A PRESBYTERIAN

Network Connection

Information for Presbyterian Healthcare Professionals, Providers and Staff



MARCH 2021

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

Managing Stress to Improve Health

We are all susceptible to the consequences of poorly managed stress but sometimes we are not aware of it. To appropriately manage stress, it is important to adopt routines that improve resiliency and foster healthy lifestyles. Below are some ideas to help manage stress.

Take a Break - Release stress by taking short mental breaks. Take a few minutes to sit quietly and breathe. Enjoy the silence or add soothing music.

Practice Mindfulness - Mindfulness is the practice of being present. It is a simple exercise that can include prayer or a mantra that provides a calming effect. Mindfulness can also help people realign with their internal goals and beliefs.

Exercise - Exercise is a great way to release stress. There are also plenty of exercise resources available online, including yoga, Pilates and other at-home workout routines. Exercise also helps increase muscular strength and improve brain function.

Prioritize Sleep - A good night's rest is foundational for good mental and physical health. Improve sleep by turning off all electronic devices and avoiding sugar, caffeine and alcohol before going to bed.

Pursue Interests - Most of all, find time to do what you love. Pursue your interests, learn a new skill, and participate in activities that make you laugh and smile.

Presbyterian has resources for providers and members who may experience high levels of stress. Please see the PresRN phone numbers below to speak with a registered nurse who can connect you with these resources and help you decide where to go to get the right help.

- Commercial PresRN: (505) 923-5570 or 1-866-221-9679
- Centennial Care PresRN: (505) 923-5677 or 1-888-730-2300
- Medicare PresRN: (505) 923-5573 or 1-800-887-9917

2021 Annual Provider Training Events Overview

Presbyterian offers a variety of informative and useful provider trainings. Below is an overview of the 2021 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. Providers are only required to attend one of these trainings each year.

Training Date	Training Times	Training format and/or location	Registration Link
Wednesday, March 17	9 - 11 a.m.	Webinar	
Thursday, March 18	12 - 2 p.m.	Webinar	
Wednesday, June 16	9 - 11 a.m.	Webinar	
Thursday, June 17	12 - 2 p.m.	Webinar	phs.swoogo.com/2021PEC
Thursday, Sept. 16	9 a.m. – 12 p.m.	Webinar	
Friday, Sept. 17	12 - 2 p.m.	Webinar	
Wednesday, Dec. 15	9 - 11 a.m.	Webinar	
Thursday, Dec. 16	12 - 2 p.m.	Webinar	

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 and/or location	Registration Link
Thursday, March 25	2 - 3:30 p.m.	Webinar	
Thursday, June 24	2 - 3:30 p.m.	Webinar	https://pho.guya.gua.gua/IIIC2021
Thursday, Sept. 23	2 - 3:30 p.m.	Webinar	https://phs.swoogo.com/IHS2021
Thursday, Dec. 16	2 - 3:30 p.m.	Webinar	

Behavioral Health Critical Incident Reporting

All behavioral health providers are required to participate in annual Critical Incident Reporting training as part of the provider contract. This training is also mandated by the Human Services Department.

Training Date	Training Times	Training format and/or location	Registration Link
Tuesday, May 4	1 - 2:30 p.m.	Webinar	TBD
Tuesday, June 15	1 - 2:30 p.m.	Webinar	TBD
Thursday, Aug. 19	1 - 2:30 p.m.	Webinar	TBD
Wednesday, Nov. 10	1 - 2:30 p.m.	Webinar	TBD

If you have questions about the upcoming trainings, please contact your Provider Network Operations relationship executive. Contact information can be found at www.phs.org/ContactGuide.

Collaboration with Behavioral Health Providers Improves Health Outcomes

Presbyterian strives to provide timely and cost-effective healthcare that addresses the healthcare needs of all members. To achieve this goal, Presbyterian continually assesses member data to increase access to healthcare and improve health outcomes.

To ensure we provide services that also address our members' behavioral health needs, we recently completed an analysis of health outcomes for members with behavioral health issues, using the Johns Hopkins Adjusted Clinical Group® (ACG) System. This analysis demonstrates the value of integrated care between physical health and behavioral health providers.

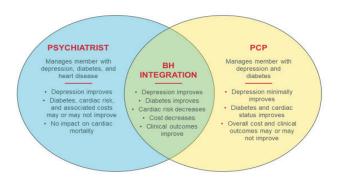
In general, members with behavioral health conditions are more likely to develop chronic physical health conditions that negatively impact their quality of life. Members with behavioral health conditions also experience an increase in cumulative healthcare costs over time compared with members who do not have behavioral health conditions.

Behavioral Health Integration

Behavioral health integration can be a preventive measure for a member's long-term well-being. Our ACG analysis showed that collaboration between a primary care provider (PCP) and a behavioral health provider helped improve depression symptoms, reduced the risk of cardiac disease, and helped members with diabetes better manage their condition.

Behavioral health integration can also be an essential part of care for members with co-morbid conditions. Members with the best health outcomes received care that included collaboration between behavioral health specialty providers and PCPs.

Value of Behavioral Health Integration





Care Coordination Model

The care coordination model is one example of effective consultation and care coordination. By identifying members who are eligible for collaborative care, Presbyterian reduces emergency room use and inpatient hospitalizations. Furthermore, members who met the Healthcare Effectiveness and Data Information Set (HEDIS) Antidepressant Adherence Medication measure had lower emergency department utilization. In addition, data shows that members in care coordination have significant improvement in health outcomes.

Through appropriate care coordination, collaboration and integration, members can receive the care they need to live their best lives. Presbyterian will continue to identify best practices that improve the health of the patients, members and communities we serve.

Behavioral Quality Improvement Program Ensures Members Receive Services

Presbyterian's Behavioral Quality Improvement Program (BQIP) offers incentive payments to agencies that support HEDIS or performance measures that improve outcomes for members. To meet these measures, behavioral health providers will partner with certain agencies to ensure members receive services.

For more information about the BQIP, please contact Jeanette Tapia at itapia@magellanhealth.com.

Partner Agency	Objective
A physical health agency or emergency room	Use telehealth or an in-person visit to transition members with substance abuse issues for an initial intake.
A physical health agency	Transition members diagnosed with schizophrenia to see a PCP for a diabetes screening.
A physical health agency	Perform a depression screening and transition members for continued treatment.
An inpatient acute facility	Assist members with their seven-day and 30-day follow-up appointments. This also includes meeting the member while they are an inpatient using a video platform, such as a tablet.

Developing Site of Service Resource and Cost Transparency Tools

Presbyterian strives to guide patients and members to their best health by improving access to affordable healthcare that is available at the right place and at the right time. To help members find cost-effective care, Presbyterian is developing a new Site of Service resource and Cost Transparency tool

to provide cost of care information for each service location to help patients and members choose the location that best suits their needs.

According to the Centers for Medicaid & Medicaid Services, price transparency puts patients in control and supports competition based on cost and quality, which can rein in the high cost of healthcare. Presbyterian's new tools will help members gain access to realtime price information that will enable them to know how much their healthcare will cost before receiving treatment.

Site of Service Resource

The Site of Service resource will inform members where they can receive the treatment and/or service they need at the lowest cost. Many common tests and treatments performed in a hospital can be provided at more convenient and lower-cost locations, which will helps members save time and

money. The table below shows an example of the possible cost savings for members.

As cost transparency information migrates from all managed care organizations to their respective members, members may ask providers to refer them to nonhospital, lower-cost provider locations for certain services. Providers can advise members to call the Presbyterian Customer Service Center number on the back of their member identification card for assistance in choosing a care location with the lowest out-of-pocket cost.

Service	Average Claim Costs in a Hospital Facility*	Savings Opportunity by Choosing a Lower-cost Location	Potential Claim Savings by Choosing a Lower-cost Location**
Orthopedic (Joint) procedures	\$5,357	40%	\$2,143
Colon Screening	\$1,417	65%	\$921
Diagnostic Imaging	\$1,320	50%	\$660
Lab Work	\$261	65%	\$170

^{*}Average claim for a member of a Presbyterian employer-sponsored health insurance plan.

Cost Transparency Tool

Presbyterian's new Cost
Transparency tool will be available
online for commercial members in
the second quarter of 2021. This
new tool will help patients and
members understand the cost of

their healthcare and allow them to compare prices between providers. Our goal is to ensure members receive the quality care they need, when they need it, in the most costeffective setting. Cost estimates will be based on Presbyterian claims history and the member's benefit plan.

Presbyterian will continue to provide information about these new tools.

^{**}Savings to the member depend on plan benefits, copays and deductibles.

Presbyterian Selected to Participate in the Hospice Value-based Insurance Design Model

The Centers for Medicare & Medicaid Services Innovation Center selected Presbyterian as one of nine Medicare Advantage Organizations in the country to participate in the hospice component of the Valuebased Insurance Design (VBID) Model. The VBID Model is designed to reduce Medicare program costs, improve coordination and efficiency of the delivery of healthcare services, and enhance the quality of care for Medicare members, including those with low incomes (e.g., dualeligible members).

We would like to take this opportunity to provide important information to Presbyterian's contracted hospice agencies regarding the VBID model in relation to Notices of Election (NOEs), Notices of Termination/Revocation (NOTRs), claims, transitional concurrent care benefits, and supplemental benefits.

Submitting Notices of Election and Notices of Termination/Revocation

Presbyterian's contracted hospice agencies must submit all NOEs and NOTRs to original Medicare and to Presbyterian. To submit a notice to Presbyterian, please securely email the notice(s) to PHPHospiceNOE_NOTR@phs.org.

Submitting Claims

Presbyterian's contracted hospice agencies must submit all claims to original Medicare **and** to Presbyterian. Hospice claims for Presbyterian members should only be submitted with NOEs dated Jan. 1, 2021, and later. Any hospice claims with NOEs dated before Jan. 1, 2021, will continue to be paid by original Medicare.

Presbyterian's electronic payor ID depends on the clearinghouse. For more information, please view the Presbyterian Practitioner and Provider Manual at www.phs.org/providermanual.

Paper claims may be mailed to the following address:

Presbyterian Health Plan P.O. Box 27489 Albuquerque, NM 87125-7489

Transitional Concurrent Care Benefits Requirements

Presbyterian's participation in the VBID model includes a set of transitional concurrent care benefits that allow members seeking care with in-network hospice agencies to access ongoing curative services paid by Presbyterian for a period of time (usually 30 days) after their hospice election. Presbyterian will cover transitional concurrent care services when the following requirements are met:

 The need for ongoing curative care and the type and duration of such care is documented in the patient's care plan established by the hospice medical director.

- The care plan is communicated to Presbyterian's Utilization
 Management team to establish the record of needed services, which enables Presbyterian to pay claims from concurrent care providers.
- Claims are submitted directly to Presbyterian by non-hospice providers who render services to Presbyterian for the primary hospice diagnosis, in accordance with the care plan that was communicated to Presbyterian.

Supplemental Benefits

Presbyterian members who experience a hospital admission during their hospice enrollment period are eligible for Presbyterian's Re-admission Prevention
Benefit Program, which includes transportation to hospice provider visits, one meal per day, and certain home modifications. Members can use the following phone numbers to contact Presbyterian and inquire about their eligibility for these benefits:

- (505) 923- 5678
- 1-800-356-2219 (toll free)

If you have any questions or concerns about the VBID Model, please contact your Provider Network Operations relationship executive. Contact information can be found at www.phs.org/ ContactGuide.

Good Measures Diabetes Prevention Program

According to the Centers for Disease Control and Prevention (CDC), approximately 88 million adults have prediabetes and are at risk for developing Type 2 diabetes. To help delay or prevent the onset of Type 2 diabetes, Presbyterian partnered with Good Measures, a wellness program with a digital platform that helps people make positive changes in eating and exercise behavior. This program delivers diabetes prevention services at no additional cost to eligible Centennial Care members with a prediabetes diagnosis.

The Good Measures program is a year-long program that is available online and by phone. It combines food and activity tracking capabilities with group support and personalized oneon-one coaching facilitated by trained lifestyle coaches. This approach helps keep members engaged and accountable as they learn to incorporate healthier habits into their lives. Regular physical activity and weight loss can help delay or prevent the onset of Type 2 diabetes, according to the CDC. Many Good Measure program participants have also benefited in the following ways:

 Lost 6.8% of their body weight on average.

- Achieved or exceeded their physical activity goal of 150 minutes per week.
- Improved biomarkers for blood pressure, blood glucose and cholesterol.

To be eligible for this program, patients must be Presbyterian Centennial Care members, 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 100 to 125mg/dL
- Two-hour plasma glucose after a 75mg glucose load 140 to 199mg/dL

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

Providers can refer members in one of the following ways:

Complete and submit an online form at https://www. goodmeasures.com/physicians.

- Send an email to Good Measures at phpdpp@ goodmeasures.com.
- Call Good Measures 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 ID number, phone number and list "Diabetes Prevention" as the reason for referral.



good measures



REGULATORY REMINDER

Provider Referrals for Disease Management Health Coaching

The Presbyterian Healthy
Solutions program is an
innovative disease management
program that helps members
manage their asthma, coronary
artery disease, diabetes, and/
or hypertension. Through
this program, licensed nurses
and health coaches work with
members to:

- Gain a better understanding of their health condition
- Establish selfmanagement goals
- Provide coaching for lifestyle modifications

Healthy Solutions health coaches also work with members to adopt healthy lifestyle behaviors, such as healthy eating, exercise, medication adherence, and reducing risk to improve health outcomes.

This program is available at no additional cost to Presbyterian members who are 18 years old or older. To enroll a Presbyterian member in the Healthy Solutions program, please contact the Healthy Solutions department at (505) 923-5487 or 1-800-841-9705. Providers can also email referrals to healthysolutions@phs.org.



Working Together to Develop a Member's Care Plan

Presbyterian Care Coordination is committed to including all participants in the member's care team in the development and implementation of the member's care plan. When a member is referred to Care Coordination, we develop an individualized, member-driven care plan that addresses the issues and needs identified on the member's comprehensive needs assessment.

As an important part of the care plan development process, we ask for input from anyone involved in the member's care team. Provider input is especially invaluable to the care plan development process, because it helps ensure a holistic approach to a member's health and well-being.

The customized care plan also allows members to understand which services are available to them, and it creates a foundation for discussions about their health with them and their caregivers, care coordinator and providers. The assigned care coordinator will work with

the member, designated family members, caregivers, authorized representatives, primary care provider and specialists to ensure the care plan is implemented properly.

If you would like to connect with a member's care coordinator, please contact the Presbyterian Care Coordination department at 1-866-672-1242 or (505) 923-8858.

We appreciate providers taking the time to share information they believe would be beneficial in the care of our patients and members.



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

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Relief Mindfulness Exercise Collaboration Transition

Behavioral Gratitude Resiliency **Improvement** Site

Service **Transparency** Value Model Design

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

Let Us Know Your Thoughts

Readership Survey

We appreciate receiving your feedback. Please use the link below to let us know how you think we can improve our newsletter and any topics you would like to read about in future issues.

www.surveymonkey.com/r/PHPnewsletter