Provider Newsletter

Fall 2016

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Clinical practice update

Using clinical guidelines in patient care can aid in ensuring your patients get effective, high quality care by helping you employ evidence-based standards in the prevention, diagnosis, and treatment of a variety of medical conditions. In 2016, FHN’s Quality Management Committee approved many clinical practice guidelines which are aligned with nationally recognized standards of practice. Specifically, these included Behavioral Health ADHD Practice Guidelines for Children and Adolescents, and Smoking Cessation guidelines. Additionally, clinical practice guidelines and practice tools were adopted this year for:

- Lipid Disorders
- Oral Health
- Osteoporosis
- Prostate Cancer
- Skin Cancer Counseling
- Tuberculosis
- Universal HIV Screening (CDC)
- Early and Periodic, Diagnostic and Treatment (State of Illinois recommendations)

All FHN approved clinical practice guidelines are distributed through provider onsite visits by our Quality team, Provider Advisory Group meetings, and are available on FHN’s website (www.fhnchicago.com). We hope you will find these guidelines and tools useful in your practice.

Pharmacy program reminder

FHN’s website contains the most recent information regarding changes in pharmacy policy. It is updated when changes occur and reviewed annually. The website contains:

- The list of pharmaceuticals available, including restrictions and preferences
- How to use the pharmaceutical management procedures
- An explanation of medication limits and quotas
- How prescribers must provide information to support exception requests
- Processes for generic substitution, therapeutic interchange and step therapy protocols
- Drug Reference and Interaction Tool to provide drug-drug interactions, side effects, risks of drugs, and generic substitutions available for brand name drugs
- Pharmacy Locator Tool
- Pharmacy updates and notices
- Medication safety alerts and recall notices

If you have any questions, please contact our Provider Services Department at 1-888-346-4968, option 5 for assistance.

Utilization management decision making

As a reminder, it is FHN’s policy that all utilization management decisions are based solely on medical necessity, which includes appropriateness of care and services, and the existence of covered benefits. FHN does not reward staff, delegates, practitioners or other individuals for issuing denials of coverage, denials of care or denials of services. Incentive programs are not used to encourage decisions that result in under-utilization of care or services.
You are invited to visit FHN’s provider portal. The provider portal is designed to give you real-time access to valuable information about your FHN patients and may eliminate the need to call Provider Services.

For greater convenience, you can enjoy the many benefits we offer online, including:

• Provider eligibility verification
• Provider demographics updates secure form
• Member roster report
• Secure W-9

In addition, you would be able to soon enjoy:

• Authorization submission
• Authorization inquiry/status
• Claims status
• Gaps in care overview
• Link to Emdeon/Change Healthcare portal
• Vital care plan attestation

To get started, simply visit fhnchicago.com and click on the provider login button on the right side of the home page. You will need to register as a first-time user. At that time, you will have the opportunity to select your user ID and password.

Network Management Specialists are available to provide training. For questions or to request a training session, please call your Network Management Specialist.

Changes to prior authorization requirements

In an effort to better serve our patient population and increase provider satisfaction, we have made changes to our utilization management requirements. Effective Aug. 1, 2016, we have relaxed some of our prior authorization requirements. Please visit our website at www.fhnchicago.com to view a copy.

If you have any questions, please contact our Provider Services Department at 1-888-346-4968, option 5 for assistance.
Recent changes to prescription drug coverage

Your patients’ health is our top priority, which is why we want you to know about the recent changes to FHN’s 2016 Formulary (list of covered drugs).

As of Oct. 1, 2016, Nesina (alogliptin) and Kazano (alogliptin/metformin) were added to our drug list. These changes may affect your FHN members. All formulary changes are reviewed and approved by the Pharmacy & Therapeutic Committee.

If you have any questions, please contact our Provider Services Department at 1-888-346-4968, option 5 for assistance.

New electronic payment options

In our ongoing commitment to improve efficiency and make it easier to do business with FHN, we are offering new electronic payment options for claims processed via our internal claim platform. For the time being, you may receive paper checks from our other Medical Service Organizations (MSOs).

Beginning Aug. 29th, we partnered with ECHO Healthcare Payment Systems to provide new electronic methods for claim payment. Your action is required. ECHO Healthcare will be issuing payments via virtual credit card.

- Your payment will arrive via fax or USPS and will include the option for an electronic explanation of payment. Normal merchant fees apply. To decline this option, please call 888-834-3511.
- If you’d like to continue receiving virtual credit card payments, no action is required.

If you have questions regarding these payment options, please contact your Network Management specialist or Provider Services at 1-888-346-4968, option 5 for assistance. For enrollment questions, call ECHO Healthcare at 888-834-3511.

Care coordination and complex case management

Family Health Network is using many methods to identify members who could benefit from our Care Coordination programs. Business insight is using all available data like claims, pharmacy and labs to calculate risk score. Additionally the Health Risk Survey (HRS) and the Initial Primary Assessment are done as a source of identification followed by member self-referral, provider referral, and other sources such as nurse hotline, discharge planner, disease management and utilization management referrals. Practitioners can contact FHN Care Coordination team to refer members to the program by emailing to carecoordinationreferral@myfhn.com.