

Colorado Access on the Web
WWW.COACCESS.COM

Frequently Used Forms

A list of frequently used provider forms can be located on our Web site at <http://www.coaccess.com/frequently-used-forms>

Provider Network Services
PO Box 17580
Denver, CO 80217-0580

PNS@coaccess.com
(303) 751-9021
1-888-214-1101

Claims:
PO Box 17470
Denver, CO 8021-0470

Provider Carrier Disputes
(Claim Appeals):
PO Box 17189
Denver, CO 80217-0189

Customer Service &
Grievance
PO Box 17950
Denver, CO 80217-0950

Colorado Access information, including claim status and eligibility, can be found on our Web site at: www.coaccess.com

Benefit Highlights

Over-the-Counter Medications

More than 200 over-the-counter medications are covered for members of CHP+ offered by Colorado Access when prescribed by a doctor. For a complete list of covered over-the-counter drugs please visit our formulary located on our Web site at www.coaccess.com/pharmacy-services

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Emergency Department Utilization Program

Colorado Access continues to make efforts to reduce non-urgent Emergency Department (ED) visits in order to increase continuity and quality of care for our members. Consistent with the Colorado Access mission, the emergency department utilization program is focused on encouraging member-Primary Care Provider (PCP) relationships, increasing access to services and improving the quality and cost effectiveness of care.

The program now includes an informational follow up mailing sent to each member after their first ED visit. The mailing includes a letter to the member encouraging them to contact their PCP for care and discusses appropriate reasons for an ED visit. Additionally, a list of Urgent Care Centers throughout the state is included.

In addition to the above-mentioned mailing, the program also includes an outreach call by a Colorado Access care manager to those members who utilize the ED frequently (3 or more visits within a quarter). The purpose of the call is to ensure the member has a relationship with a PCP and to provide assistance addressing any barriers leading to unnecessary ED use. After speaking with members, we will notify providers via fax that their patient has been contacted by a care manager. The fax will also provide information regarding their patients' recent ED visit(s). We encourage providers to discuss these emergency department visits with their patients.

Thank you for your continued care of our members. Please assist us in our efforts by educating members on the best options for after-hours care and by supporting patients calling your office or clinic before they visit the ED, especially if they are unsure if their condition is an emergency. If you have any questions regarding the Emergency Department Utilization Program please contact care management at (720) 744-5124.

2010 After-Hours Access Survey

Colorado Access will begin After-Hours Access Survey calls in mid-June 2010. The survey is one of many tools Colorado Access uses to evaluate member access to care. Calls will be placed to Primary Care Provider (PCP) offices during weekend and after-hours to determine if members have access to a qualified healthcare practitioner via telephone coverage either onsite, through call sharing, or an answering service 24 hours a day, 7 days a week.

Please contact Ileana Perez, Medical Home Coordinator at (720) 744-5236 or at ileana.perez@coaccess.com if you have any questions.

New Pediatric BMI HEDIS Measure

In order to address the increase of childhood obesity rates, NCQA introduced a new pediatric measure for 2009 HEDIS reporting: *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents*. This measure assesses whether providers have performed the calculation and assessment of Body Mass

Index (BMI) percentile, as well as counseling for nutrition and physical activity. Specific CPT, ICD-9 and HCPCS codes have been developed for these services and should be billed accordingly:

Description	CPT	ICD-9-CM Diagnosis	HCPCS
BMI percentile		V85.5	
Counseling for nutrition	97802-97804	V65.3	G0270-G0271
Counseling for physical activity		V65.41	

The American Academy of Pediatrics and Bright Futures guidelines recommend that these components are incorporated into preventive visits beginning at age 2. Please contact Amy Sibbel (Amy.Sibbel@coaccess.com), Health Promotions Coordinator, if you would like further tools or help in incorporating BMI and nutrition/physical activity counseling into your practice routine.

Practice Guidelines

Colorado Access maintains a set of practice guidelines for use by Colorado Access providers. The practice guidelines are based on recommendations from nationally recognized organizations. They have been developed, adopted and maintained with the goal of improving health outcomes by reducing variation in care delivery.

Colorado Access presents all guidelines to be adopted or updated yearly to the physicians participating on our Medical/Behavioral Quality Improvement Committee (MBQIC). They evaluate the content of the guidelines and provide evidence-based feedback. All guidelines are available on the Colorado Access Provider Web site (<https://www.coaccess.com/practice-guidelines>) and are also available in hardcopy by request.

Following are the practice guidelines currently offered:

Preventive Health Guidelines

- ⇒ Adult Health Maintenance
- ⇒ Adult Immunization
- ⇒ Colorectal Cancer
- ⇒ AAP Periodicity Schedule/Bright Futures
- ⇒ Child/Adolescent Immunization
- ⇒ Influenza Vaccine
- ⇒ Perinatal Guideline
- ⇒ Adult Cardiovascular Disease and Stroke Prevention
- ⇒ Tobacco Cessation and Secondhand Smoke Exposure
- ⇒ Alcohol and Substance Abuse

Clinical Physical Health Guidelines

- ⇒ Abnormal Pap
- ⇒ Adult GERD/Heartburn
- ⇒ Asthma
- ⇒ Diabetes
- ⇒ Adult Obesity
- ⇒ Acute Respiratory Infection (ARI)

Behavioral Health Clinical Guidelines

- ⇒ Depression Treatment
- ⇒ Attention Deficit/Hyperactivity Disorder (ADHD)
- ⇒ Bipolar
- ⇒ Metabolic Monitoring of Adult Members Prescribed Antipsychotics

Provider Medical Record Keeping

Colorado Access has established medical record documentation guidelines based on applicable regulatory and accrediting body standards that are approved by the Medical/Behavioral Quality Improvement Committee (MBQIC). These standards are documented in the provider manual located on our Web site at <http://www.coaccess.com/chp-provider-information>

Providers are responsible for maintaining confidential medical records that are current, detailed and organized and that promote continuity of care for each patient. Well documented medical records facilitate communication, coordination and continuity of care and effective treatment.

We would like to thank our providers for their participation in this audit. The 2009 review of provider medical records showed good results. Most elements exceeded the performance standard of 75% per element and 90% across all elements for the entire network and individual clinics. Performance standards for 2010 will be set at 80% per element and 90% across all elements.

Results by Element, All Providers, All Lines of Business

Element	2009	2008
Patient identification on each page	97.9%	98.6%
Personal biographical information	100.0%	98.3%
Each entry has provider's name or initials and credentials	100.0%	97.8%
Each entry dated	100.0%	98.9%
Record is legible	100.0%	99.7%
Record is organized	100.0%	99.4%
Medical history	99.4%	99.4%
Medication allergies and adverse reactions displayed	100.0%	97.2%
Current medication list or meds listed in progress notes	98.9%	98.6%
Current immunization record**	95.2%	N/A
Completed problem list or Summary health maintenance exams	98.1%	99.2%
Physical exam appropriate to patient's condition	100.0%	99.4%
Working diagnoses are consistent with findings	100.0%	99.4%
Treatment plans are consistent with diagnoses	100.0%	99.4%
Return visit or follow-up plan noted	100.0%	99.2%
Each visit prior problem addressed	100.0%	98.0%
Consultation, lab or imaging reports or notes received, reviewed and initialed	97.2%	99.2%
Inquiry/counseling regarding smoking habits^	91.8%	96.1%
Inquiry/counseling regarding history of alcohol/substance abuse^	80.8%	95.3%
Evidence of preventive services & screenings/health education/ anticipatory guidance is available	91.3%	97.2%
Advance Directive documented#	13.2%	5.0%

** Pediatric records only

Adult records only

^ 11 years old or older