

PROVIDER BULLETIN

JULY 2006

ALLIANCE LAUNCHES COMMUNITY PLANNING PROCESS FOR MEDI-CAL PROGRAM

Over the past three months, the Alliance convened four community planning meetings with senior and disabled rights advocates in Alameda County. The goals of this first phase of the planning process are to strengthen services provided to seniors and persons with disabilities currently enrolled in the Alliance Medi-Cal program, and begin developing a pilot project that would expand Medi-Cal managed care to additional seniors and persons with disabilities.

Assembly Bill 2607, sponsored by Assemblymember De La Torre, would authorize the state Department of Health Services (DHS) to require enrollment of seniors and persons with disabilities in Medi-Cal managed care plans in a few select counties on a pilot basis. Alameda County has expressed its interest to DHS in piloting the expansion. The bill has been approved by the full Assembly and recently passed the Senate Health Committee. If the legislation is enacted, it will set in motion a planning process for the selected counties. Alameda County would then move forward by convening additional stakeholders, including providers and other key groups. The pilot programs would be subject to legislative approval of an implementation plan, which DHS is required to submit to the legislature by March 1, 2007.

The Alliance is working closely with consultants from the Center for Disability Issues and the Health Professions at Western University of Health Sciences in Pomona to assess how well the Alliance is serving our current members who are seniors and persons with disabilities and to enhance the plan's readiness. While there are numerous issues and concerns to tackle, serving as a pilot site would position Alameda County to identify best practices to: a) coordinate care across multiple agencies, b) transition beneficiaries smoothly from fee-for-service to a managed care model, c) fashion benefits to increase access to needed health care services, d) support the safety net health care system, and e) reimburse the system sufficiently to sustain quality care.

Summary minutes and presentations from the first phase of the community planning process will be posted on the Alliance Web site (www.alamedaalliance.org). If you have questions about this process or the legislation, please contact the Alliance Provider Services Department at (510) 747-4510.

MEDICARE SPECIAL NEEDS PLAN (SNP)

The Alliance is planning to expand its lines of business by becoming a Medicare Special Needs Plan (SNP) effective January 2008. The program would facilitate coordination of benefits for members who are dually eligible for Medicare and Medi-Cal, allowing the Alliance to better serve these members while maximizing available resources. A business plan will be presented to the Alliance Board of Governors for consideration within the next couple of months. Progress updates will be provided to you via this Bulletin.

TECHNOLOGY CORNER

Current Rx and Alliance Formulary Information FREE via Epocrates

Epocrates, Inc. provides critical clinical and formulary information to physicians and other healthcare professionals at the point of care using technology. Epocrates' products include both FREE and premium clinical references for mobile and desktop products. The clinical references feature continually updated information on drugs, diseases, and diagnostics, and the convenient MobileCME™ learning system. To obtain additional information about Epocrates or to download products and the Alameda Alliance for Health formulary, please visit www.epocrates.com.

ADVAIR FORMULARY CHANGE

Effective July 1, 2006, the Alliance initiated changes in Advair prescriptions. These changes are being made to promote appropriate use of Advair as a second-line agent for the treatment of moderate to severe persistent asthma. Advair will be available through a drug prior authorization (PA), unless certain criteria are met. The following highlights the changes:

- ✓ Patients currently using Advair on a regular basis will not need to change to another medication and a drug PA will not be required.
- ✓ If Advair use has been intermittent, a drug PA will be required.
- ✓ A drug PA will not be required for patients who have not achieved control with consistent use of a steroid inhaler (i.e. QVAR).

The Alliance encourages providers to review the National Asthma Education and Prevention Program Expert Panel Report 2: *Guidelines for the Diagnosis and Management of Asthma*, to learn more about current asthma medications and their appropriate use. These guidelines can be obtained at:

<http://www.nhlbi.nih.gov/guidelines/asthma/asthgdln.htm> or by calling Elizabeth Edwards, Health Programs Manager, at (510) 747-4555 ext. 4181.

NATIONAL CORRECT CODING INITIATIVE INFORMATION

As communicated in the January 2004 provider contract amendment, the Alliance adopted National Correct Coding Initiative (NCCI) guidelines in November 2003. The Centers for Medicaid and Medicare Services (CMS) developed the Correct Coding Initiative (CCI) to promote national correct coding methodologies and control improper coding leading to inappropriate payment in Part B claims. CMS coding policies are based on: 1) coding conventions defined in the American Medical Association's Current Procedure Terminology (CPT) manual, 2) national and local policies and edits, 3) coding guidelines developed by national societies, 4) analysis of standard medical and surgical practices, and 5) a review of current coding practices.

CCI edits are intended to ensure that the most comprehensive groups of codes are billed appropriately rather than the component parts. CCI edits also check for mutually exclusive code pairs. The unit-of-service edits determine the maximum allowed number of services for each Healthcare Common Procedural Coding System (HCPCS) code.

Please visit the CMS website, <http://www.cms.hhs.gov/NationalCorrectCodInitEd/>, for more information or call the Provider Services Department at (510) 747-4510 to request training.

FORMULARY UPDATES

Alameda Alliance for Health Pharmacy Services Unit: (510) 747-4541

The Alliance Pharmacy & Therapeutics Committee reviewed the efficacy, safety, cost and utilization profiles of the following therapeutic categories on June 13, 2006:

- Asthma
- Depression
- Cough and Cold

The Pharmacy & Therapeutics Committee has approved the following modifications:

Effective Dates	Generic Name	Brand Name †	Strength	Dosage Form	Committee Actions	Comments
7/5/2006	Nedocromil	Tilade	1.75mcg/Act	Oral Inhaler	Move from formulary to PA	Intal (Cromolyn) Inhaler or Nebulizer on formulary
7/24/2006	Formoterol	Foradil	12 mcg	Aerolizer Capsules	Move from formulary to PA	Use Advair
7/24/2006	Salmeterol	Serevent	50mcg/dose	Oral Inhaler	Move from formulary to PA	Use Advair
7/5/2006	Pirbuterol	Maxair	200mcg/Inh	Oral Inhaler	Move from formulary to PA	Albuterol and Alupent Inhaler on formulary
7/5/2006	Fluticasone-Salmeterol	Advair Diskus	500-50mcg/dose	Powder Disks for Inhalation	Move from formulary to PA	Contingent therapy for corticosteroid inhaler
7/5/2006	Zafirlukast	Accolate	20mg	Tablet	Move from non-formulary to PA for >5 years old	Contingent therapy for corticosteroid inhaler or Advair Diskus
7/5/2006	Montelukast	Singulair	All	Tablet, Chew, Granules	Change Contingent Therapy: (Steroid Inhaler or Advair) and Accolate	Qty Limit: #30/25 days
7/5/2006	Fluoxetine	Prozac	40mg	Capsules	Move from formulary to PA	Use 20mg capsules
7/5/2006	Fluoxetine	Prozac	20mg	Tablets	Move from formulary to PA	Use 20mg capsules
7/5/2006	Fluoxetine	Prozac Weekly	90mg	Capsules	Move from formulary to PA	Use 20mg capsules
7/5/2006	Fluoxetine	Prozac	20mg/5ml	Solution	Formulary for < 6 years old, otherwise PA	
7/5/2006	Citalopram	Celexa	All	Tablets, Solution	Formulary	

Effective Dates	Generic Name	Brand Name †	Strength	Dosage Form	Committee Actions	Comments
7/5/2006	Fluvoxamine	Fluvoxamine	All	Tablets	Formulary	
7/5/2006	Trazodone	Desyrel	300mg	Tablet	Change from formulary to PA	Use Trazodone 150mg tablet
7/5/2006	Ceterizine	Zyrtec	All	Syrup, Chew, Tablets	Change contingent therapy: for loratadine only	
7/5/2006	Fexofenadine	Allegra	All	Capsules, Tablets	Change contingent therapy: for loratadine only	

DR. CHEN GOES ON TOUR

Alliance Chief Medical Officer, Dr. Arthur Chen, will be in your neighborhood soon to discuss our “Sharing Back the Savings Program.” Our goal is to meet with Alliance Directly Contracted Primary Care Providers to introduce our version of Pay for Performance and learn more about how the Alliance can assist providers.

The main objectives of the program are to:

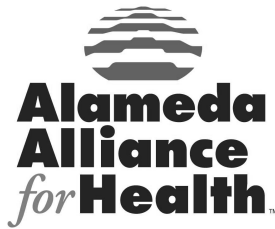
- Improve care for our health plan members with Ambulatory Care Sensitive Conditions (ACSC) and reduce ACSC hospital admissions. See link for ACSC definitions: <http://www.ahrq.gov/data/safetynet/billappb.htm>
- Reduce Emergency Room Use for Non-Emergencies

The Alliance will measure savings from reduced hospitalization and ER Visits as a result of the above efforts at the end of FY06-07. A portion of the savings from our baseline will be utilized for fiscal year-end disbursement as part of our quality improvement incentive fund.

A Provider Relations representative will call you within the next month to schedule a breakfast, lunch or early dinner appointment with Dr. Chen. If you would like to schedule an appointment before we reach you, please call the Provider Services Department at (510) 747-4510.



CONTACT INFORMATION



1240 South Loop Road
Alameda, California 94502

providerservices@alamedaalliance.org

WE'RE ON THE WEB!

WWW.ALAMEDAALLIANCE.ORG

USING THE ONLINE PROVIDER CONNECTION, ALLIANCE PROVIDERS CAN:

- ▶ Verify member eligibility
- ▶ Check authorization/claim status
- ▶ View an online provider manual

To use the online Provider Connection, you will need to obtain a provider account.

Log on to www.alamedaalliance.org and click on "Provider Connection."

Follow the online instructions on how to set up an account.

If you have problems accessing the Web connection, call (510) 747-4510 or e-mail providerservices@alamedaalliance.org.

Authorizations (provider use only)	(510) 747-4540
	fax (510) 747-4507
Case Management Services:	(510) 747-4540
<i>Asthma and Diabetes</i>	
Claims	(510) 747-4530
	fax (510) 747-4506
Member Services (8 a.m. – 6 p.m., M-F)	(510) 747-4567
Provider Credentialing	(510) 747-4555
	Extension 4025
Provider Services General Information	(510) 747-4510
	fax (510) 747-4508
Provider Relations Representatives:	
Lorena Ahumada	(510) 747-4555 Ext. 4028
(Alameda, Albany, Berkeley, Oakland, and San Leandro)	
Kreshenda Jenkins	(510) 747-4555 Ext. 4029
(San Lorenzo, Castro Valley, Hayward, Union City, Newark, Fremont, Dublin, Pleasanton, Livermore, and Sunol)	
Toby Wilson	(510) 747-4555 Ext 4027
(Facility Site Review and Internal Liaison)	
Interpreter Services	(510) 747-4554
Alameda County Behavioral Health	(800) 491-9099
Children First Medical Group	(510) 428-3489
Community Health Center Network	(510) 769-2200
Pharmacy Benefit Manager	800) 777-0074
Delta Dental	(800) 338-4337
Denti-Cal	(800) 322-6384
Domestic Violence Hotline	(510) 536-7233
Healthy Families Program	(800) 880-5305
PacificCare Behavioral Health	
Physician Consultation	(800) 292-2922
Member Referral	(888) 789-7110
Quest Diagnostic (LAB)	(800) 288-8008
VSP (Vision Services Plan)	(800) 877-7195
Eligibility (24-hour automated line)	(510) 747-4505