

METROMONITOR



The Provider Newsletter of  MetroPlus Health Plan, Inc.

A Message from the Medical Director

Enrollment for Family Health Plus is now underway following a delay due to the events of September 11th. MetroPlus is very excited about this innovative new product and has been working hard to educate our Providers and their staff about Family Health Plus. It is estimated that approximately 600,000 residents of New York State may be eligible to receive Family Health Plus, thus a great opportunity exists for us to work together to enroll uninsured patients who do not qualify for Medicaid.

This issue also contains important information regarding QARR/HEDIS compliance with childhood immunization guidelines. Also related to pediatric care is the article about the MetroPlus initiative to facilitate the completion of 504 Forms; a process with great potential for improving the coordination of care for school children with asthma. Finally, an update about the National Alcohol Screening Day is included to encourage you to participate in this day intended to increase awareness of this significant public health issue.

Best Regards, Arnold Saperstein, M.D.

Family Health Plus Begins



Enrollment into the Family Health Plus (FHPlus) program officially began on February 1, 2002. FHPlus is an expansion of the New York State Medicaid Managed Care program and provides a comprehensive commercial-like benefit package for the uninsured through managed care plans.

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FHPlus is for eligible New York State residents ages 19 – 64 with or without children who do not qualify for Medicaid due to income or resources. Currently, parents may earn up to 133% of the Federal Poverty Level (FPL). This limit will be increased to 150% by October 1, 2002. Single adults and childless couples can earn up to 100% of the FPL. Unlike Medicaid, FHPlus does not exclude anyone based on asset or resource levels.

Individuals may apply for FHPlus by completing an "Access NY Health Care" application with the assistance of a facilitated enroller. FHPlus is not retroactive but it does cover inpatient admissions once eligibility has been established. Many current Disaster Relief Medicaid and HHC Plus recipients will be eligible for FHP. New enrollees are required to select a managed care plan at the time of application.

Documentation of identity, date of birth, residency/home address, and income is required. Applicants must also provide their social security number and proof of citizenship or resident alien status.

Comprehensive services offered through the MetroPlus FHPlus benefit include emergency, inpatient and outpatient care, Primary Care Provider (PCP) services, prescription drugs, laboratory and radiology, smoking cessation products, radiation therapy, chemotherapy and dialysis, inpatient/outpatient mental health (some limits apply), alcohol and substance abuse (some limits apply), family planning, DME, vision, speech and hearing, diabetic supplies, and dental. All covered services are provided through the managed care plan.

FHPlus coverage is free to all Members. There are no premium levels (unlike Child Health Plus) or co-pays.

Provider Relations Department Relocates

On March 4th, the MetroPlus Provider Relations, Contracting and Credentialing staff relocated to the 10th floor of 230 West 41st Street. The new fax number is 212-730-3105. Please contact your designated Provider Relations Representative at the following phone number:



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|------------|-----------------------|--------------|
| Manhattan: | Hopeton Gordon | 212-730-3207 |
| Queens: | Tanisha Latimer-Mason | 212-730-3201 |
| Bronx: | Yvonne Magny | 212-730-3085 |
| Brooklyn: | Jean Pericles | 212-730-3070 |

For general inquiries please call Marinela Ionita at 212-730-3206; the Provider Relations Department can no longer be accessed through the general MetroPlus 800 number.



We want to hear from you! If you have ideas or suggestions for future MetroMonitor articles or news you would like us to announce, please call Sarah Huston at 212-730-3040 or email at hustos@nychhc.org.

Childhood Immunization Alert

The administration of the first dosage of antigens in an immunization series must follow strict adherence to national guidelines. **DTAP/DT, IPV/OPV and HiB vaccines given prior to 42 days (6 weeks) after birth will be considered non-compliant with QARR/HEDIS measurement standards.** For combination vaccinations that require more than one antigen (i.e., DTAP and MMR), there must be evidence that all of the antigens were given. All of the following must be documented in the medical records of all children by age two:

DTAP/DT

An initial DTAP vaccination followed by at least 3 DTAP, DT or individual diphtheria and tetanus shots, with at least one diphtheria and one tetanus falling on or between the first and second birthday is required. To be considered compliant, a child must have at least one pertussis, four diphtheria and four tetanus by age two.

IPV/OPV

At least three polio vaccinations with different dates of service on or before the child's second birthday.



MMR

At least one measles, mumps and rubella (MMR) with a date of service falling on or between the first and second birthday.

HiB

At least three H influenza type B injections with different dates of service by the child's second birthday, with at least one of them falling on or between the first and second birthday.

NOTE:

Because one particular type of HiB vaccine only requires three doses, HEDIS/QARR requires the minimum possible standard of three doses, rather than the recommended four.

HEPATITIS B

Three hepatitis B injections with different dates of service by the child's second birthday, with at least one of them falling on or between the child's 6 month birth date and the second birthday. **HepB (given at birth) is the only vaccination administered before the 42nd day of life.**

VZV

At least one chicken pox vaccine with a date of service falling on or between the first and second birthday.

** Prevnar (PCV - Pneumococcal Conjugate Vaccine), which protects against the bacteria that causes pneumonia, meningitis and some ear and throat infections, is not currently audited for QARR/HEDIS. However, it is recommended that Providers offer the vaccine at two, four, six and 12-15 months of age.

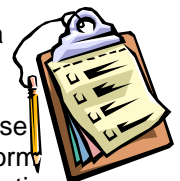
Pediatric Asthma and 504 Forms

Asthma morbidity and mortality have been rising in the United States, particularly in NYC. Recent findings have raised important questions about the role of the urban environment and poverty, especially factors associated with inadequate housing and access to appropriate health care. Every day many children with asthma are sent home from school or to an emergency room to receive medications which could have been administered in school.

In an effort to improve access to school health services for children with asthma, MetroPlus, the NYC Department of Health, and the Board of Education are collaborating to simplify the process for receiving medications in school. Also included in this collaboration are Pediatric Primary Care Providers (PCPs). The goal is to enhance access to school health services for children with asthma by increasing the availability of the 504 Form and the Asthma Action Plan.

The 504 Form authorizes school health staff to administer medication. The 504 Form, along with the Asthma Action Plan, must be completed and signed by the child's PCP and parents and renewed every year. Once completed and signed, the forms are given to the school health staff. The 504 Form and Asthma Action Plan provide asthma-specific information that is easy for the school's health staff to follow. These forms facilitate a continuum of asthma care and decrease the number of school days missed and frequency of visits to the emergency room.

Ask your patients with asthma if they have a 504 Form. If they do not have one, they can request one at their school or they may call Dorothy Riggans, the MetroPlus Asthma Case Manager, at 212-597-8916 to have a 504 Form sent to their home or to receive more information.



Alcohol Screening Day

Organizers of the National Alcohol Screening Day (NASD) on April 11th are using the program to provide primary care and specialty providers with materials for screening patients for alcohol problems and educating patients about alcohol's effect on medical conditions and drug interactions, when appropriate. The materials are geared to helping primary and specialty care providers identify and manage patients with existing or developing alcohol problems. NASD is a program of the nonprofit organization Screening for Mental Health and is supported by federal grants. It is **free** to all primary care and specialty providers.

Those interested in registering for the NASD can call Sharon Pigeon at 781-239-0071 x109. Registered providers will receive a kit of ready-to-use educational and screening materials. If you participate, please call MetroPlus at 212-597-8681 to share your experience.