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## PHYSICIAN NEWSLETTER

### Gateway Health Plan<sup>SM</sup> Introduces New Pay for Performance Program

At Gateway Health Plan<sup>SM</sup>, we value the important role physicians play in serving our members. We believe that physician practices committed to providing quality healthcare that is accessible and efficient should be recognized and rewarded for their performance. Therefore, working collaboratively with physician advisors, Gateway Health Plan<sup>SM</sup> has designed and implemented an innovative pay for performance (P4P) program, Gateway to Physician Excellence<sup>SM</sup>. This program is aligned with the *Prescription for Pennsylvania* goals and the DPW's MCO P4P Program. Gateway to Physician Excellence<sup>SM</sup> supports Gateway's mission to deliver quality programs that positively impact the personal health of its members.

Gateway to Physician Excellence<sup>SM</sup> (GPE<sup>SM</sup>) strives to:

- Improve the delivery of healthcare – including quality, access, and efficiency,
- Reduce racial and ethnic disparities,

- Improve the member experience, and
- Increase physician satisfaction.

#### Who is Eligible?

- High volume primary care physician practices (minimum of 200 members),
- Including Family Practice, Internal Medicine, and Pediatrics.
- These physicians touch approximately 76% of Gateway members.

#### Performance Measures

Gateway to Physician Excellence<sup>SM</sup> focuses on data driven measures to evaluate practice performance in the areas of Clinical Quality, Emergency Room Avoidance, and Encounter Data Submission.

#### Emergency Room Avoidance

- Measure ER services for members with Diabetes and Asthma, and
- Provide practices with data on “chronic” ER usage for targeted interventions.

#### Clinical Quality

<p><b>Women's Health/Preventive</b> Mammography Screening Cervical Cancer Screening</p>	<p><b>Pediatric Care</b> EPSDT</p> <ul style="list-style-type: none"> <li>• Adolescent</li> <li>• Well Child (15 months)</li> <li>• Well Child (3-6 years)</li> </ul> <p>Lead Screening</p>
<p><b>Diabetes Management</b></p> <ul style="list-style-type: none"> <li>• HbA1c Screening</li> <li>• Retinal Exam</li> <li>• Lipid Panel</li> <li>• Medical Attention for Diabetic Nephropathy</li> </ul>	<p><b>Cardiovascular Care</b> Monitoring Lipid Levels</p> <p><b>Asthma Management</b> Long Term Control Rx Use</p>

Performance (cont. from p.1)

## Encounter Data Submission

- Supports current and future performance assessments;
- Measurement not used in calculating final score or award; intended to provide feedback and encouragement for providers to submit encounters.

## Scoring Methodology

Gateway uses a member-centered approach to assign the responsibility of treating patients to specific practices. If a member changes to a new assigned practice during the measurement period, then that member will be attributed to multiple practices. Physician practices are scored in relation to other practices.

All measures leverage encounter data (inpatient, outpatient, laboratory, and pharmacy). This eliminates the practice burden to self-report data through surveys or medical chart reviews.

## Scorecard

Scores are measured, reported, and awarded at the practice level. Gateway

will provide a scorecard to participating practices detailing:

- Practice eligible measures,
- Practice level numerator, denominator, and rate for each measure,
- Measure definitions and scoring methodology,
- Accessibility and availability factors, and
- Encounter submission rate.

Scorecards will be hand delivered to allow discussion of performance improvement opportunities.

## Awards

Gateway to Physician Excellence<sup>SM</sup> is designed to recognize and reward practice quality. The financial award is a function of four factors – final practice performance across all measures, practice member volume, practice access and availability, and the annually established Gateway to Physician Excellence<sup>SM</sup> program budget. Annual award payments will be separate from physician base payments. The awards for 2007 performance will be distributed late in 2008.

## Recognition

In addition to financial awards, Gateway to Physician Excellence<sup>SM</sup> practice participation is noted in both the provider directory and the online provider search tool.

## Physician Involvement

Gateway assures that the physician community is involved by engaging GPE<sup>SM</sup> enrolled physicians, QI/UM Committee and Physician Portfolio Workgroup members in the ongoing program development. These physicians, representing the interest of a wide range of stakeholders, have provided clinical input throughout the program design process.

## Want More Information?

In the spring of 2008 representatives from Gateway Health Plan<sup>SM</sup> will be meeting with eligible physician practices through on site and town hall meetings to describe the program in more detail. Look for future updates at [www.gatewaywayhealthplan.com/gpe](http://www.gatewaywayhealthplan.com/gpe), upcoming newsletter articles and program education materials.

## Have You Thought About Mcare Lately?

**Regulatory** Mcare, the Medical Care Availability and Reduction of Error Act, is a Pennsylvania statute that was passed in March 2002 to replace provisions related to the former Catastrophe Loss Fund. In addition to providing insurance coverage in excess of primary limits, **Mcare focuses on patient safety and reduction of medical errors.**

The statute has many provisions that affect Gateway Health Plan<sup>SM</sup> network providers. Physicians may not have thought about Mcare requirements in a while or may have had changes in office personnel; therefore, **important provisions that healthcare practitioners should keep in mind are listed below:**

- Practitioners are responsible for notifying the State Board of Medicine

or the State Board of Osteopathic Medicine within 60 days of receiving a lawsuit complaint in a medical professional liability (malpractice) action. In the notification, the physician must list the docket number, the name of the court, and a description of the allegations.

- Physicians are also required to report licensing disciplinary actions taken in other states to Pennsylvania's Board of Medicine or Board of Osteopathic Medicine within 60 days of the occurrence.
- If arrested in any state for homicide, aggravated assault, or any sexual offense, the practitioner is required to report the arrest to the State Board of Medicine or the State Board of Osteopathic Medicine within 60 days of the incident.
- Failure to obtain informed consent before performing surgery, admin-

istering radiation therapy, inserting a surgical device, ordering a blood transfusion, or using an experimental device can result in punitive damages in malpractice litigation.

- Intentional alteration of medical records constitutes a ground for suspension of a practitioner's medical license. If changes need to be made for clarification or correction of error, such changes need to be made as separate entries including the date and time of the new entries.
- Practitioners are required to provide proof of insurance to the Patient Safety Authority within 60 days of obtaining or renewing medical professional liability insurance. Without proof of insurance, a healthcare provider's license is subject to suspension or revocation. For more information about Mcare, visit [www.mcare.state.pa.us](http://www.mcare.state.pa.us).

## Advisory Workgroups Restructured

by Pedro Cardona, MD, MBA, Medical Director

### Medical Management

Gateway Health Plan<sup>SM</sup>'s (Gateway's) mission focuses on a healthcare delivery system that ensures high-quality medical care. This mission is based upon Quality, Access, and Financial Soundness. We believe that accomplishing this mission requires the development and delivery of innovative programs that positively affect the health and well-being of our members, which includes focusing on initiatives that enable the success of the physician-patient relationship.

One initiative is the restructuring of our Advisory Workgroups. As a result of the increasing complexity of our membership, we have recently decided to restructure our workgroups to better address the chronic care and ongoing preventive health needs for our members. These workgroups are composed of participating providers as well as Gateway staff.

Our new advisory workgroups and their focus are as follows:

<b>Adult Chronic Care Advisory Workgroup</b>	Respiratory diseases, cardiac diseases, diabetes, obesity, hyperlipidemia, hypertension, depression, HIV, smoking cessation, and ER utilization among the adult population
<b>Pediatric Advisory Workgroup</b>	Pediatric preventive care (lead screening, EPSDT, adolescent well care), asthma, autism, juvenile diabetes, and obesity
<b>NICU/Perinatal Advisory Workgroup</b>	Pregnancy, perinatal care, and high-risk newborns
<b>Women's Health Advisory Workgroup</b>	Women's health issues
<b>Physician Portfolio Advisory Workgroup</b>	Quality and performance measures, profiling, and the Gateway to Physician Excellence <sup>SM</sup> program
<b>Pharmacy &amp; Therapeutic (P&amp;T)</b>	Pharmacy issues

If you would like more information regarding any of these workgroups or if you are interested in participating, please contact the Provider Services department. Please refer to the last page for the phone numbers.

## Referring Members to Our Complex Case Management Program

Gateway Health Plan<sup>SM</sup> (Gateway) provides a Complex Case Management program for eligible members. Gateway's Care Managers help to identify and then provide support, direction, and intervention to help members manage the following complex diseases:

- Chronic Obstructive Pulmonary Disease (COPD) on oxygen
- Cancers with metastasis
- Pulmonary hypertension

- Stage IV heart failure
- Symptomatic HIV/AIDS
- New traumatic brain injury with significant cognitive deficits
- Spinal cord injury with paralysis

The practitioner's role in Gateway's Complex Case Management program is extremely important. Practitioners who have identified a member who they think would benefit from this program should contact the Case Management department to speak with a Care Manager at the following numbers:


- Pennsylvania Medicaid: 1-800-642-3550, option 1
- Pennsylvania Medicare: 1-800-685-5212, option 1
- Ohio Medicare: 1-888-447-4506, option 1


Gateway will review the referral and make the final decision for inclusion in the program.




## Gateway Gets !


Preventive Health

Have you noticed that Gateway Health Plan<sup>SM</sup> (Gateway) has rolled out a new advertising and branding campaign? The theme of this new campaign is  and it boldly features the word “Lucky” in a bright red heart, generally with a visual of the diverse population that we serve.

We want our members, providers, and different constituencies to perceive themselves as lucky to have the types of plans that Gateway provides.  is a positive message of empowerment, equality and good fortune—regardless of a person’s specific health situation—to be a member of a Gateway plan.

From new billboards, radio spots, and website to brochures and collateral marketing materials, you will be seeing a new tone, look, and feel representing Gateway.

It is our hope that will truly help the public—our providers, members and prospective members—see what a wonderful and caring company we are and the quality set of plans we offer. Here at Gateway, we feel  to work with each and every one of our providers.

We hope that you embrace this new look and feel for Gateway. *And, have a safe, happy, healthy, and  2008!*



## Check Out Our New Look!

Gateway Health Plan<sup>SM</sup> (Gateway) started 2008 by rolling out a completely redesigned [www.gatewayhealthplan.com](http://www.gatewayhealthplan.com) website. More than a graphic facelift, our website has been redesigned to better meet the needs of its users by providing enhanced access to Gateway information and resources—all just a mouse click away.

The redesigned website now features a clearer structure, simplified navigation, and improved search functions—all of which make finding information easier than before. While occasional users of the site will benefit from the improved navigation menus, frequent visitors will benefit from the “Quick Links” menu for fast access to frequently used pages.

The new, easy-to-use website continues to be a work in progress, as we will continue to add new content and features. Our goal is to continue the momentum and evolve the website to meet the needs of all users.

If you have any issues or questions while using the new website or if you have any suggestions, please contact [feedback@gatewayhealthplan.com](mailto:feedback@gatewayhealthplan.com).

## Making a Difference in Our Communities

Gateway Health Plan<sup>SM</sup> (Gateway) supports its mission by being a strong, positive partner in the community where its members live. We believe that as a health plan, Gateway has a responsibility to improve the health and quality of life of its members as well as the community-at-large.

Gateway helps with:

- Community events
- Board and committee technical support
- Sponsorships
- Health Education programs

Just some of the social service and community agencies that Gateway works with include:

### Health departments

American Cancer Society

Immunization coalitions

PA Rural Health Council

PA Statewide Latino Coalition

Public housing authorities

PA Advocates for Nutrition & Activity

Salvation Army

United Way agencies

Food Pantries

YWCA

American Heart Association

Shelters

The goal of Gateway’s Health Literacy Initiative is to work with organizations to help individuals, their families, and their communities better understand their healthcare and ways to talk with providers.

We spend a lot of time talking to our members, finding out what they really want in their health plan, and creating programs that truly fit their needs. *Stay tuned for more information about Gateway’s community involvement in 2008!*



## Ensuring Patients Get Necessary Diabetes Tests

*Michael Coughlin, Ph.D.*

### Disease Management

Gateway Health Plan<sup>SM</sup>'s (Gateway's) Disease Management Department is focusing on encouraging both providers and members to have all appropriate screening tests done each year. In this article, we focus on those tests which are appropriate for patients who have diabetes.

Diabetes can be a devastating chronic illness if it is not managed appropriately and proactively. It is vitally important that diabetics regularly check their blood sugar levels and see their doctor for a number of screening tests, which include:

- HbA1c levels
- LDL-c levels
- Diabetic retinal eye exam
- Screening for nephropathy.

**HbA1c levels** should be assessed at least twice per year in individuals who are meeting treatment goals (A1c < 7%), and four times per year in those

who are not meeting goals or whose treatment has changed recently. **All other screens (lipids, eye exam, and nephropathy) should be done at least once per year.**

Gateway realizes that physicians are aware of the appropriate tests for diabetics and that the problem is often that members do not follow through with either their doctor visit or the visit to the lab to have the tests done. Therefore, Disease Management is proactively identifying appropriate members and contacting them by both mail and telephone multiple times to remind them see their doctor to have these tests done.

There are also a number of other potential office-based interventions that can increase testing rates. These include placing standing orders for diabetic testing in patients' charts and utilizing in-office HbA1c testing so that the diabetic who might not go to the lab can have their A1c tested. This in-



office HbA1c is reimbursed by Gateway when billed with code 83036 for Medicaid and code 83037 for Medicare members.

Overall, the goal is to get Gateway members with diabetes the care that is recommended and to prevent diabetic complications which could lead to repeated hospitalization and disability. Improved testing rates can also benefit network physicians by improving Gateway to Physician Excellence<sup>SM</sup> scores.

For more information on Gateway's Diabetes Disease Management program, please contact Jude Lauffer RN, BC, Disease Management Specialist, at 412-255-4328.

## National Asthma Guideline Revisions

The Asthma Expert Panel Report 3 has updated the asthma guideline, emphasizing the importance of asthma control and new approaches for monitoring asthma.

The updated recommendations for managing asthma include:

- An expanded section on childhood asthma (with an additional age group)
- New guidelines on medication
- New recommendations on patient education in settings beyond the physician's office
- New advice for controlling environmental factors that can cause asthma symptoms.



This updated information can be found at [www.nhlbi.nih.gov/guidelines/asthma](http://www.nhlbi.nih.gov/guidelines/asthma).

## Contracts/No Gag Clause

All of Gateway's contracts with practitioners and providers include an affirmative statement indicating that the practitioner can freely communicate with patients regarding the treatment options available to them, including medication treatment options, regardless of benefit coverage limitations. There is no language in the contracts that prohibits open clinical dialogue between practitioner and patient.





## The Dental Connection

A growing body of scientific literature continues to support a connection between oral health and a number of systemic conditions. While no direct causative relationship has been established, there is increasing scientific evidence indicating that an increase in specific types of oral bacteria appears to affect a number of physical reactions in the body. This is especially true of people with susceptibility to a number of specific diseases or those that might be adversely affected due to their physical condition, such as cardio-vascular

disease, diabetes, respiratory disease, pre-term delivery, and transplants.

Conversely, studies have shown that a reduction in these types of oral bacteria and their subsequent inflammatory response improves the status of some patients susceptible to adverse changes in these same systemic conditions.

Caution is still necessary and strength of evidence must be factored. The American Dental Association (ADA) and American Medical Association (AMA) have already co-sponsored

media events highlighting the trends in research that allude to the possible connection of oral and systemic health. The public will soon be enlightened and begin demanding answers to related health questions.

Watch for future articles in this newsletter about research and insights into the possible connection between dental and systemic health.

*Adapted from an article by Richard P. Klich, DMD, National Dental Director, United Concordia*

## Help with HIV Screening

by Beth Nicholson, LSW, MSW, CCM

In 2006, the CDC recommended that all people ages 13 to 64 have an HIV screen completed. Gateway Health Plan<sup>SM</sup> (Gateway) is encouraging its members to see their doctor and request an HIV screen.

As a provider, having a conversation with your patient regarding HIV screening may be uncomfortable for both you and the patient. Maintaining a safe, caring atmosphere and answering questions openly and honestly without judgment

can help the patient decide if they want to have the screening completed. Respecting their wishes is also important once their decision has been made.

If your patient is interested, but feels uncomfortable having the test performed in your office, many free testing sites are available. If you or your staff have questions about HIV testing, need to find an HIV testing site, or require resources for HIV-positive patients, please call Gateway's Special Needs Department at 1-800-642-3550.



Special Needs Unit



Gateway has four disease management programs to assist our members in becoming more responsible for their own care. The programs - which address asthma, cardiac care, diabetes, and maternity care - are described below.

## Disease Management Programs

Program	"AIR" Gateway <sup>SM</sup> Asthma Program	Help Your Heart Program	Healthy Returns Diabetes Program	MOM (Maternity Outreach and Management) Matters <sup>SM</sup> Maternity Program
<b>Description</b>	<ul style="list-style-type: none"> <li>An asthma management program emphasizing patient education &amp; self-management to increase appropriate medication use and reduce acute asthma admissions</li> </ul>	<ul style="list-style-type: none"> <li>A cardiac management program emphasizing education and self-empowerment for medication adherence, for reduction in IP and ER utilization, and to delay the onset of cardiac complications.</li> </ul>	<ul style="list-style-type: none"> <li>A diabetes management program emphasizing education and personal responsibility for diet, medication, and lab adherence, reduction in IP and ER utilization, and prevention of diabetic complications.</li> </ul>	<ul style="list-style-type: none"> <li>A prenatal program offering maternity care coordination to improve frequency of prenatal and postpartum care, and to reduce the incidence of low birth weight, pre-term deliveries, and NICU admissions. Interventions are designed to identify and prospectively intervene with members at high risk for adverse pregnancy outcomes.</li> </ul>
<b>Eligibility &amp; Enrollment</b>	<ul style="list-style-type: none"> <li>Ages 2-56 are enrolled in the program.</li> <li>Member and provider referrals</li> </ul>	<ul style="list-style-type: none"> <li>Age 21 or older with a diagnosis of CHF, MI, and CAD with a PTCA or CABG are eligible for the program.</li> <li>Member and provider referrals</li> </ul>	<ul style="list-style-type: none"> <li>Type 1 or 2 diabetes are eligible for this program.</li> <li>Member and provider referrals</li> </ul>	<ul style="list-style-type: none"> <li>All identified pregnant Gateway Health Plan females are eligible for the program and are mailed educational materials.</li> <li>Member and provider referrals</li> </ul>
<b>Coordination of Care</b>	<ul style="list-style-type: none"> <li>Trained asthma nurse care managers regularly contact your high-risk asthma patients via phone. Home care and DME needs are coordinated through the Gateway Asthma Nurse Care Manager.</li> </ul>	<ul style="list-style-type: none"> <li>A trained cardiac nurse care manager regularly contacts your cardiac patients with IP or ER utilization. Home care and DME needs are coordinated through the Gateway Cardiac Nurse Care Manager.</li> </ul>	<ul style="list-style-type: none"> <li>A trained diabetic nurse care manager regularly contacts your diabetic patients with IP and ER admissions. Emphasis is placed on diabetic education and adherence with HbA1c, LDL-C, retinal eye exams, foot care, and microalbumin testing. Home care and DME needs are coordinated through the Gateway Diabetic Nurse Care Manager.</li> </ul>	<ul style="list-style-type: none"> <li>Trained maternity nurse care managers contact members identified as high risk per the OB risk assessment form. Members are offered prenatal and post partum home care visits; behavioral and social issue interventions and community referrals are coordinated through Gateway Maternity Nurse Care Managers.</li> </ul>

## Disease Management Programs

Program	"AIR" Gateway <sup>SM</sup> Asthma Program	Help Your Heart Program	Healthy Returns Diabetes Program	MOM (Maternity Outreach and Management) Matters <sup>SM</sup> Maternity Program
<b>Patient Education &amp; Self-Management Tools</b>	<ul style="list-style-type: none"> <li>Educational materials mailed</li> <li>Asthma Action Plan</li> <li>On-hold educational Member phone message</li> <li>Newsletter mailings</li> </ul>	<ul style="list-style-type: none"> <li>Educational materials mailed</li> <li>Scales provided as needed</li> <li>On-hold educational Member phone message</li> <li>Newsletter mailings</li> </ul>	<ul style="list-style-type: none"> <li>Diabetic members without utilization receive educational materials and may call to join the telephonic program.</li> <li>On-hold educational Member phone message</li> <li>Newsletter mailings</li> </ul>	<ul style="list-style-type: none"> <li>All pregnant members are mailed educational materials</li> <li>On-hold educational Member phone message</li> <li>Newsletter mailings</li> </ul>
<b>Provider Benefits &amp; Supports</b>	<ul style="list-style-type: none"> <li>Medication profile reports are mailed to assist with optimal medication management.</li> <li>An enrollment notification form is faxed to the Provider upon member enrollment into the program.</li> <li>Patient education and assistance with medication compliance supports optimal self-management.</li> <li>On-hold educational Member phone message.</li> </ul>	<ul style="list-style-type: none"> <li>Medication profile reports are mailed to assist with optimal medication management.</li> <li>An enrollment notification form is faxed to the Provider upon member enrollment into the program.</li> <li>Patient education and assistance with medication compliance and weights.</li> <li>On-hold educational Member phone message.</li> </ul>	<ul style="list-style-type: none"> <li>Medication profile reports are mailed to assist with optimal medication management.</li> <li>An enrollment notification form is faxed to the Provider upon member enrollment into the program.</li> <li>Patient education and assistance with medication compliance and glucometer use.</li> <li>On-hold educational Member phone message.</li> </ul>	<ul style="list-style-type: none"> <li>All pregnant members are mailed educational materials</li> <li>Telephonic management occurs for patients with identified high risks.</li> <li>Patients are educated and assisted with maternity care coordination, home care, and community referrals.</li> <li>An enrollment notification form is faxed to the Provider upon member enrollment into the program.</li> <li>On-hold educational Member phone message.</li> </ul>
<b>Contact for Referrals &amp; Information – PA Medicaid</b>	<p><b>1-800-642-3550, Option 3</b></p> <p><a href="http://www.gatewayhealthplan.com">www.gatewayhealthplan.com</a></p>	<p><b>1-800-642-3550, Option 3</b></p> <p><a href="http://www.gatewayhealthplan.com">www.gatewayhealthplan.com</a></p>	<p><b>1-866-366-9415</b></p> <p><a href="http://www.gatewayhealthplan.com">www.gatewayhealthplan.com</a></p>	<p><b>1-800-642-3550, Option 2</b></p> <p><a href="http://www.gatewayhealthplan.com">www.gatewayhealthplan.com</a></p>
<b>Web-Based Education</b>	<p><b>1-800-685-5212, Option 3</b></p>	<p><b>1-800-685-5212, Option 3</b></p>	<p><b>1-866-366-9415</b></p>	<p><b>1-800-685-5212, Option 2</b></p>

## Provider Communications Ensure Continuity & Coordination of Care

by Marcia Haught, RN, BSN

Quality Improvement

The PCP's role is to not only provide first-line care, but also to function as the hub of the continuum of care wheel. Communication of patient care information from other care providers back to the member's PCP is very important to help ensure safe care. Failure to share information about the care of a patient can result in suboptimal outcomes, increased costs, and medical errors.

This communication process is made more difficult and more important since Gateway's PA Medicaid members are permitted to self-refer for OB/Gyn and behavioral health-care. (Our Medicare members are also able to self-refer.) Even if a referral is made, the PCP may not be aware that the provider was seen if a consultation report isn't sent. Receiving reports of therapies provided and concerns identified by other care providers is essential to ensure that the patient's care is safe, proper, and unduplicated.

Gateway monitors continuity and coordination of care through medical record review (MRR) of high-volume specialists and OB/Gyns, skilled nursing facilities, and home health agencies every two years. We also use the provider satisfaction survey and focus studies for this purpose.

To improve the communication process, we need help from all providers. (See the box for some helpful suggestions.) Good communication will help to ensure safe and proper patient care.

### Best Practices for Provider-to-Provider Communications

#### PCPs

- File all documentation received from other care providers and facilities in the patient's chart.
- Ask your patients if they are receiving any other medical services.
- Document any verbal communications with other care providers in the patient's chart.

#### Specialists & OB/Gyn Offices

- Verify member's PCP as listed on their ID card and send a report of consultation to that PCP. Addresses are located in Gateway's PCP Provider Directory or at our website, [www.gatewayhealthplan.com](http://www.gatewayhealthplan.com) (Provider Look-up and Plan).
- Utilize the "Physician Communication Form" and the "Gynecology Patient Visit Summary" located on Gateway's website (Providers, choose the plan, Clinical Guidelines, Helpful Forms).
- Utilize a stamp to note that documentation has been faxed to the PCP.



## Guidelines on Gateway's Website

Several of Gateway Health Plan<sup>SM</sup>'s (Gateway's) Clinical and Preventive Care Guidelines have been recently reviewed or revised as denoted by an asterisk. You can view the following guidelines at Gateway's website, [www.gatewayhealthplan.com](http://www.gatewayhealthplan.com):

- Adult with HIV\*
- Adult Preventive Care\*
- Asthma\*
- Cardiac Medical Management
- Child Preventive Care
- Diabetes 2007 ADA
- Hypertension
- Lead Screening
- Prenatal Care
- PCPs Treating Depression

To view these guidelines, select Providers, choose the plan, and then Clinical Guidelines. Gateway's Medical Record Review standards for PCPs and Specialists are also located at this site (Providers, then Medical Rec. Standards). There is also a section called Helpful Forms and Information.

You can request a hardcopy of any of these items by calling the Quality Improvement Department at 412-255-1144.

## Monitoring Behavioral Health Prescribing Practices

Lorraine Scalise, RPh

Pharmacy

Gateway Health Plan<sup>SM</sup> (Gateway) will be introducing a new pharmacy program in 2008. Our goal is to promote excellence in behavioral health prescribing practices to improve the quality of care for all of our mental health consumers, including children.

To this end, we have installed the Quality Prescribing Program<sup>TM</sup>, a service owned by Comprehensive NeuroScience, Inc. (CNS), an independent company with experience in evidence-based and consensus-based prescribing standards. The Quality Prescribing Program reviews and analyzes Gateway's prescribing practices using pharmacy claims data and adheres to HIPAA privacy standards.

This program will continuously monitor pharmacy claims to:

- Analyze psychotropic prescribing patterns by individual provider.
- Identify prescribing patterns inconsistent with evidenced-based guidelines.
- Provide prescribers with feedback regarding their psychotropic prescribing patterns and patient summary information.
- Provide for peer-to-peer-consultation.

We know that Gateway prescribers take great pride in providing high-quality care to their patients, and this program is designed to support your efforts.



## Requesting an Addition to the Formulary

Gateway Health Plan<sup>SM</sup> (Gateway) utilizes a formulary for its PA Medicaid and PA & OH Medicare Assured<sup>SM</sup> members. The formulary is a list of FDA-approved medications reviewed and approved by our Pharmacy and Therapeutics (P&T) Committee and either the Department of Public Welfare (DPW) or CMS. The Pharmacy and Therapeutics Committee is comprised of actively participating network physicians and pharmacists who select products based on their safety, efficacy, quality, and cost to the plan.

Physicians are requested to prescribe medications included in the formulary whenever medically appropriate. Providers can contact provider/pharmacy services with any questions related to a member's prescription coverage limitations.

The Pharmacy and Therapeutics

Committee meets on a regular basis to review and revise the formularies. Providers may request the addition of a medication to the formularies. Requests must include the drug name, rationale for inclusion on the formulary, role in therapy, and formulary medications that may be replaced by the addition. The committee will review requests. All requests should be forwarded in writing to:

**Gateway Health Plan<sup>SM</sup>**  
Pharmacy Department  
US Steel Tower, Floor 41  
600 Grant Street  
Pittsburgh, PA 15219

The formularies are accessible online at [www.gatewayhealthplan.com](http://www.gatewayhealthplan.com). They may be searched by drug name or drug class. Future updates to our Formulary will be available on a regular basis, both by provider publication and online. Additional hardcopies of the Formulary may be printed directly from our Formulary website or requested as follows:

- Physician Practices should call 1-800-392-1145.
- Pharmacy Network Providers should call our Pharmacy Service Center (see the box for phone numbers).

### Pharmacy Service Center

Have questions about our Formulary and its use? Need a hardcopy of the Formulary? If you are Gateway Pharmacy Network Provider, call our Pharmacy Service Center:

- 1-800-528-6738 (PA Medicaid)
- 1-800-685-5215 (PA Medicare)
- 1-888-447-4507 (OH Medicare)

## Formulary Updates

The Gateway Health Plan<sup>SM</sup> (Gateway) formulary is updated on a regular basis. The listed medication changes reflect the decisions made by the Gateway's Pharmacy and Therapeutics Committee. Please review the changes and update your Gateway formulary book as necessary. Please note that Gateway's formulary can be accessed online at [www.gatewayhealthplan.com](http://www.gatewayhealthplan.com).

Additional copies may be printed directly from our formulary website, or requested through Provider Services by calling 1-800-392-1145 for Medicaid members or 1-800-685-5201 for *Medicare Assured*<sup>SM</sup> members.

<b>Medicaid Formulary Additions</b>			
<b>Brand Name</b>	<b>Generic Name</b>	<b>Effective Date</b>	<b>Notes</b>
ACTOplus Met	Pioglitazone/metformin	10/1/07	QL
Actos	Pioglitazone	10/1/07	QL
Aranesp	Darbepoetin alfa	1/1/08	PA, SPN
Cefpodoxime	Cefpodoxime	1/1/08	
Duetact	Pioglitazone/Glimepiride	1/1/08	QL
Famciclovir	Famciclovir	1/1/08	
Metoprolol succinate	Metoprolol succinate	1/1/08	
Oxcarbazepine	Oxcarbazepine	1/1/08	
Renvela	Sevelamer carbonate	1/1/08	
Restasis	Cyclosporine	1/1/08	
Neupro	Rotigotine	2/1/08	QL
<b>Medicaid Formulary Deletions</b>			
<b>Brand Name</b>	<b>Generic Name</b>	<b>Effective Date</b>	
Lexapro	Escitalopram	1/1/08	
Dipentum	Olsalazine	1/1/08	
<b>Medicare Assured<sup>SM</sup> Formulary Additions</b>			
<b>Brand Name</b>	<b>Generic Name</b>	<b>Effective Date</b>	<b>Notes</b>
ACTOplus Met	Pioglitazone/metformin	2/1/08	QL
Actos	Pioglitazone	2/1/08	QL
Cefpodoxime	Cefpodoxime	2/1/08	
Duetact	Pioglitazone/Glimepiride	2/1/08	QL
Famciclovir	Famciclovir	2/1/08	
Metoprolol succinate	Metoprolol succinate	2/1/08	
Neupro	Rotigotine	2/1/08	QL
Renvela	Sevelamer carbonate	2/1/08	
<b>Medicare Assured<sup>SM</sup> Formulary Deletions</b>			
<b>Brand Name Deletion (Generic added to formulary)</b>			<b>Effective Date</b>
Floxin otic (Ofloxacin)			4/1/08
Lamisil (Terbinafine)			4/1/08
Lotrel (Amlodipine/Benazepril)			4/1/08
Trileptal (Oxcarbazepine)			4/1/08
Vesanoid (Tretinoin)			4/1/08
Colazal (Balsalazide)			5/1/08

Notes Key: PA = Prior Authorization required  
 QL = Quantity Limit applies  
 ST = Step Therapy applies  
 SPN = Obtain through Specialty Pharmacy Network

Please contact the Gateway Health Plan<sup>SM</sup> Pharmacy Department with all formulary questions, and other pharmacy benefit concerns at 1-800-528-6738 for Medicaid members or 1-800-685-5215 for *Medicare Assured*<sup>SM</sup> members or fax to 412-255-4544 or 888-245-2049 (Medicaid) or 888-447-4369 (Medicare), Attn: Pharmacy Department.



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# Information Central

You can contact the departments listed below directly or request paper copies of documents by calling the phone numbers provided. Information can be accessed on our website, [www.gatewayhealthplan.com](http://www.gatewayhealthplan.com). Choose Providers, then the Plan. Phone numbers are also listed under "Contact Us" in the header.

Heading	Department	PA Medicaid Phone Numbers	PA Medicare Phone Numbers	Ohio Medicare Phone Numbers
<b>For Providers:</b> Provider Manual (includes Environmental Assessment Standards, Confidentiality Policy, Patient Safety New Technology, Member Rights & Responsibilities Forms & Reference Materials (includes Living Will) Provider Satisfaction Survey Complaints/Grievance/Appeals Privacy Policy	Provider Services	800-392-1145	800-685-5205	800-685-5205
<b>Pharmacy Information</b> (including Formulary)	Pharmacy	800-528-6738	800-685-5215	888-447-4507
<b>Medical Record Review Standards</b> Clinical Guidelines Newsletter	Quality Improvement (QI)	412-255-1144	412-255-1144	412-255-1144
<b>Case Management - Special Needs</b>	Case Management	800-642-3550 Option 1	800-685-5212 Option 1	888-447-4506 Option 1
<b>Preventive Health/Patient Education</b> <b>Disease Management Programs</b> MOM Matters <sup>SM</sup> - Maternity "AIR" Gateway <sup>SM</sup> - Asthma Help Your Heart - Cardiac Healthy Returns - Diabetes		800-642-3550 Option 4  Option 2 Option 3 Option 3 800-366-9415	800-685-5212 Option 4  Option 2 Option 3 Option 3 800-366-9415	888-447-4506 Option 4  Option 2 Option 3 Option 3 800-366-9415
<b>Utilization Management</b>	UM	800-392-1146	800-685-5207	888-447-4375
<b>Fraud &amp; Abuse</b>		800-685-5235	800-685-5235	800-685-5235

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 PHYSICIAN NEWSLETTER

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