



The Network News

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Quote of the Month

"It requires wisdom to understand wisdom: the music is nothing if the audience is deaf."
-Walter Lippman

CARE MANAGEMENT

The CHNCT Care Management Team consists of RN Case Managers, Intake Specialists, the Care Management Director and the Medical Director. Although the PCP maintains overall responsibility for implementing care management activities, this Care Management team helps to ensure that all CHNCT members have a "medical home" that promotes access and continuity within the CHNCT network. This team can offer consultation and can suggest alternative care options available through the plan.

Important Numbers

Main Number

203-237-4000

Provider Relations

800-440-5071

Fax: 203-639-1069

Member Services

800-859-9889

Care Management

800-440-5071

Fax: 203-639-0719

BeneCare- Dental

800-843-4727

Claims

800-440-5071

Fax: 203-630-7990

Visit us on the Web:
www.CHNCT.org

PROMOTING ASTHMA MANAGEMENT PLANS

Through a unique collaboration between managed care organizations and public health agencies, providers across Connecticut who care for children with asthma are being encouraged to use individual written asthma management plans. The Pediatric Asthma Management initiative was established to help promote best practice for pediatric asthma. The use of written asthma management plans is recognized by the National Health, Lung and Blood Institute in their "Guidelines for the Diagnosis and Management of Asthma." Written plans are an important part of helping children with asthma and their families understand their symptoms, their medications and under what circumstances medications should be taken. Written plans are also a valuable tool for school nurses, day care providers and others who are charged with caring for children with asthma. The use of written asthma management plans can also serve to reinforce consistent educational messages by parents and school nurses and assist providers who do not have enough time for patient education.

Through this collaboration a common asthma management plan called the "Asthma Action Plan" was developed and reproduced in triplicate. By providing a common form for the asthma management plan, the initiative aims to make it easier for physicians who are not already using written asthma management plans as part of their regular practices to do so.

The goal of this initiative is to improve the management of asthma in children by

- encouraging the use of a written asthma management plan by physicians as they work in partnership with children and their families to develop and communicate an individualized plan for each child to manage his or her asthma, and
- supporting and facilitating the use of a single common tool—the Asthma Action Plan (a three-part form in colors, based on NHLBI guidelines) - by physicians in settings across the state, as a consistent means of improving communication between physicians, families and schools to help them collaborate in effective management of each child's asthma.

The CT Department of Public Health has mailed multiple copies of the Asthma Action Plan to CT Pediatricians, Family Practice Physicians, Allergists and Emergency Room Physicians. Additional copies of the plan in both English and Spanish can be obtained free of charge by calling the American Lung Association of Connecticut at 1-800-LUNG-USA or by e-mailing them at jnewton@alac.org.

-Article from *Connecticut Pediatric Asthma Management Initiative*

MATTRESS PADS AND PILLOW COVERS

Asthma is a major health issue for CHNCT's members. Dust is a common trigger for many asthma sufferers. Mattress pads and pillow covers that prevent dust mites are useful for patients who are allergic to dust and may prevent serious asthma attacks. Effective immediately:

- CHNCT will cover two (2) mattress pads and two (2) pillow covers annually for members with asthma or dust allergies.
- No prior authorization is necessary.
- Acceptable codes for billing are A4649 combined with a diagnosis of asthma/allergies (493.0—493.9 and 477.0—477.9).

**Network Provider
Additions/Deletions
February and March, 2002**

NEW CONTRACTS:

- Danbury Office of Physician Services-Danbury
- Life Wellness Physical Therapist, LLC-New Haven
- Med Aid (DME Provider) - Orange
- New England Orthotic & Prosthetic Systems-Branford
- Phillips Chiropractic Center-Branford
- Private OB/GYN Associates -New Haven
- Radiology Associates of New Milford-New Milford
- Michael Ryskin, M.D.-Ansonia
- Waterbury Pulmonary Associates -Waterbury
- Zikaras, LLC-Bridgeport

TERMINATIONS:

- Denis Baillargeon, MD-Putnam
- William Cambridge, MD-Norwich
- Walter Gurski, MD-Norwalk, East Hartford

**ATTENTION:
DURABLE MEDICAL EQUIPMENT
CHNCT PROVIDERS**

Durable medical equipment (DME) includes medically necessary appliances, equipment and supplies required for the care of a patient outside a hospital, skilled nursing facility or other health care facility. CHNCT requires pre-certification on any items over \$200 before rental or purchase of DME.

The RN Case Manager evaluates the medical necessity and appropriateness of DME items that providers have requested for their patients. Care Management staff coordinates with the PCP, as required, to ensure that appropriate and necessary services are made available to members in need.

PLEASE NOTE: When billing for a DME Rental, you must use the "RR" modifier as noted in the HCPCS 2002 Manual. **Any claims submitted to CHNCT for a rental with an existing rental authorization, billed without the "RR" modifier will be denied as of June 1, 2002 processing date.** Please share this information with the appropriate office personnel.

ATTENTION: ALL PRACTITIONERS

When submitting a corrected claim due to a billing error (i.e., 5th digit diagnosis denial, invalid CPT, etc.) please have the corrected claim stamped to clearly identify that this is a "CORRECTED CLAIM". This will prevent the claim from being denied as a duplicate claim. If you are appealing a policy denial, (i.e., no authorization, timely filing, etc.), this should be submitted as an appeal to the Appeals Coordinator. Corrected claim submissions are subject to the timely filing limitation of 120-days and appeals are subject to a timely filing limit of 60-days after the date of the remittance advice. Thank you.