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Reviewing the appropriate use of resources

Arkansas Health & Wellness has utilization management and claims management systems to identify, track and monitor care provided to our members. Utilization management (UM) care criteria cover preventive care, emergency care, primary care, specialty care, acute care, short-term care, maternity care and ancillary care services. When available, Arkansas Health & Wellness uses nationally recognized criteria (such as InterQual) for specific services. Other criteria are developed internally through a process that includes the review of scientific evidence and input from relevant specialists.

UM decisions are based only on appropriateness of care and service and the existence of coverage. Arkansas Health & Wellness does not reward providers, practitioners or other individuals for issuing denials of coverage or care. Denials are based on lack of medical necessity or lack of covered benefit. There are no financial incentives for UM staff to make decisions resulting in underutilization of services.

To help us make appropriate UM decisions, please submit complete clinical information with the initial request for a service or treatment. If a denial of coverage or care is issued, you will have the opportunity to discuss the denial decision with a physician or another appropriate reviewer.

Providers may request UM criteria pertinent to a specific authorization, or speak to a UM representative, at any time by contacting the UM Department at **1-800-294-3557** and following the prompts to the Authorizations option.

How we measure quality

We strive to provide quality healthcare to our members as measured through HEDIS quality metrics. HEDIS metrics are developed by the National Committee for Quality Assurance (NCQA) and serve as a standardized set of performance metrics that allow direct, objective comparison of quality across health plans. NCQA develops HEDIS measures through a committee of purchasers, consumers, health plans, healthcare providers and policymakers.

Arkansas Health & Wellness received NCQA accreditation again last year, demonstrating our commitment to quality.

HEDIS allows for standardized measurement and reporting and accurate, objective side-by-side comparisons. Learn more at ncqa.org.

Please note the HEDIS measures featured in this issue regarding child and adolescent health visits and lead screening.



Guidelines for **well-child care**

Arkansas Health & Wellness reminds parents that children should have a well-child visit every year and that routine health screenings and needed immunizations can help ensure children are healthy and developing normally.

The American Academy of Pediatrics offers guidelines for caring for infants, children and adolescents through **Bright Futures**, a health promotion and prevention initiative. These guidelines include health

promotion and anticipatory guidance, disease prevention and early detection, and development and behavioral health screenings.

In October 2018, Bright Futures released the second edition of its Bright Futures Tool and Resource Kit, a compilation of current forms and materials related to preventive health supervision and health screening for infants, children and adolescents. The toolkit is designed to accompany the organization's guidelines.

HEDIS for well-child visits

Several HEDIS measures cover issues related to well-child visits. These include:

- **Well-child visits in the first 15 months of life (W15):** Assesses children who had up to six well-child visits with a primary care practitioner (PCP) during their first 15 months of life.
- **Childhood immunization status (CIS):** Assesses children 2 years of age who had completed the Combo 3 vaccinations, which are at minimum:
 - Diphtheria, tetanus and acellular pertussis (DTaP)
 - Polio (IPV)
 - Measles, mumps and rubella (MMR)
 - Haemophilus influenza type B (HiB)
 - Hepatitis B (HepB)
 - Chickenpox/varicella (VZV)
 - Pneumococcal conjugate (PCV)
- **Additional vaccines include** hepatitis A (HepA), rotavirus (RV) and influenza (flu).
- **Well-child visits in the third, fourth, fifth and sixth years of life (W34):** Assesses children ages 3 to 6 who received one or more well-child visits with a PCP in a year.
- **Adolescent well-care visits (AWC):** Assesses adolescents and young adults ages 12 to 21 who had at least one comprehensive well-care visit with a PCP or an OB/GYN in a year.
- **Children and adolescents' access to primary care practitioners (CAP):** Assesses children and young adults ages 12 months to 19 years who had a visit with a PCP.



Health checks **for teens**

As children reach adolescence, their health needs will change. According to the **American Academy of Pediatrics (AAP)**, adolescents and young adults may engage in high-risk behaviors such as:

- Alcohol use, which plays a role in a high number of unintentional injuries, the leading cause of death for this age group
- Use of electronics while driving
- Sexual activity

Many teens also engage in behaviors that can affect their long-term health, including smoking, poor eating habits and a lack of exercise.

To address the changing health and social landscape that adolescents face, providers will need to address not just physical and mental health, but also sexual and social development and risk-taking behaviors. Bright Futures, a health promotion and prevention initiative from the AAP, offers **guidance for providers** with adolescent patients. The guide offers detailed information on changes and challenges faced at different stages of development, breaking teens into three groups: ages 11-14, ages 15-17 and ages 18-21. An annual tobacco, alcohol and dg use risk assessment should begin at age 11, for instance, and screening for depression should begin at age 12.

You can find adolescent preventive care guidelines at **Ambetter.ARHealthWellness.com**. Navigate to our Provider Resources tab and locate the Clinical Practice Guidelines link under the “Quality” subhead. Paper copies of these guidelines are available upon request.



Adolescent immunization needs

As teens head off to college, it is important for providers to review which immunizations are necessary. **Consumer Reports** notes the close quarters of dorm living make diseases much more likely to spread.

Though vaccine requirements differ by college and state, Consumer Reports says young adults entering college especially need vaccines for:

- Bacterial meningitis (meningococcal)
- Human papillomavirus (HPV)
- Influenza
- Tetanus, diphtheria and pertussis (Tdap)

Visit the **Centers for Disease Control and Prevention website** to review an immunization schedule for those ages 18 and younger. Although some members may have received vaccinations in childhood, it is important to ensure that teens are protected against new or increased chances of contracting these diseases.

- Immunizations for adolescents (IMA): Assesses adolescents 13 years of age who had completed the Combo 1 vaccinations, which are:
 - Meningococcal vaccine (MCV)
 - Tetanus, diphtheria and pertussis (Tdap)

Combo 2 vaccinations, which are recommended, include both Combo 1 vaccines and human papillomavirus (HPV) vaccines.

HEDIS

The HEDIS measure **Immunizations for Adolescents** assesses 13-year-olds who had one dose of meningococcal vaccine, one Tdap vaccine and the complete HPV series.



Screening for lead

Lead poisoning can cause intellectual, developmental and physical problems. Yet because it doesn't have obvious symptoms, it may be easily overlooked.

The **Centers for Disease Control and Prevention (CDC)** reports that children living in 4 million U.S. households are being exposed to lead. Exposure to high lead levels can damage the brain and nervous system. It can also cause developmental and growth delays, learning and behavioral problems, and hearing and speech problems. The CDC says there is no safe blood lead level.

It is recommended that children enrolled in Ambetter from Arkansas Health & Wellness have a blood lead screening test at ages 12 and 24 months. It is also recommended that children ages 24 months to 6 years who haven't been screened in the past undergo a blood lead screening test.

HEDIS

The HEDIS measure **Lead Screening in Children** measures the percentage of 2-year-olds who had one or more capillary or venous lead blood tests for lead poisoning by their second birthday.



Meeting appointment accessibility standards

Are your patients able to obtain services when needed? Arkansas Health & Wellness monitors the availability of our network practitioners. Availability is key to member care and treatment outcomes.

Arkansas Health & Wellness follows the accessibility requirements set forth by applicable regulatory and accrediting agencies. We monitor compliance with these standards

annually and use the results of monitoring to ensure adequate appointment availability and reduce the unnecessary use of emergency rooms.

Please review the appointment availability standards in the Provider Manual.

After-hours requirements



Members need to know who to contact after business hours. Providers are required to offer arrangements for access to a covering physician after business hours, or they must have an answering service, triage service or voice message that explains to members how to access urgent and emergency care. This helps ensure our members get the best possible healthcare.

The requirements below ensure that our members have adequate access to needed healthcare services and can access their providers after normal business hours and on weekends.

Offices using an answering machine must:

- Provide a message directing members to call 911 or go to the nearest emergency room if they think it is too urgent to wait for a doctor to call back.
- Provide instructions on how to contact the doctor if the situation is urgent.

Offices using an answering service must:

- Offer to page the doctor on call and he/she will call the member back.
- Offer to transfer the member directly to the doctor on call.



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Member education by Telesofia

Ambetter from Arkansas Health & Wellness has partnered with Telesofia Medical Ltd.

to create a member education campaign that encourages members to get colorectal and cervical cancer screenings.

Telesofia is committed to increasing members' health literacy and engagement with interactive, personalized patient education videos. Videos are customized for each member. They feature a presenter who addresses the member by first name and actors who resemble the member's age, gender and ethnicity. The videos also include a photo of the member's primary care doctor.

Recently, Ambetter from Arkansas Health & Wellness reached out to a sample of in-network providers and asked them to take part in this campaign. Participating providers shared their professional photos and current contact information for inclusion in these educational videos. They also sent in signed consent forms that allow their photos and contact information to be used. By using providers' photos as part of this campaign to members, we hope to encourage member adherence to screening schedules as well as increased engagement between members and providers.

Three customized videos have been deployed and will continue to circulate through 2019. This year, the initiative will reach about 12,000 Ambetter from Arkansas Health & Wellness members across the state. For more information about Telesofia, please visit telesofia.com. You can also contact Ambetter from Arkansas Health & Wellness at **1-800-294-3557** with any questions you have about this program.

Online resources and contact information

We know that having the tools you need is essential to caring for our members. For convenience, many of our business functions are available to you online. Review the features below to learn what you can do on our website and Secure Provider Portal, and find the phone numbers to call if you need assistance or more information.

Visit our website to:

- Log in to our Secure Provider Portal
- Register for continuing education and topical courses, such as our upcoming OpiEnd buprenorphine training
- Register for webinars, view past webinar information and access all of our provider newsletters
- Find all our clinical and payment policies, such as the Preferred Dig List

On our Secure Provider Portal, you can:

- Check a member's eligibility
- File claims
- Submit, view and confirm service authorizations
- View historical patient health records
- View, manage and download your patient list
- Communicate with Arkansas Health & Wellness staff through secure messaging
- Update your demographic information

General provider inquiries about

Ambetter: **1-877-617-0390**

General provider inquiries about

Allwell: **1-855-565-9518**

For questions about contracting,
please call **1-844-631-6830**.



Combatting opioid use disorder (OUD): How you can help

In 2017, the Substance Abuse and Mental Health Services Administration (SAMHSA) reported that 2.1 million Americans were living with opioid use disorder (OUD).*

As part of our effort to combat the opioid crisis, Arkansas Health & Wellness has collaborated with the American Society of Addiction Medicine (ASAM) to provide free buprenorphine waiver training for providers. Buprenorphine is the first at-home therapy to treat OUD, providing an alternative treatment option for members with limited means of transportation. It is also a treatment option for expectant mothers with OUD.**

The training, conducted by ASAM, includes four hours of online training at your own pace

and four hours of interactive training that you can view by streaming to your device remotely or by attending live in St. Louis. Participating providers will also receive continuing medical education, a copy of the ASAM National Practice Guideline and other clinical resources.

The training dates below feature curriculum designed for women's health providers, though all interested providers are encouraged to join.

- September 13, 2019
- November 8, 2019

To register, visit [ARHealthWellness.com/providers/resources/provider-training.html](https://www.arhealthwellness.com/providers/resources/provider-training.html) and navigate to the tab titled "ASAM Training" on the left.

* Substance Abuse and Mental Health Services Administration. (2017). "Key substance use and mental health indicators in the United States: Results from the 2016 National Survey on Drug Use and Health" (HHS Publication No. SMA 17-5044, NSDUH Series H-52). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from [samhsa.gov/data](https://www.samhsa.gov/data).

** NIDA. (January 8, 2019). "New Studies Clarify Risk Factors for Neonatal Abstinence Syndrome." Retrieved from [drugabuse.gov/news-events/nida-notes/2019/1/new-studies-clarify-risk-factors-neonatal-abstinence-syndrome](https://www.drugabuse.gov/news-events/nida-notes/2019/1/new-studies-clarify-risk-factors-neonatal-abstinence-syndrome) on May 1, 2019.

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