



Provider BULLETIN



MARCH 2010



This Bulletin applies to:

- Medi-Cal
- Alliance CompleteCare
- Healthy Families
- Alliance Group Care

New for Alliance CompleteCare Individualized Care Plans in 2010



The Alliance has instituted an Individualized Care Plan (ICP) program for its Alliance CompleteCare members to comply with a new requirement set by the Centers for Medicare and Medicaid Services (CMS). As of January 2010, Medicare Advantage Special Needs Plan members must have the opportunity to take part in the development of an ICP.

WHAT'S INSIDE:

Alliance CompleteCare Updates

- Care Plans
- Case Management Referrals
- Dental Coverage Added



Community Resources



FREE Interpreter Services



Stop Fraud and Abuse



Preventing Member Identity Theft

The Alliance is contracting with Independent Living Systems, a company specializing in care coordination, to develop the ICPs. Alliance CompleteCare members who opt into this free program will receive care plans designed to:

- Promote self-management of chronic conditions
- Identify interventions that may assist them in managing their health care
- Encourage them to connect with their PCPs, including post-hospitalization
- Connect them to community-based resources and programs

Primary care providers will receive copies of their patients' care plans. We need your feedback and participation to make this effort a success. When you receive ICPs for Alliance CompleteCare members, we request that you respond as follows:

- Provide the Alliance with feedback on the care plans
- Discuss the care plans with your patients
- File the care plans in your patients' charts

Please contact the Alliance CompleteCare Care Advisor Unit at 1-877-585-7526 to provide your feedback or learn more.



Health care you can count on.
Service you can trust.



Physician Referrals for Complex Case Management

Our Alliance CompleteCare Medicare Advantage Plan is designed to meet the needs of seniors and people with disabilities. Our commitment includes offering case management services to members with complex health conditions. If you would like to refer an Alliance CompleteCare member for complex case management, we will consider your recommendation in conjunction with claims, utilization, and other data.

Since 2005 we have partnered with Healthways, a case management company, to identify members in need of complex case management using an algorithm that includes provider referrals. Healthways has achieved excellent results by influencing individual well-being, including physical health and social and emotional factors, by reaching out in ways that are most effective for each person. Please contact the Alliance CompleteCare Care Advisor Unit at 1-877-585-7526 to refer a member.



Alliance CompleteCare Now Offers Dental Coverage

As of January 2010, Alliance CompleteCare now comes with comprehensive dental benefits. Since we announced the addition of dental coverage to our Medicare plan in October 2009, we have experienced a 67% increase in membership! The Alliance has chosen LIBERTY Dental Plan to provide these benefits. The benefits include, but are not limited to:

- Routine care and cleanings
- X-Rays and fillings
- Crowns, bridges and dentures

If you have any questions about the dental coverage, please contact LIBERTY Dental Plan's provider line at 1-800-268-9012 or call the Alliance Care Advisor Unit at 1-877-585-7526.



CRISS at Your Service



Children with special health care needs are eligible for services offered by the Children's Regional Integrated Service System (CRISS). The CRISS services promote an integrated, cost-effective and efficient regional service system that improves service delivery and coordination of care. CRISS has been working to create a regional seamless system of care for children in CCS throughout a 25-county region in Northern California since 1996. For more information on an updated resource list for children with special needs, i.e. developmental or learning delays, autism, social/emotional conditions, please visit: www.criss-ca.org/Medical%20Home%20Materials.html, or call the Alameda County Medical Home Project at (510) 540-8293. You can also find useful resource guides on the Alliance Web portal: www.alamedaalliance.org.



Free Service: Qualified Medical Interpreters for Alliance Members



The Alliance strongly discourages use of family or friends as interpreters for Alliance members. Using an untrained interpreter may cause miscommunication of medical information, embarrassment when discussing sensitive topics, and compromise quality of care. If a member declines interpreter services, the state of California requires the provider to document this in the medical record.

To request a free interpreter for an appointment with an Alliance member, call:
In-person interpreter: (510) 747-4567 or Interpreter by phone: (415) 788-4149



Prevent Fraud and Abuse

Alameda Alliance for Health fosters a culture that promotes prevention, detection and resolution of fraud and abuse. The Alliance complies with all applicable federal and state laws addressing false claims, including the Federal False Claims Act, the California False Claims Act, and the Deficit Reduction Act of 2005 (Section 6032). If you have concerns about possible unethical business practices or potential illegal activity involving our health plan, our providers, vendors or members, please report this information by contacting one of the following:

- Alameda Alliance for Health Compliance Officer: (510) 747-6189
- Alameda Alliance for Health Compliance Hotline: (510) 747-4576
- For Medi-Cal: Call the Department of Health Care Services Medi-Cal Fraud Reporting Line at 1-800-822-6222
- For Medicare Part C & D: Call 1-877-7SAFERX (1-877-772-3379); fax (410) 819-8698; or write to Health Integrity Attention: MEDIC, 9240 Centreville Road Easton, MD 21601



Preventing Member Identity Theft: Red Flags Rule

The Federal Trade Commission's (FTC) "Red Flags Rule" requires an Identity Theft Prevention Program when someone uses another individual's identifying information such as social security number, credit card number, or insurance related information.

Any physician who accepts health insurance or allows a patient to enter into a payment plan is required to meet the Red Flags Rule. The physician must have adequate policies and procedures in place by June 1, 2010.

We offer the following guidance for practices to protect themselves from identity theft:

When a patient is first seen at your office, your staff should check that the patient has a form of identification that matches their current health insurance card:

- Driver's license or photo ID
- Another form of identification that shows their current address if different from the photo identification

If your office staff detects potentially fraudulent activity by an Alliance member, the office must:

1. Report the incident to the Alameda Alliance for Health Compliance department at (510) 747-4576 or via email to compliance@alamedaalliance.org , or
2. Call the Department of Health Care Services Medi-Cal Fraud Reporting Line at 1-800- 822-6222

The FTC may impose penalties of up to \$2,500 per violation if a physician is deemed as out-of-compliance with the rule. For more information, contact your Provider Services Representative or call the Provider Services department at (510) 747-4510.