



The Network News

Volume 3, Issue 5

September, 2002

Quote of the Month

"Hard work spotlights the character of people: some turn up their sleeves, some turn up their noses, and some don't turn up at all."
-Sam Ewig

Community Health Network of Connecticut is proud to have reached a significant milestone.

50,000

As of July 1, 2002 we now have over 50,000 members! This is an exciting period in our brief existence, but more importantly, it is a testimony to the dedication of staff and providers who continue to focus on quality, service and accessibility.

G.S.

Important Numbers

Main Number
203-237-4000

Provider Relations
800-440-5071
Fax: 203-639-1069

Member Services
800-859-9889
Fax: 203-317-3972

Care Management
800-440-5071
Fax: 203-639-0719

Claims
800-440-5071
Fax: 203-630-7990

BeneCare Dental
800-843-4727

Magellan Behavioral Health
800-626-5907

Visit us on the Web:
www.CHNCT.org

Mandated Reporting of Child Abuse/Neglect

Health care providers and caregivers within the State of Connecticut are legally required to report suspected child abuse or neglect to the Department of Children and Families. There is a hotline number to make such a report: 1-800-842-2288. Additionally, mandated reporters are required to submit a written report to the Department within 48-hours.

The instructions for completing the report as well as definitions of who is mandated to report suspected child abuse/neglect; reporting requirements; outline of the responsibilities of the Department of Children and Families (DCF) as well as a report form (DCF-136) can be obtained via the internet at the following address:

www.state.ct.us/dcf/HOTLINE.htm

Community Health Network of CT takes this reporting responsibility very seriously and has policies and procedures in place for all staff. In-services provided by DCF have been initiated for all clinical Care Management staff and Outreach staff. Additionally, a packet of information about mandated reporting is mailed to all our newly credentialed practitioners.

If you would like CHNCT to arrange an in-service for you or your staff, or to provide you with more information on mandated reporting, please contact the Director of CHNCT Quality Improvement at 203-317-3086 or via email at: www.chnct.org.

L.C.

CHNCT Disease Management Programs

Community Health Network of Connecticut offers both an Asthma Disease Management Program and a Diabetes Disease Management program which provide case management assistance to members and practitioners in all aspects of asthma and diabetes treatment and management. This includes home care referrals; assistance in obtaining medical equipment and medications ordered by physicians; telephone case management follow-up; links with community resources and assistance with referrals to specialists when indicated. CHNCT has a variety of educational materials available and will be happy to provide these upon request. If you have a member whom you would like to refer for disease management, please contact the Care Management Department at: 1-800-440-5071, Option #2 and ask to speak with a RN Case Manager. Additionally, please refer any of your high-risk, chronically ill or special needs patients who you feel would benefit from intensive case management services.

L.C.

The HEALTH Corner

By K.M.S.

Millions of Americans suffer from chronic illnesses that can be prevented or improved through regular physical activity:

Did you know?

- 12.6 million people have coronary heart disease.
- 1.1 million people suffer from a heart attack in a given year.
- 17 million people have diabetes, about 90% to 95% of cases are type 2 Diabetes, which is associated with obesity and physical inactivity; approximately 16 million people have "pre-diabetes"
- 107,000 people are newly diagnosed with colon cancer each year.
- 300,000 people suffer from hip fractures each year.
- 50 million people have high blood pressure
- Nearly 50 million adults (between the ages of 20 and 74) or 27% of the adult population, are obese, overall more than 108 million adults, or 61 % of the adult population are either obese or overweight.

Physical activity is fundamental to the prevention of disease.

Healthy Achievers, 1998

**Network Provider Additions/
Deletions
June and July, 2002**

New Providers / Practitioners:

- Allergy Associates of Hartford
- Araya Family Chiropractic, LLC, Hartford
- Christus Medical Group, PC, East Hartford - Internal Med
- Diagnostic Imaging of Southbury, LLC, Southbury
- Diagnostic Imaging Associates, LLC, Waterbury
- Health Imaging Associates, Waterbury
- Houtan Golzari, MD, Fairfield - Internal Med
- Laurence Glaubiger, MD, Enfield - Pulmonary
- Mary Beaulieu, OD, Waterford - Adv. Practice Optometry
- Molecular Diagnostic Labs, Naugatuck
- Moosehill Pediatrics, Guilford
- Munir Hamzi, MD, Waterbury - General Surgery
- Naugatuck Valley MRI, LP, Waterbury
- Naugatuck Radiology Associates, PC, Naugatuck
- Naugatuck Valley Radiological Associates, Waterbury
- Philip Mongelluzzo, Jr., MD, LLC, Wtby- Int. Med.
- Prospect Diagnostic Imaging, LLC, Prospect
- Sharon Ear Nose and Throat, PC
- Urology Associates of Danbury, PC

No Longer Participating with CHNCT:

- B. Glenn Blair, DPM, Bridgeport- Podiatry
- Eastern CT ENT Group, Willimantic
- Kenneth Kaplove, MD, Waterbury- Neurology
- Miguel Aquino, MD, Waterbury—Internal Medicine
- Pediatric Medicine of Wallingford

CHNCT 2002 FORMULARY

To assist in the control of drug costs, CHNCT implemented a new preferred formulary on June 10, 2002. Below are some important points to remember in prescribing medication for CHNCT members:

- Please refer to the CHNCT 2002 formulary to ensure that prescriptions are written for formulary medications.
- When medically appropriate, generic medication should be prescribed.
- The formulary covers over-the-counter (OTC) products for HUSKY A members. You are encouraged to prescribe them when medically appropriate.
- There may be occasions when you need to prescribe a non-formulary drug for the medical management of a specific patient. You may fax this request to the attention of Pharmacy Service Representative, Care Management @ Fax: 203-639-0719, or call 1-800-440-5071, Option #2, for determination of medical necessity.
- When a non-formulary drug is prescribed, CHNCT will request information from practitioners. It is imperative that practitioners respond to these requests to ensure that members will continue to receive necessary medication.

All practitioners should have received a copy of the formulary. If you need additional copies, please call your Provider Relations Representative. The formulary is also available on the web at www.CHNCT.org. B.S./L.C.

ELIGIBILITY CONFIRMATION

There are several convenient ways to confirm eligibility for CHNCT members. The member should always present their CHNCT ID Card, which includes their member number. Eligibility may then be confirmed as follows:

- CHNCT Primary Care Providers may use their monthly roster which includes the member's name and identification number.
- CHNCT Member eligibility may also be confirmed for HUSKY A and HUSKY B members by contacting CHNCT Member Services at 1-800-859-9889.
- In addition, eligibility may be confirmed for HUSKY A members only, using the State of CT Eligibility Confirmation Line (1-800-824-8400) and your provider ID. You will access a Voice Response system that will guide you through your inquiry and will provide a confirmation number at the end of the call. Please remember, this is valid for HUSKY A members only. S.M.

REQUESTING SERVICES FOR LANGUAGE INTERPRETATION

All CHNCT contracted providers and practitioners have an obligation to ensure that any Limited English Proficiency (LEP) individual has meaningful and equal access to benefits, goods and services. Providers may contact CHNCT Member Services Department to access and/or request these services. A 72-hour notice must be given for interpretation services, except in the case of an emergency or urgent visit when a referral has been authorized for an immediate visit to any given practice.

For more information contact CHNCT Member Services at 1-800-859-9889.

T.S.

APPEALING CLAIM DENIALS

All appeals for claim payment denials must be received in writing within 60-days of the date of the remittance advice for the claim and must be sent to the attention of the Appeals Coordinator. Your appeal must identify each claim being appealed, the reason for the appeal and include all supporting documentation. CHNCT reserves the right to deny any claim appeal received more than 60-days after the date of the remittance advice for untimely filing.

K.W./K.M.