Quality

Introducing WellCare BabySteps

WellCare Health Plans is pleased to introduce WellCare BabySteps, an important new program for both our providers and members! Pregnancy is a time of healthy beginnings. WellCare BabySteps merges care coordination and care management services to improve birth and mental health outcomes for our members – your patients. We make this possible by using innovative engagement strategies to link members to vital in-network and community services.

Meaningful encouragement from our providers to our members is imperative to the long-term success of WellCare BabySteps, so your support of the program is crucial.

Our long-term goals and objectives for WellCare and **Providers include:**

- Improving the quality of maternity care
- Improving birth outcomes
- Reducing cost of care for mothers and infants
- Increasing member engagement
- Improving provider engagement



To refer a patient or learn more about the WellCare BabySteps program, please contact your provider representative. Or visit your state's provider portal any time day or night at www.wellcare.com.

Thank you for your partnership and work to ensure that every WellCare member receives quality healthcare!

In This Issue

Quality

Introducing WellCare BabySteps1
Welvie®: Improving Members'
Health Care Experience2
NEW: Secure Portal Authorization
Enhancements2
How Care Management Can Help You3
WellCare: Taking Additional Steps
To Protect Members' Health Amid
Covid-19 Outbreak3
Earn Extra Bonus Incentives this year in
RxEffect!
WellCare strengthens our fight against epidemic of opioid misuse4
Engaging your Patients in Medication
Adherence Discussions5
Affirmative Statement5
Operational
RxEffect Provider Tool
As a WellCare Member, You Have the Right7
•
Electronic Funds Transfer (EFT) through PaySpan®7
Updating Provider Directory Information7
Provider Formulary Updates8
Operations8
Provider Resources
Provider Resources 8

Join the Conversation on Social Media

Join our digital and social communities for up-to-date information on how we're working with you and others to help our members live better, healthier lives.















Welvie®: Improving Members' Health Care Experience

In 2015, WellCare began offering the Welvie online surgery shared-decision making program to its Medicare Advantage members.

Welvie's six-step program curriculum helps participants decide on, prepare for and recover from surgery. Through information, Q&As and videos, patients learn how to work with their doctors to explore treatment options – both surgical and non-surgical – when considering "preference-sensitive" surgeries like spine fusion, knee arthroscopy, prostatectomy and other elective procedures. Preference-sensitive surgeries are defined as those that have two or more viable alternatives for a presenting condition. If the patient, along with their doctor, decides surgery is right for them, Welvie then helps patients prepare for surgery and recovery with robust tools including checklists, calendars and other information and helpful tips to help them have error- and complication-free results.



Welvie participants receive a \$25 **Amazon.com** gift card for completing the first three steps of the program (reward is available once per member per 365 days).

The program's goal is to support member-physician interaction and preparation for surgery, as well as to promote improved health literacy.

After three years, the program has received high satisfaction marks from members. 96% of WellCare members have reported they felt the Welvie program helped them speak with their doctor about their treatment options and 97% said the Welvie program better prepared them for surgery.



To refer your WellCare Medicare Advantage patients to Welvie, just send them to **http://www.welvie.com** to register and engage in the program.

Quality

NEW: Secure Portal Authorization Enhancements

WellCare has made several recent enhancements to our secure Provider Portal Authorization System. We've expanded your online capabilities, so you can accomplish more than ever before – without the need to call Provider Services for assistance.



New features include:

- Authorization Edits: Providers can now edit previously submitted authorizations online. You can also return and upload additional attachments (such as requested medical records) and review previously submitted documentation.
- **Real-time Authorization Status:** Quickly and easily look up status of any authorization request at any time. If you need any assistance, you can chat with a live agent.
- **New Status:** We've added a new **"Partially Approved"** authorization status to more accurately depict the determination of requests where a portion of services have been approved.

Not registered on our secure Provider Portal yet? It only takes a few moments to **sign up for an account** and start benefitting from the many useful features provided.

How Care Management Can Help You

Care Management helps members with healthcare or social needs. It pairs members with a Care Manager. The Care Manager is a registered nurse, a licensed clinical social worker or other licensed health professional who can help the member with issues like:

- Complex medical needs
- Solid organ and tissue transplants
- Children with special health care needs
- Lead poisoning



We're here to help you!

Please contact us at 1-866-635-7045 for more information on our program. A WellCare staff member will tell you about the program. This no-cost program gives you access to a registered nurse (RN) or licensed clinical social worker (LCSW), Monday through Friday from 8 a.m. to 5 p.m. Eastern Time.

Quality

WellCare: Taking Additional Steps to Protect Members' Health Amid COVID-19 Outbreak

As we continue to learn more and address the novel coronavirus and its resulting illness COVID-19, we want to update you on important coverage information around its testing, treatment and care.

WellCare will be extending coverage for COVID-19. This important step is being taken in partnership with other major insurers and with the support of the White House Coronavirus Task Force.

We intend to cover COVID-19 testing and screening services for your Medicare and Medicaid members and are waiving all associated member cost share amounts for COVID-19 testing and screening. To ensure that our members receive the care they need as quickly as possible, **WellCare** will not require prior authorization, prior certification, prior notification or step therapy protocols for these services.

This coverage extension follows the Centers for Medicare & Medicaid Services' (CMS) guidance that coronavirus tests will be fully covered without cost-sharing for Medicare and Medicaid plans, a decision that **WellCare** fully supports for our members covered under these programs. We also support the administration's guidance to provide more flexibility to Medicare Advantage and Part D plans.

The specific guidance includes:

- ✓ Waiving cost-sharing for COVID-19 tests
- ✓ Waiving cost-sharing for COVID-19 treatments in doctor's offices or emergency rooms and services delivered via telehealth
- **✓** Removing prior authorizations requirements
- Waiving prescription refill limits
- ☑ Relaxing restrictions on home or mail delivery of prescription drugs
- **✓** Expanding access to certain telehealth services



WellCare has been working in close partnership with state, local and federal authorities to serve and protect patients during the COVID-19 outbreak, including ensuring that its members and providers have the most up-to-date information to protect themselves and their families from the virus. We remain committed to protecting our communities during the outbreak.



To ensure you are keeping your environment safe from the coronavirus, please refer to the CDC guidelines here:

https://www.cdc.gov/coronavirus/2019-ncov/downloads/workplace-school-and-home-guidance.pdf

Earn Extra Bonus Incentives this year in RxEffect!

RxEffect, an innovative quality platform from RxAnte, is offering an additional financial incentive for providers. The RxEffect Bonus Program starts in mid-August and runs through the remainder of 2020.

Providers who log into the RxEffect Quality tool and take action with eligible Star Ratings medication opportunities (diabetes, blood pressure, and cholesterol) within the bonus program window are eligible for the incentive.

The RxEffect tool is free for WellCare providers and easy to use. Providers can track their progress through RxEffect and help their patients become adherent to their medications. Active use of the tool has been shown to improve quality measure outcomes.

Looking to improve your office efficiency? Utilizing RxEffect for Appointment Agenda submissions, prioritized target list of patients, and capturing bonus program eligible opportunities <u>in one tool</u> makes it a great workflow solution.



Check out the RxEffect Video here: Https://www.youtube.com/watch?v=loEKiM7veZQ

For more information on RxEffect, please visit the website at **http://www.rxante.com** and speak with your WellCare Provider Relations and/or Quality representative.

Quality

WellCare Strengthens Our Fight Against Epidemic of Opioid Misuse

WellCare has created a comprehensive program for Medicaid and Medicare members who overuse opioid medications or are at risk of doing so, and we invite all of our providers to join us in this crucial effort.

In 2017, the HHS declared opioid misuse a public health emergency. In 2018, 2 million people had an opioid use disorder and 47,600 people died from overdosing on opioids, according to the U.S. Department of Health and Human Services.

WellCare believes that vigilance by our providers can play a key role in fighting the epidemic that has spread throughout the United States.



The goals of our Opioid Program are to:

- Reduce the risk of opioid misuse, dependence and ultimately overdose, improving our Members' health outcomes
- Support members who depend upon and/or abuse opioids by providing Care Management services, education and monitoring to improve health outcomes
- Promote the appropriate use of healthcare resources

Interventions using Care Management services are for Medicare and Medicaid Members:

- Who have shown outlier utilization of opioids and other services requiring access limitations controls,
- With low back pain and a high number of opioid prescriptions; and
- Who have been proactively identified as being at high risk of misuse of opioids

For our Medicare population, the Pharmacy Department administers CMS's Opioid Drug Management Program (Opioid DMP). CMS requires Pharmacists to address the Opioid needs of members. WellCare Pharmacists will refer members to Care Management as needed.

Also, we are seeking to expand the number of providers who are able to offer Medication Assisted Treatment (MAT services). MAT services use FDA-approved medications combined with counseling and behavioral therapies to provide a "whole-patient" approach to the treatment of substance use disorders.



To learn more about WellCare's Opioid Drug Management Program, click on your state for full details. **AR, AZ, CT, GA, IL, MS, NH, NY, SC, TN, TX, WA**For additional questions, reach out to your Provider Representative.

Engaging your Patients in Medication Adherence Discussions

According to the American Medical Association, patients only take their medications half of the time. Adherence is defined as a patient who takes their medications at least 80% of the time, and with the current rate of 50% adherence in the general public, this is an area worth addressing. To combat this lack of adherence, engaging with your patients is essential.

Below are some tips on how to assess for medication adherence in your patient.

- 1 Create a routine by asking every patient about their adherence to medications.
- 2 Ask open ended questions:
 - a. Can you tell me how you are taking this medication?
 - b. What do you think about this medication?
 - c. How do you remember to take your medicine?
- 3 Ask the patient about barriers that hinder them from taking their medication.
 - a. What bothers you about this medication?
 - b. What stands in the way of you taking your medicine?
- 4 Offer a supportive, non-judgmental atmosphere by utilizing motivational interviewing:
 - a. Listen to the patients concerns
 - b. Ask the patient about their health goals
 - c. Avoid arguments and adjust to resistance
 - d. Support optimism and give encouragement
 - e. Understand and respect patient values and beliefs

- 5 If the patient states he/she is non-adherent, thank him/her for sharing before continuing to assess.
- 6 Develop a plan to address barriers the patient is experiencing and involve the patient in your decisions. One way to do this is to offer clinically appropriate options for them to choose from.
 - a. Utilize the word "we".
 - b. We can try option 1 or option 2. What do you think about these options? Which of these do you think best suits you?



We value everything you do to deliver quality care to our members – your patients. Thank you for playing a role in assessing and improving medication adherence in your patients.

Reference:

- 1. AMA Ed Hub and Society of General Internal Medicine, "Medication Adherence Improve Patient Outcomes and Reduce Costs," retrieved from: https://edhub.ama-assn.org/steps-forward/module/2702595
- AMA. "Nudge theory explored to boost medication adherence," retrieved from: https://www.ama-assn.org/delivering-care/patient-support-advocacy/nudge-theory-explored-boost-medication-adherence
- 3. Treatment Improvement Protocols Series, "Chapter 3-Motivational Interviewing as a Counseling Style," retrieved from: https://www.ncbi.nlm.nih.gov/books/NBK64964/
- 4. American Association of Diabetes Educators, "Fostering Medication Adherence Tips and Tricks," retrieved from: https://www.diabeteseducator.org/docs/default-source/living-with-diabetes/tip-sheets/medication-taking/fostering_med_adherence.pdf?sfvrsn=4



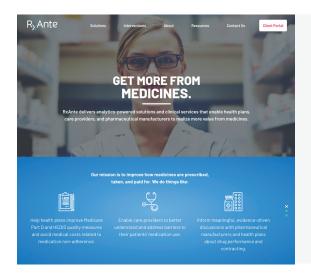
Affirmative Statement

WellCare's Utilization Management Program decision making is based only on appropriateness of care, service and existence of coverage. WellCare does not specifically reward practitioners or other individuals for issuing denials of coverage. Financial incentives for UM decision makers do not encourage decisions that result in underutilization.

If you have questions about this program, please call Customer Service at 1-855-538-0454. TTY users call 711.

RxEffect Provider Tool

RxAnte offers an innovative quality platform called RxEffect. The platform is free to WellCare provider groups and offers targeted patient lists, daily claim updates, and strong workflow support for your practice to support improved medication adherence for your WellCare members. Active use of the RxEffect tool has been shown to improve quality measure outcomes and help streamline effective member outreaches to support adherence.



Be on the lookout for some exciting new RxEffect Enhancements in 2020, including:

- New PCP Attribution allowing more groups to engage more effectively in RxEffect
- Saving Filters Modification improving workflow efficiency by allowing practice-users to save more filters
- Polypharmacy Measures added to improve a provider's ability to manage medication adherence and outreach to members

Check out the RxEffect Video here: https://www.youtube.com/watch?v=loEKiM7veZQ

For more information on RxEffect, please visit the website at **www.rxante.com** and speak with your WellCare Provider Relations and Quality Representative.

Operational

Medication Adherence and RxEffect™

To help with medication adherence, WellCare engages our members with refill reminder phone calls, off-therapy (missed dose) phone calls and letters as well as utilizing our network pharmacies to help counsel our members. However, there is nothing as powerful as a reminder from the member's primary care provider about the importance of medication adherence.

RxEffect™ is an online platform available to WellCare Medicare provider groups to help improve members' medication use and compliance.

Talk to your WellCare associate today to get users from your office access to the RxEffect™ portal.



This web portal:

- ✓ Is sponsored by WellCare so there is no cost to our provider partners
- ✓ Uses predictive modeling to target the patients who need it most
- ✓ Uses real-time monitoring of pharmacy claims and is updated daily
- ✓ Includes opportunity flags for 30-day conversions, diabetic patients not on statins, Appointment Agendas and high-risk medications

WellCare Members Have the Right:

- To receive information about the organization, its services, its practitioners and providers and member rights and responsibilities
- To be treated with respect and dignity
- To have their privacy protected
- To participate with practitioners in making decisions about their health care
- To a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost and benefit coverage
- To voice complaints or appeals about the Plan or the care it provides
- To make recommendations regarding the Plan's member rights and responsibilities policy

Your members may have additional Rights and Responsibilities. These are listed in their member Handbook.



Member's Have Responsibilities:

- To supply information that the plan and its doctors and providers need to provide care
- To follow plans and instructions for care that they have agreed on with their doctor
- To understand their health problems
- To help set treatment goals that were agreed to with their doctor

Operational



Electronic Funds Transfer (EFT) through PaySpan®

Five reasons to sign up today for EFT:

- You control your banking information.
- No waiting in line at the bank.
- No lost, stolen, or stale-dated checks.
- Immediate availability of funds **no** bank holds!
- No interrupting your busy schedule to deposit a check.

Setup is easy and takes about five minutes to complete. Please visit **www.payspanhealth.com/nps** or call your Provider Relations representative or PaySpan at **1-877-331-7154** with any questions.

We will only deposit into your account, **not** take payments out.

Updating Provider Directory Information

We rely on our provider network to advise us of demographic changes so we can keep our information current.

To ensure our members and Care Management staff have up-to-date provider information, please give us advance notice of changes you make to your office phone number, office address or panel status (open/closed). Thirty-day advance notice is recommended.

New Phone Number, Office Address or Change in Panel Status:



Please call us at 1-855-538-0454.

Thank you for helping us maintain up-to-date directory information for your practice.



Community Connections HELP Line

1-866-775-2192

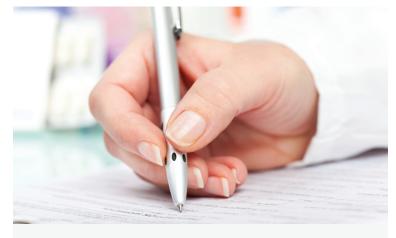
We offer non-benefit resources such as help with food rent and utilities



Provider Formulary Updates

There have been updates to the Medicare formulary. Find the most up-to-date, complete Formulary at **www.wellcare.com**. Select your state from the drop-down menu and click on Pharmacy under Medicare in the Providers dropdown menu.

You can also refer to the Provider Manual to view more information regarding WellCare's pharmacy Utilization Management (UM) policies and procedures. To find your state's Provider Manual visit www.wellcare.com. Select your state from the drop-down menu and click on Overview under Medicare in the Providers drop-down menu.



Operations

Timely Filing



Beginning October 1, 2020, the Timely Filing submission requirements specified in each Provider's Meridian Medicare contract will be enforced. For additional information, questions or concerns, please contact your local Provider Network Management Representative.

We're Just a Phone Call or Click Away



WellCare Health Plans, Inc.: 1-855-538-0454



www.wellcare.com/providers



Representing the following states: AR, AZ, CT, GA, IL, LA, MO, MS, NH, NY, SC, TN, TX, WA

Provider Resources

Provider News - Provider Portal

Remember to check messages regularly to receive new and updated information. Access the secure portal using the Secure Login area on our homepage. You will see Messages from WellCare on the right.

Resources and Tools

Visit www.wellcare.com/Providers to find guidelines, key forms and other helpful resources. You may also request hard copies of documents by contacting your Provider Relations representative.

Refer to our *Quick Reference Guide*, for detailed information on areas including Claims, Appeals and Pharmacy. These are at **www.wellcare.com/Providers**, click on Resources under your state.

Please remember that all Clinical Guidelines detailing medical necessity criteria for several medical procedures, devices and tests are available on our website at **www.wellcare.com/Providers**, click on Clinical Guidelines under your state.