🖄 PRESBYTERIAN

Network Connection

Information for Presbyterian Healthcare Professionals, Providers and Staff



NOVEMBER 2020

NEWS FOR YOU

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Presbyterian exists to improve the health of the patients, members and communities we serve.

Provider Self-care and Resilience

As providers and office staff continue to see patients during the COVID-19 pandemic, they are experiencing anxiety, fear, stress and other strong emotions at a new level. Now, between the holidays and the COVID-19 pandemic, it is especially important to effectively cope with stress to manage our mental health and well-being. As a healthcare provider, you probably already have some ideas on how to do that, but here are a few reminders just in case:

- Connect with friends, family and your community- or faith-based organization online, through social media, by phone or mail and talk to them about how you're feeling. Physical distancing has left many people feeling lonely and ostracized, but we can practice physical distancing without being socially distant.
- Take breaks from watching, reading or listening to the news or social media. While it's important to stay informed about the pandemic, constantly hearing about it can be upsetting. It's OK to take a break and unplug.
- Take care of your basic needs. In times of stress and crisis, sometimes we don't get enough sleep, or we forget to eat and stay hydrated.

- Make time to relax after work. Try doing some activities you enjoy or that make you feel good, even if you only do them for a few minutes.
- Connect with your communityor faith-based organization for support.

Presbyterian's mission is to improve the health and well-being of the patients, members and communities we serve, and we would not be able to do that without you. You are important. Your health is important. And the work you do matters. Thank you for continuing to partner with us to improve the health of the communities we serve.

UP FRONT

Additional Well-being Resources for Providers

- Free and confidential peer support from the Physician Support Line: www. physiciansupportline.com/
- A free compassion resilience toolkit for health and human services from Rogers Behavioral Health, a private and nationally recognized

not-for-profit organization: compassionresiliencetoolkit.org/ healthcare/

 Presentation slides for the "Workforce Grand Rounds Webinar Series: Combating Healthcare Provider Burnout in Clinical Settings" from the U.S. Department of Health and Human Services, Health Resources and Services Administration: https:// hrsaseminar.adobeconnect.com/ p9qte146iip3/?proto=true

 "Building Your Resilience" from the American Psychological Association: www.apa.org/topics/ resilience

2020 Annual Provider Training Events Overview

Presbyterian offers a variety of informative and useful provider trainings to ensure members receive the most appropriate care in the most cost-effective setting. Below is an overview of the 2020 training events Presbyterian is offering providers. Please note that some trainings are required, as identified in the following overview.

Provider Education Conference & Webinar Series

All contracted physical health, behavioral health and long-term care providers and staff are invited. Please note that due to the COVID-19 health crisis, all in-person conferences have been changed to webinars to ensure the safety of attendees and staff.

**Providers are only required to attend one of these trainings.

Training Date	Training Times	Training Format	Registration Link
Thursday, Dec. 17	12 - 2 p.m.	Webinar	phs.swoogo.com/2020PEC

Presbyterian Dual Plus Training

All contracted providers who render services to Presbyterian Dual Plus members are required to complete this training. **Office staff cannot complete the training on behalf of the provider

Training Dates and Times	Training format and/or location	Registration Link										
Available 24 hours a day, seven days a week throughout the year.	Online, self-guided training module.	phppn.org										

Indian Health Services and Tribal Conversations										
All contracted physical health, behavioral health and long-term care providers and staff are invited.										
Training Date	Training Times	Training Format	Registration Link							
Thursday, Dec. 17	1:30 – 3 p.m.	Webinar	phs.swoogo.com/IHS2020							

If providers have questions about the upcoming trainings, they are encouraged to contact their Provider Network Operations relationship executive. Contact information can be found at www.phs.org/ContactGuide.

UP FRONT

Treating Low Back Pain

Low back pain is a common reason people visit the doctor. According to the National Institute of Neurological Disorders and Stroke, low back pain is the most common cause of job-related disability and an estimated 80% of Americans will experience some form of low back pain in their lifetime.

It is important to know that most low back pain cases resolve within six weeks, and cases of acute low back pain are mechanical or nonpathological. Imaging studies are not necessary for confirmation of most low back pain diagnoses. In addition, clinical guidelines for treating low back pain strongly advise against the use of imaging in the absence of serious underlying pathology, such as a fracture or tumor, known as red flags.

According to the National Committee for Quality Assurance Healthcare Effectiveness Data and Information Set (NCQA HEDIS) measures, unnecessary or routine imaging is problematic because it is not associated with improved outcomes and exposes patients to unnecessary harms, such as radiation exposure, further unnecessary treatment and additional personal expense. Given the rapid resolution of most low back pain cases, imaging in the first six weeks of care is not advised, unless one or more of the following red flags is present:

- Neurological impairment
- Traumatic injury
- Loss of feeling, weakness and/or numbness in lower limb(s)

- HIV
- Intraspinal abscess
- History of cancer
- Intravenous drug use
- Unspecified immune deficiency

To ensure members receive the most appropriate care for their low back pain, providers should do the following:

- Perform radiological imaging for non-specific back pain only if red flags are present.
- Obtain a comprehensive medical history.
- Conduct a thorough neurological exam.
- Assess for conditions that may manifest as low back pain, such as anxiety, depression and psychosocial stressors.
- Inform members and patients that imaging studies may increase exposure to radiation.
- Inform members about options for pain relief, safe back habits and activity-level treatments, such as exercise, stretching, and massage or physical therapy services.
- Refrain from ordering imaging studies in the first six weeks of care, unless a red flag is present.

Following these guidelines will help ensure members reduce their risk for unnecessary treatments. For more information about low back pain treatment, please visit: https:// journalofethics.ama-assn.org/ article/diagnosing-acute-low-backpain/2011-04.



The Mediterranean Diet May Help Control Diabetes

The prevalence of diabetes is increasing worldwide. According to the Centers for Disease Control and Prevention (CDC), more than 34 million Americans have diabetes and more than 88 million U.S. adults have prediabetes. Since 2000, the number of adult diagnoses of diabetes has more than doubled. A major cause of this trend is an increase in the number of adults who are overweight or obese.

According to the CDC, Type 2 diabetes accounts for 90% to 95% of all diagnosed cases of diabetes. It is important for people to do their best to prevent the onset of Type 2 diabetes and, more importantly, to manage their condition if they have it. One of the best ways to help people manage their condition is through healthy lifestyle changes that include exercise and healthy eating habits.

Studies have shown that a diet rich in vegetables, fruits and lean proteins can help people manage Type 2 diabetes. One great option that incorporates high-fiber foods and lean proteins is the Mediterranean diet (Med diet). The Med diet is known as a heart-healthy way to eat, but it also has benefits for people with Type 2 diabetes. It contains many foods that can help improve blood glucose levels and help people lose and maintain a healthy weight. Furthermore, the Med diet can also lower the risk

of cardiovascular disease and high blood pressure, a common risk factor for people with Type 2 diabetes.

An effective diet strategy can lead to a better quality of life for people with Type 2 diabetes. It can also help control symptoms and may reduce the amount of medication a person needs to manage their diabetes. To further help people manage their diabetes, they can enroll in a diabetes program to set goals and track their food intake. For more information on the Med diet and other diets that can help people with Type 2 diabetes, please visit: www.healthline. com/health/diabetes/diabeticfriendly-diets-to-lose-weight.



Good Measures Success Story

Presbyterian partnered with the Good Measures program in April 2019 to offer diabetes prevention services to eligible Centennial Care members. Since the start of our partnership, 90 eligible members joined the Good Measures Diabetes Prevention Program and began their path to wellness. Recently, a 60-yearold Centennial Care member completed the year-long program and told us about her successful experience.

Brenda, from Roswell, New Mexico, joined the Good Measures program in May 2019. She took advantage of the personal health coach and digital platform to make positive changes in her eating and exercise behavior to reduce her risk of developing Type 2 diabetes. "I was prediabetic and didn't want to get diabetes," Brenda said.

Brenda wanted to break the cycle of diabetes in her family. Throughout the program, she walked hundreds of miles and increased her strength by engaging in physical activity every day. With the help of the Good Measures program, Brenda lost more than 50 pounds, 20.9% of her body weight, and she no longer uses a cane to help her move. "Good Measures is a good program," Brenda said.

The Good Measures Diabetes Prevention Program is offered at no cost to eligible Centennial Care members. Eligible Centennial Care members must be 18 years old or older, have a body mass index (BMI) greater than 25 kg/m2 (greater than or equal to 23 kg/m2 if a person is Asian), and have a history of gestational diabetes (may be self-reported) or have a blood test in the prediabetes range that includes one of the following results:

- Hemoglobin A1c between 5.7% and 6.4%
- Fasting plasma glucose that ranges between 100 and 125 mg/dL
- Two-hour plasma glucose after a 75 mg glucose load that ranges between 140 and 199 mg/dL

Please note that members who already have been diagnosed with diabetes do not qualify for this program. Providers can refer members and members can self-refer to the Good Measures program. Providers can refer members in one of the following ways:

- Complete and submit an online form at www.goodmeasures.com/ physicians.
- Send an email to Good Measures at phpdpp@ goodmeasures.com.
- Call Good Measures by phone at 1-855-249-8587.

When contacting the Good Measures team, please provide the member's first and last name, date of birth, Centennial Care member ID number, and the member's phone number. Please also list "Diabetes Prevention" as the reason for referral.



Pharmacy and Formulary Resources for Providers

Presbyterian's Pharmacy Resources webpage is a one-stop shop for pharmacy and formulary resources. Providers can search for formularies on the Pharmacy Resources page at www.phs.org/ tools-resources/member/Pages/ pharmacy.aspx.

This page also contains information about prescription drug plans and a list of medications available to members of the following plans:

- Commercial Large Group
- Health Insurance Exchange
- Centennial Care
- Medicare Advantage

Providers can search for a drug by name or therapeutic class. To access the online searchable formularies from the Pharmacy Resources page, click the hyperlink for any formulary to find an alphabetical list of all covered drugs. When providers find and click on the drug they need, they will receive information about that drug, including information about restrictions such as quantity limits, step therapy, prior authorization, age limits and exclusions.

PDF versions of the Presbyterian formularies are also available for providers to view, download or print. Both the online and PDF versions of the formulary are updated quarterly to reflect changes made by the Presbyterian Pharmacy and Therapeutics Committee. In addition, the Pharmacy Resources page has information about the following:

- Covered contraceptives
- Mail service pharmacy benefit
- Requesting exceptions
- Pharmacy locations

For questions about the formulary coverage of medications, please call Presbyterian's Pharmacy Services Help Desk at (505) 923-5757, or call toll-free at 1-888-923-5757. The Pharmacy Services Help Desk is available Monday through Friday, from 8 a.m. to 5 p.m. Providers can also send clinical questions to a Presbyterian pharmacist at ASKRX@phs.org. The email box is monitored during regular business hours, and a clinical pharmacist will respond within one business day.



TAKE NOTE

Presbyterian Dual Plus Network Expansion

In 2020, Presbyterian expanded Presbyterian Dual Plus (HMO D-SNP) services to members in 15 New Mexico counties who were eligible for both Medicare and Medicaid (Centennial Care) benefits. Beginning Jan. 1, 2021, Presbyterian will further expand services to the following counties:



- Catron
- Chaves
- Curry
- De Baca
- Eddy
- Guadalupe
- Harding
- HidalgoLea

- LincolnLos Alamos
- McKinley
- Mora
- Quay
- Roosevelt
- San Juan
- Taos
- Union

With this expansion, Presbyterian will have a statewide service area, serving the dual eligible population in all 33 New Mexico counties in 2021. We will recruit new providers and use our existing network of contracted providers to meet the needs of Presbyterian Dual Plus members.

Presbyterian Dual Plus is available to full benefit dual-eligible members and partial duals who live in one of the following two segments that make up the Presbyterian Dual Plus Service areas, both of which were approved by the Centers for Medicare & Medicaid Services (CMS):

- Rural New Mexico, which includes Chaves, Curry, Roosevelt, San Juan and Quay counties.
- Central New Mexico, which includes the other 28 counties.

Our Dual Plus network is designed to deliver the full range of covered benefits and services. Presbyterian also ensures that our network performance meets access standards from CMS.



2021 Dual Plus Training

Contracted and noncontracted providers who render services to Presbyterian Dual Plus members are required to complete Dual Plus training annually. The training for 2021 is available to providers as of Oct. 1, 2020.

The self-guided, online training module is available on the Presbyterian website at phppn.org. The training takes about 30 minutes to complete and requires providers to attest to completing the module. Please note that office staff cannot complete the training on behalf of a provider.

For questions about the Dual Plus training or expansion, contact you Provider Network Operations relationship executive. Contact information can be found at www.phs.org/ ContactGuide.



Presbyterian Health Plan, Inc. Provider Network Operations P.O. Box 27489 Albuquerque, NM 87125-7489 www.phs.org

PRESBYTERIAN WORD SEARCH

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TALK TO US

Send your questions or comments to Presbyterian's Provider Network Operations department:



CONTACT GUIDE: www.phs.org/ContactGuide



PHONE: (505) 923-5757 or (505) 923-5141



MAIL: PO Box 27489 Albuquerque, NM 87125-7489 Attn: Provider Network Operations

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www.surveymonkey.com/r/PHPnewsletter