



HEDIS measures performance

Arkansas Health & Wellness strives to provide quality healthcare to our members. We help measure and improve our performance using HEDIS quality metrics. The Healthcare Effectiveness Data and Information Set (HEDIS) is a set of performance measures updated annually by the National Committee for Quality Assurance (NCQA). NCQA uses a committee of purchasers, consumers, healthcare plans, healthcare providers and policymakers to develop HEDIS measures. The measures make it possible to compare plans by using a standardized method to collect, calculate and report information about managed care organization performance.

Like most health plans, Arkansas Health & Wellness uses HEDIS to measure our performance on important aspects of care and service. Through HEDIS, NCQA holds Arkansas Health & Wellness accountable for the timeliness and quality of healthcare services, including acute, preventive and mental health services. We also review HEDIS data to identify opportunities to improve rates and ensure our members are receiving appropriate care.

Please familiarize yourself with the HEDIS topics covered in this issue of the provider newsletter: screening for alcohol use and asthma.

Tips to improve HEDIS scores

Your practice can better our HEDIS performance scores. One way to do this is by reviewing the specific HEDIS measures we discuss in each issue of our newsletter to help providers meet quality improvement goals, such as greater use of preventive health screenings. We also offer guidance on how to bill appropriately to meet the applicable HEDIS measure specifications. Please follow state and/or Centers for Medicare & Medicaid Services billing guidance and ensure the HEDIS codes are covered before submitting claims.

Documentation is an important part of improving HEDIS scores. Here are a few tips:

- Submit accurate and timely claim or encounter data for every service rendered.
- Ensure that chart documentation reflects services billed.
- Bill (or report by encounter submission) for services delivered, regardless of contract status.
- Do not include services that are not billed or are not billed accurately.
- Consider including CPT II codes to reduce medical record requests.
- Respond promptly to all requests for records.



Guidelines for care

Arkansas Health & Wellness adopts preventive and clinical practice guidelines based on the health needs of our membership, and on opportunities for improvement identified as part of our Quality Improvement (QI) program.

When possible, we adopt preventive and clinical practice guidelines that have been formulated by nationally recognized organizations, government institutions, statewide initiatives and/or a consensus of healthcare professionals in the applicable field.

These guidelines are made available and can be used as resources for preventive services, management of chronic diseases, to develop treatment plans for members and to help members make healthcare decisions. Arkansas Health & Wellness providers' adherence to the guidelines is evaluated at least annually, through HEDIS and other performance measurements.

For the most up-to-date version of preventive and clinical practice guidelines, go to ARHealthWellness.com.



Guidelines for alcohol use disorder

Unhealthy alcohol use, ranging from excessive drinking to alcohol dependence, is a common issue, responsible for 1 in 10 deaths among adults ages 20-64, says the Centers for Disease Control and Prevention.

Yet according to the American Psychiatric Association (APA), fewer than 10 percent of individuals in the U.S. with a 12-month diagnosis of alcohol use disorder receive any treatment. In January 2018, the APA released a new guideline, "**Practice Guideline for the Pharmacological Treatment of Patients with Alcohol Use Disorder**," designed to increase knowledge of the disorder and ensure the appropriate use of medications for treatment. It includes information on assessment and treatment planning.

For patients with moderate to severe alcohol use disorder without contraindications to the medications, the guideline says:

- Use of naltrexone and acamprosate is recommended for patients when nonpharmacological approaches have not been effective or when patients prefer the use of medication.
- Use of disulfiram is suggested for patients who have not responded to or are intolerant of naltrexone and acamprosate, who prefer disulfiram and understand the risks of alcohol consumption while taking the drug, and who have a goal of abstinence.
- Topiramate and gabapentin are suggested for patients who have not responded to or are intolerant of naltrexone and acamprosate, who prefer topiramate, and who have a goal of reducing alcohol consumption or achieving abstinence.

HEDIS: Screening for alcohol use

In 2019, NCQA is launching measures to make digital quality reporting easier for healthcare practitioners. The Electronic Clinical Data Systems (ECDS) is a reporting standard for HEDIS and will make it easier to evaluate data from multiple sources. To celebrate the launch, HEDIS will release six new free digital measure packages for healthcare providers.

The HEDIS measure "**Unhealthy Alcohol Use Screening and Follow-Up (ASF)**" is among these packages. The measure, added to HEDIS in 2017, examines how many members 18 years of age and older are screened for unhealthy alcohol use and, if found to be using alcohol in an unhealthy way, receive appropriate follow-up care.

In addition to ASF, HEDIS will release digital measure packages for depression and adult and prenatal immunization. The measures are not yet eligible for public reporting, use in accreditation or health plan ratings.

You can read more about digital quality measures [here](#).



Spring asthma risks

For members with seasonal allergies, the arrival of spring may also mean the start of itchy eyes, sneezing, congestion and other irritations. But members with both allergies and asthma may have more serious issues.

According to a study in the October 2017 issue of *The Journal of Allergy and Clinical Immunology*, 15 to 38 percent of patients with allergic rhinitis also have asthma. In addition, allergic rhinitis is a risk factor for asthma, and uncontrolled allergy symptoms can affect asthma control. Appropriately managing members' asthma can help alleviate some of the compound symptoms they experience. It can also reduce the need for rescue medication as well as reduce the number of visits members make to the emergency room.

Two HEDIS measures assess treatment of members with asthma:

- Medication management for people with asthma: Assesses the number of members ages 5-85 with persistent asthma who were dispensed asthma-controlled medications and who remained on the medications for at least 75 percent of their treatment period.
- Asthma medication ratio: Assesses number of members ages 5-85 with persistent asthma who had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

Managing complex care

Members with high-risk, complex or catastrophic conditions, including asthma, diabetes, sickle cell disease, HIV/AIDS, and congestive heart failure, often have difficulty facilitating care on their own. An Arkansas Health & Wellness care manager may be able to help.

Care managers are trained nurses and practitioners who promote quality, cost-effective outcomes by supporting you and your staff, as well as your patients and their caregivers.

A care manager connects the Arkansas Health & Wellness member with their healthcare team by acting as a link between the member, his or her primary care physician, the member's family and other healthcare providers, such as physical therapists and specialty physicians.

Care managers help members understand the benefits of following a treatment plan. They can also talk with the member to help them understand the consequences of not following their plan as outlined by the physician. Care managers are here to help your team with:

- Noncompliant members
- New diagnoses
- Complex multiple comorbidities

Providers can directly refer members to our care management program. If you have patients that you feel would benefit from this service, call **1-800-294-3557** for additional information.



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Updates to the Arkansas Works work requirement

On March 27, 2019, a federal court ruling removed the work requirement related to the Arkansas Works program. This means that Arkansas Works participants are not required to report work hours or community engagement activities in order to keep their insurance coverage at this time. This determination may affect some of your patients. We want to act as a resource to help Arkansans navigate these changes.

Arkansas Works participants are still required to notify the Department of Human Services (DHS) of any major life changes such as a change of

address, marriage, or the addition of a child to their household. Should this ruling be overturned, or any other changes be made to the Arkansas Works program, participants will be notified by DHS.

For questions about this ruling, participants can call the DHS Helpline at **1-855-372-1084** or visit arkansasworks.ar.gov. Participants can also reach out to DHS for assistance finding a job, education and training resources. Ambetter members previously subject to the work requirement can reach out to our Work Requirement Specialists at **1-877-617-0390** (TTY/TDD: **1-877-617-0392**) with questions or to check their coverage status.



Keep up to date on pharmacy coverage

Arkansas Health & Wellness utilizes Preferred Drug Lists (PDL) for our Ambetter as well as our Allwell membership and updates these lists regularly. A printed copy of the most current PDL includes the procedures for prior authorization and other guidelines, such as step therapy, quantity limits and exclusions.

Starting May 1, 2019, Allwell providers should note that we will require prior authorizations for some Medicare Part B Drugs. To view the full list, [click here](#).

If you have questions about our pharmacy procedures or would like a printed copy of the PDL for Ambetter or Allwell, please call **1-800-294-3557**. You can also view the PDL online at ARHealthWellness.com. Click the product, Ambetter or Allwell, and navigate to the pharmacy page.

Member **rights** and responsibilities

Member rights and responsibilities cover members' treatment, privacy, and access to information. We have highlighted a few below.

Member rights include, but are not limited to:

- Receiving all services that we must provide
- Assurance that member medical record information will be kept private
- Being able to ask for, and get, a copy of medical records, and being able to ask that the records be changed/corrected if needed

Member responsibilities include:

- Asking questions if they don't understand their rights
- Keeping scheduled appointments
- Having a member ID card with them
- Always contacting their primary care physician (PCP) first for nonemergency medical needs
- Notifying their PCP of emergency room treatment

The provider manual includes a more comprehensive list of member rights and responsibilities. Visit ARHealthWellness.com or call **1-800-294-3557** if you need a copy of the manual.



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