CP.PHAR.105** Bosutinib (Bosulif)
- **CP.PHAR.106** Enzalutamide (Xtandi)
- **CP.PHAR.123** Evolocumab (Repatha)
- **CP.PHAR.124** Alirocumab (Praluent)
- **CP.PHAR.145** Deferasirox (Exjade Jadenu)
- **CP.PHAR.146** Deferoxamine (Desferal)
- **CP.PHAR.147** Deferiprone (Ferriprox)
- **CP.PHAR.283** Lomitapide (Juxtapid)
- **CP.PHAR.284** Mipomersen (Kynamro)
- **CP.PHAR.285** Nintedanib (Ofev)
- **CP.PHAR.286** Pirfenidone (Esbriet)
- **CP.PHAR.287** Obeticholic (Ocaliva)
- **CP.PHAR.289** Buprenorphine (Probuphine implant)
- **CP.PHAR.351** Daptomycin (Cubicin Cubicin RF)





Safely treating **chronic pain**

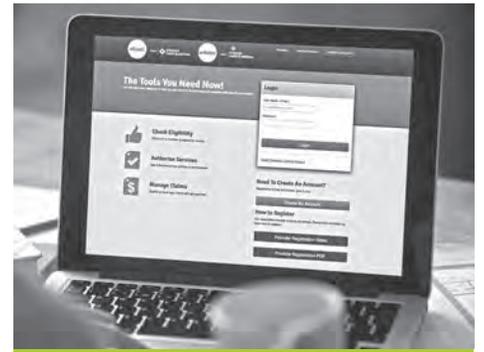
Deadly overdoses from prescription opioids are on the rise. According to the Centers for Disease Control and Prevention, of the more than 64,000 drug overdose deaths in 2016, 20,000 were from fentanyl and fentanyl analogs, or synthetic opioids. Opioids can play an important role in treating pain. But providers need to use care when prescribing them to treat chronic pain and explore other treatment options first.

The CDC offers guidelines for providers on how to safely prescribe painkillers for chronic pain.

Among the guidelines:

- Providers should recommend nonpharmacological and nonopioid therapies before trying opioids to treat chronic pain. Opioids should be prescribed only if their expected benefits outweigh the risks.
- Providers should establish treatment goals with members, including goals for level of pain and function. If the use of opioids is not leading to meaningful improvement, it should be discontinued.
- Providers should discuss the benefits and risks of opioid use with members before prescribing the drugs and agree on how to manage their use.
- Providers should start treatment by prescribing immediate-release opioids, rather than extended-release opioids, and prescribe the lowest effective dose.
- Providers should think about using urine drug testing before and during treatment to determine if members are using undisclosed prescription or illicit drugs.
- Providers should consult state prescription drug monitoring program (PDMP) data to review a member's history of prescription drug use. This can help prevent overdoses and dangerous drug interactions. The data should also be reviewed periodically during treatment.

Learn more and read the complete guidelines at cdc.gov/drugoverdose/providers/index.html.



Secure provider portal

Arkansas Health & Wellness is here to provide the tools and support you need to deliver the best quality of care. Our Secure Provider Portal offers an easy way for you to manage patient administrative tasks quickly. Visit the portal at Provider.ARHealthWellness.com.

PLEASE NOTE:

Once you log in to the portal, you must fill out the fields at the top of the page to receive accurate information.

- Select your tax ID.
- Select the applicable product (Ambetter or Allwell).
- Click "GO."

The portal provides protected and convenient access at your fingertips:

- **Visibility of multiple TINs:** One point of entry allows for quick and easy access to member information for multiple TINs/practices.
- **Access daily patient lists from one screen:** One concise view allows primary care providers to scan patient lists for member eligibility, care gaps and much more.
- **Manage batch claims for free:** Submit and manage claims, including batch files, for free. View detailed electronic funds transfer (EFT) payment history.
- **Simplify prior authorization process:** "Smart Sheets" feature prompts for required clinical information when submitting prior authorization requests.
- **Additional features to streamline office operations:** View patient demographics and history, secure messaging between provider and Arkansas Health & Wellness, and update provider demographics.

Keep us informed

Arkansas Health & Wellness wants to provide the best care we can to our members. So it's important for us to know if you plan to move, change phone numbers or leave the network. Call **1-877-617-0390** (TTY/TDD **1-877-617-0392**) to update or verify your contact information or status. You can also check your information on our secure provider portal at Provider.ARHealthWellness.com.

Please let us know at least 30 days before you expect a change to your information.

Know your credentialing rights

Credentialing protects our members by ensuring that providers meet state and federal regulatory requirements and accreditation standards.

During the credentialing and recredentialing process, Arkansas Health & Wellness obtains information from outside sources such as state licensing agencies and the National Practitioner Data Bank.

If any information gathered as part of the primary source verification process differs from data submitted by the practitioner on the credentialing application, Arkansas Health & Wellness will notify the practitioner and request clarification.

A written explanation detailing the error or the difference in information must be submitted to Arkansas Health & Wellness to be included as part of the credentialing and recredentialing process. Information must be sent in a timely manner to avoid delays in the credentialing process.

Practitioners have the right to:

- Review primary source materials collected during this process.
- Request the status of their credentialing application.
- Ask questions about the credentialing process at any time.

Providers can learn more by contacting Provider Services at 1-800-294-3557.



Should you recommend aspirin use?

Aspirin thins the blood and can prevent clots from occurring. This can be beneficial for those who have had a heart attack or those with risk factors for cardiovascular disease. However, there are risks, such as bleeding.

In 2017, the National Committee for Quality Assurance retired the aspirin use measure because of changes in recommendations from the U.S. Preventive Services Task Force. When discussing the use of low-dose aspirin for the prevention of cardiovascular disease (or colorectal cancer), the task force now recommends:

- **For adults ages 50-59 with a 10 percent or greater risk of developing cardiovascular disease within 10 years:** Recommended for those who are not at increased risk of bleeding, have a life expectancy of at least 10 years and are willing to take low-dose aspirin daily for at least 10 years.
- **For adults ages 60-69 with a 10 percent or greater risk of developing cardiovascular disease within 10 years:** Each person will need to weigh the risks and benefits. Those who are not at increased risk of bleeding, have a life expectancy of at least 10 years and are willing to take low-dose aspirin daily for at least 10 years are more likely to benefit.
- **For adults younger than 50 and older than 70:** The task force says there is not enough evidence to assess the benefits and drawbacks of using aspirin.

HEDIS for cardiovascular care

| TOPIC | HEDIS MEASURE |
|---|--|
| <p>Controlling High Blood Pressure</p> <p>High blood pressure, or hypertension, increases the risk of heart disease and can lead to heart attacks, stroke, kidney disease and other serious conditions. Providers can help members control their blood pressure by prescribing medications and recommending lifestyle changes, such as getting exercise, eating a heart-healthy diet and quitting smoking.</p> | <p>This HEDIS measure assesses adults ages 18-85 who have been diagnosed with hypertension and whose blood pressure is adequately controlled:</p> <ul style="list-style-type: none"> ▪ Ages 18-59, or 60-85 with diabetes: blood pressure of <140/90 mm Hg ▪ Ages 60-85 without diabetes: blood pressure <150/90 mm Hg <p>Learn more: www.ncqa.org/report-cards/health-plans/state-of-health-care-quality/2017-table-of-contents/controlling-high-blood-pressure</p> |
| <p>Persistence of Beta-Blocker Treatment After a Heart Attack</p> <p>Beta-blockers lower the heart rate, reducing the amount of force on the heart and blood vessels. They have been shown to reduce mortality in patients who have had a heart attack. Providers should make sure that members who have had a heart attack take a beta-blocker to help prevent another attack from occurring.</p> | <p>This HEDIS measure assesses adults ages 18 and older who were hospitalized and discharged after a heart attack and who received beta-blocker treatment for six months afterward.</p> <p>Learn more: www.ncqa.org/report-cards/health-plans/state-of-health-care-quality/2017-table-of-contents/beta-blockers</p> |



Helping members plan ahead

According to the Centers for Disease Control and Prevention, only a third of adults have an advance directive. Arkansas Health & Wellness wants to make sure members are getting the information they need to execute these important documents for helping communicate the type of end-of-life care they want.

What providers can do:

- Talk to members about their end-of-life wishes and explain the role of advance directives in determining the care they receive.
- Inform members they should share a copy of an advance directive with the person or people designated to be involved in their care decisions. They should also add a copy to their medical records.
- Provide members with resources for beginning advance care planning, such as the National Hospice and Palliative Care Organization's Caring Info website, which includes downloadable, state-specific advance directives. Learn more at caringinfo.org.

Providers are required to document advance care planning discussions and note whether an advance care plan is in the member's medical record.

Monitoring is key to managing diabetes

Besides being a leading cause of death in the United States, diabetes is the main factor in kidney failures, lower-limb amputations and adult-onset blindness. Arkansas Health & Wellness offers members with type 1 and type 2 diabetes access to disease management programs to help them learn more about their condition and manage it better. Disease management for members with diabetes focuses on glycemic control and monitoring for possible complications of the disease.

For providers, this means monitoring several factors. Healthcare Effectiveness Data and Information Set standards measure the percentage of members ages 18-75 with diabetes who had the following tests:

- Hemoglobin A1c (HbA1c) test completed at least once a year. A result of more than 9 percent shows poor control, while a result of less than 8 percent shows control. For a select population, the result should be less than 7 percent.
- Retinal or dilated eye exam every year or an eye exam showing no evidence of retinopathy in the year prior.
- Nephropathy screening using a macroalbumin or microalbumin urine test at least annually (unless there is documented evidence of nephropathy).
- Blood pressure control. A healthy blood pressure is generally under 140/90 mm Hg.

Arkansas Health & Wellness is here to help you keep members with diabetes healthy. We can assist your office in finding members a vision provider. Please call us at **1-800-294-3557**.

AHW Provider webinar series

Arkansas Health & Wellness hosts webinars every quarter. The Provider webinars are designed to offer our providers and their office staff the opportunity to learn from subject matter experts and ask questions about current topics and best practices. Registration is free, and each webinar will be one hour.

Please go to arhealthwellness.com/providers/resources/provider-webinars.html and register. Instructions on accessing the webinars will follow. Reminders will be sent via email once registered.



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