

# Provider Bulletin

## Our Vision of Caring for Our Members

Since its inception, Community Health Partnership, Inc. (CHP) has taken on the responsibility of providing funding and care management services for a broad range of adult consumers seeking long-term care, including frail elderly and individuals with disabilities.

Operating under increasing State and Federal rules, regulations, and decreased funding, CHP continues to work very hard as an organization to ensure we are in compliance and are being efficient and responsible stewards of the taxpayer dollars funding our efforts.

As a CHP provider, you are likely aware that the reimbursement systems for the services CHP provides have undergone numerous changes over the past several years as we strive to meet the financial and programmatic expectations of the Family Care and Family Care - Partnership programs. While we continue to see a system that is further evolving, we remain committed to our organizational Mission Statement (see below).

You will notice the word “vision” used extensively in this issue of our Provider Bulletin newsletter. In seeking to transform our service model to promote independence by supporting members in reaching their highest quality of life while maintaining the fiscal viability of the system, we feel it is very important that you, as a provider in our network, are aware of our “vision” to achieve this goal.

**CHP Mission Statement**  
*Community Health Partnership, Inc. through creative teamwork, facilitates quality choices that empower people to live as independently as possible.*

### Facilitating Quality Choices... Empowering People to Live Independently

CHP’s programs exist to provide health care coordination and support services for all of our members.

In working with our frail elderly population, we strive to support our members in staying healthy for as long as possible. This includes monitoring,



supporting, and assisting members as needed so that they are physically able to live in their own home in the community

for as long as possible, with the goal of sustaining their independence by delaying or preventing any need for a long-term stay in a nursing home.

For those CHP members dealing with physical disabilities, we help support the functional challenges they encounter in a world that doesn’t always allow for easily-accessible supports. By partnering with CHP, these individuals can also live in their own home or apartment that’s adapted to meet their needs. With further support and technology assistance, our members can be employed in the community and be respected for their abilities while living full lives.



Our vision for working with persons with developmental disabilities is to continue to

promote the independence we speak of in our mission statement so that individuals can be better integrated into our communities and have a wider range of choices for their care — while giving them the opportunity to experience the natural connections many of us may take for granted on a daily basis. This approach allows individuals to become more engaged in their communities by having the opportunity to live with more independence, whether in an apartment or a shared-living arrangement, and also having the option for meaningful employment.



The vision for this member population cannot be accomplished without some changes and modifications to the existing system. As an example, in order to encourage more independent and less restrictive service options, we are asking our providers to establish a greater variety of programs. This also includes implementing rate structures which incentivize providers to both broaden and develop new options that expand more independent and cost-effective choices for members who have the potential and desire to use those options.

Going forward, it will take all of us — CHP staff, members, guardians and providers — to be good stewards of resources available. That philosophy will allow us to meet all members’ basic needs while moving forward in achieving their outcomes.

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## Prevocational Services Benefit Members

CHP's vision for adults with developmental disabilities identifies a fostering of independence and choice in all aspects of their lives, especially in areas related to where they live and work. Included in this vision is the availability of integrated employment opportunities for CHP members. This vision is consistent with federal and state laws and policies which guide Wisconsin's long-term care programs.

Prevocational services are designed to lead at least part-time integrated community employment. These services can also assist members to resolve any concerns, hesitations, or other barriers to integrated community employment that may exist.

CHP's approach involves a provision for the right amount and type of prevocational service to support the member's outcomes. As a member's interest in integrated community employment grows through education, exploration of options, and individualized planning, CHP recognizes that appropriate prevocational services will need to be in place.

CHP's prevocational service model has three levels designated to reflect the member's progress and movement toward integrated community involvement. These levels represent the process that the member (and guardian, if appointed) will go through at their own pace as the prevocational service provider supports the member in working toward their identified outcome.

CHP looks forward to partnering with providers to support members in pursuing and achieving their employment outcomes in ways that maximize community integration.

### Goals of the Family Care Initiative

**CHOICE** - Give people better choices about the services and supports available to meet their needs

**ACCESS** - Improve people's access to services

**QUALITY** - Improve the overall quality of the long-term care system by focusing on achieving people's health and social outcomes

**COST-EFFECTIVENESS** - Create a cost-effective long-term care system for the future

## Residential Service Options for Members with a Developmental Disability

CHP recently reviewed the current opportunities and choice of living environments for our members with developmental disabilities. It was found that there may be ways to create more independent and community-integrated opportunities that support the member's residential outcome.

While there are a range of residential environments in which an individual with a developmental disability may live, including a home with a friend or family member, an owner-occupied or corporate adult family home, or a community-based residential facility, there has been limited attention given to the development of programs that may allow an individual to live in an environment which provides a minimal, yet appropriate, level of supervision. For this reason, CHP is currently working with several provider agencies in the development of such models. We are also interested in hearing from those entities with whom we've not yet had an opportunity to speak and discuss other models they may envision.

One concept being looked at extensively is the supported apartment model or drop-in model of service. In this model, staff may live nearby or have scheduled times to stop by the member's home to make sure certain needs are being met (in accordance with the member's care plan). Access to a call service or clear identification of another formal or informal support system may also be a part of this model. This allows the member to know who to call if they have questions, concerns, or if they need to talk through some aspect of their day. Ultimately, the goal is for the member to be a part of the community in which they live.

CHP recognizes the need for a continuum of care in residential environments. Another provider type that aligns with the Family Care initiative, is the owner-occupied adult family home. Since these homes have allowed members to become an extension of their family, CHP is interested in seeing growth for contracted providers in this category as well.

CHP is creating a resource network to support owner-occupied adult family

homes, so that others considering involvement can learn from those already providing this service. If you are interested



in being a part of this group or want to learn more, please contact CHP's Provider Relations department at 715-838-7420 and ask to speak with a Residential Coordinator.

## CHP Initiates Residential Assistance Team

As CHP discusses the various types of residential options with members, families, and guardians, we recognize that there is not a "one size fits all" option when it comes to residential services.

To assist with the thoughtful consideration of these concepts and plans, CHP has organized a Residential Assistance Team led by Community Integration Developer Rick Sommerfeld.

The Team includes representatives from CHP's clinical departments and Provider Relations.

Sommerfeld, who has been working with and advocating for people with developmental disabilities for nearly 30 years, indicated that he has seen many changes in the expectations, services, and supports for these individuals. "While there have been many beneficial changes in how these services are organized and delivered, there are many more changes to come. We are diligently working to discuss and clarify a vision of what life can be like for people with developmental disabilities," said Sommerfeld. "For some, this vision seems

See **Residential Team** page 4



Rick Sommerfeld

## Provider Quality Standards and Performance Indicators

The role of quality standards for contracted providers is to acknowledge the conditions of participation for member care and services, including the evaluation of key performance indicators.

With this guideline in place, CHP has developed a Provider Quality Standards and Performance Indicators manual as a tool for in-network providers to use in their provision of care and services for our members. The manual defines minimum quality standards and performance benchmarks as well as service definitions, descriptions, and requirements. This manual is not all-inclusive of necessary federal, state, and local certification, licensure, registration, legal, or other applicable compliance matters, nor is it intended to be used as a method of micro-managing a provider's business operation.

CHP recognizes that every provider agency engages in routine review and improvement activities in order to deliver the best possible member care. The Quality Standard document helps to clarify key areas that CHP uses to evaluate results of provider agency performance. The process of incorporating all content standards and effective processes for every member care setting can be broad; nonetheless, these quality standards focus on certain key factors as contributing to success for member outcomes. Combined with other criteria, these factors help CHP move beyond 'hunches' in evaluating the quality of provider performance and assist CHP in focusing efforts on specific quality indicators. In the "big picture" of these quality standards, they help represent an important step in using data for improving quality outcomes for members.

The overall goal with the establishment of provider quality standards is to incorporate key indicators as part of an ongoing quality performance improvement program for CHP and the provider. Changes to the indicators will be implemented and monitored over time. Ultimately, these standards give the provider and CHP a place to begin when evaluating common activities that may reveal the presence of more effective practices.

Provider Quality Standards and Performance Indicators are based on different themes and measures that correspond with the specific service that is being provided.

Each measure has a specific target as a performance indicator. The provider agency will use the 'dashboard' contained within the document and complete the performance indicators on the Excel template, which is located on the CHP website in the Provider section. Over time, CHP monitors the various indicators to better understand the performance of each provider service delivery model.

Also found in the Provider section of CHP's website is a listing of the specific Provider Quality Standards. This list includes service areas that are specific to the types of services that CHP subcontracts for, such as Adult Day Services, Daily Living Skills Training, Home Health, Residential Services, and Prevocational Services.

After selecting one of the website links for a specific service, providers may notice that each document includes performance indicators along with a corresponding dashboard. Dashboards for every service area are also located in the last tab listed at the bottom of all service areas and is titled as 'Performance Dashboards.'

**The dashboards are in an Excel spreadsheet format and are tabbed for each specific service area. Please email the completed dashboard that reflects the provider's subcontracted services on a monthly basis by no later than the 5th day of the following month that the activities occurred. Email the document to: [CHPQualitySpecialists@chpmail.net](mailto:CHPQualitySpecialists@chpmail.net) with the subject line "Dashboard." Each month can represent a cumulative dashboard with the previous month's numbers still included.**

The Provider Quality Standards and Performance Indicators document will continue to change and evolve as part of a continuous improvement process and will be updated on an as-needed basis.

While you will be informed when there is a formal update to the documents, standards are continuing to be established for all provider groups and a current service may not be included. You are encouraged to check the CHP website often for periodic updates. The date on the front of each service area will indicate the most recent published version.



### Vocational and Day Center Services/Treatment

Effective with June 2011 dates of service, all vocational/day center services providers are required to bill in a standardized Excel spreadsheet format that should include specific dates of service. If you have not received additional details about this change in process via letter or email from CHP, please review the vocational billing procedures information found at the Providers main link on CHP's website.

### Transportation

Effective July 2011, CHP is required to report all transportation using DHS-assigned modifiers to distinguish between medical and non-medical trips. Contracts have been updated accordingly and have been sent to the contract signor on file for signature.

### Medicare/Medicaid Services

Please remember that all Medicare/Medicaid services must be billed to CHP using the appropriate Medicare/Medicaid billing requirements, modifiers, and format (UB or CMS1500).

### Transportation Reminder

Effective July 1, 2011, Wisconsin Medicaid recipients began using the new statewide transportation broker-LogistiCare. CHP would like to remind all of our providers that CHP members will not be required to use LogistiCare for their transportation needs.

CHP's clinical teams will continue to authorize all medical and non-medical transportation and assist with arranging rides as appropriate. Please contact the Provider Relations department if you have questions or concerns about this notice.



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## Pharmacy Reminders & Updates

### Medication Management Tools Used by Partnership Teams

CHP's interdisciplinary care teams associated with our Partnership program, along with our Nurse Practitioners, utilize paid pharmacy claims reports as part of their medication management efforts.

These reports are updated weekly and show when and what medications were paid for by CHP. With this information, the teams and nurse practitioners can help the member adhere to the physician's treatment plans and help the member succeed with their medication therapies. The teams and nurse practitioners review the medications as part of routine member visits and importantly, after every hospital discharge.

### Formulary

The CHP Pharmacy & Therapeutics Committee is responsible for the development and maintenance of the PHP formulary. The Committee has recently approved the following medications for inclusion in the Partnership Health Plan (PHP) formulary:

**New Drugs** - Ella®, Halaven®, Kombiglyze-XR®

**New Generics** - Fexofenadine/PSE (Allegra-D® 24-hour), Jinteli (Femhrt®), Voriconazole (Vfend®)

To obtain the most up-to-date copy of PHP's Formulary, our providers are encouraged to view the CHP website at: [www.communityhealthpartnership.com](http://www.communityhealthpartnership.com) and link to the Partnership Program formulary section.

### Did you know?

Claims for antipsychotic medications have doubled over the last two years and this category of drugs is now the number one drug expense for CHP. This usage ranking is a result of both increased utilization and price inflation by drug manufacturers.

The second and third costliest drug categories are diabetes medications followed by asthma/COPD medications.

## Residential Team

*continued from page 2*

obvious and simple. For others it will require changes in the way they think and plan."

In his role, Sommerfeld will be CHP's residential point-person for members with developmental disabilities and will continue his role as a resource person and consultant. "We want to further share our vision and help people understand that the result will be more freedom and that this can go hand-in-hand with lower costs," said Sommerfeld.

The Residential Assistance Team, together with the member, guardian, interdisciplinary team and other supports, will be able to weigh the pros and cons of several scenarios and work through any problems that may arise in order to come to a conclusion about what options may become realities for the individual.

CHP is very interested in receiving input and hearing ideas on how we can continue to create more community-integrated settings for our members. If you have an idea, a concept, or have general questions, please feel free to contact the Provider Relations department at 715-838-7420 and ask to speak with a Contract Specialist.

### PROVIDER TRAINING SESSIONS

**September 2011 Topic**  
*Maintaining Best Practices  
in a Changing Environment*

Watch for more details coming soon!

**Provider Bulletin**