

St. Vincent's Medical Center Closure



St. Vincent's Catholic Medical Centers of New York closed its doors to the

inpatient units on April 30, 2010. Most of its outpatient clinics have closed or will close in the near future. Please be assured that NYPS SelectHealth has notified its members who were receiving services at St. Vincent's and has ensured that their care has been transitioned to other providers. If one of your patients has been receiving services at St. Vincent's Medical Center and you need assistance in identifying another NYPS SelectHealth provider, please contact Provider Services at 1-866-469-7774.

Quality Initiatives

2009 Internal Quality of Care Study

NYPS SelectHealth conducted a review of the literature and determined that identifying a member's true Primary Care Provider (PCP) is often found to be a moving target depending upon the definition of PCP. A managed care plan may identify a member's PCP to be one individual, but the member believes his/her PCP to be another. The misidentification of the PCP may lead to difficulties in appropriately coordinating the member's care.

As its 2009 Internal Quality of Care Study, NYPS SelectHealth attempted to identify the member's true PCP using an algorithmic evaluation of administrative data

including pharmacy and outpatient claims data. The PCP reflected in NYPS SelectHealth's system is the provider who appears in My Health Profile, the on line continuity of care document so it is important for the data to be accurate.

The member's and PCP's behavior as evidenced in the prescriptions written and filled as well as in the office visits made and kept provided a better indicator of the true PCP than the information gathered mostly at the time the member is enrolled in the plan. NYPS SelectHealth plans to apply this algorithm to its membership in order to ensure accurate tracking of its members' PCPs.

SelectHealth Network Update

SelectHealth has contracted with the following new providers:

Livery

- R&B Car Limo Service (servicing Brooklyn)
- All Around Trans Inc (servicing Brooklyn)

Radiology

- Third Avenue Open MRI (Bronx)
- Madison Avenue Radiology (Manhattan)
- Columbia University Radiology (Manhattan)

Provider Information

New Provider ID Numbers

Effective January 1, 2010, SelectHealth will be using the provider's National Provider Identifier (NPI) as the SelectHealth Provider Number. This will be a seamless transition and will not change any business practices. SelectHealth made this decision in order to streamline its operations.



Claims Inquiries

All claim inquiries should be directed to (800) 630-3717. When making an inquiry, please have the following information available:

- Provider's name and provider identification number
- Member's name and member identification number
- Date of service and date of claim submission

NYPS SelectHealth encourages the submission of claims electronically. If you need assistance in establishing the electronic process, please call (800) 630-3717 for assistance.

Referral Coordination

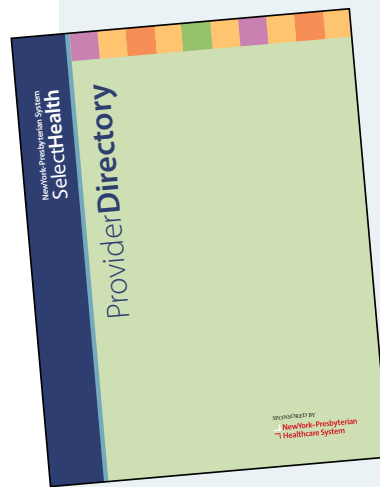


SelectHealth offers a referral coordination services.

This service is optional and intended to help you facilitate utilization of the

SelectHealth network of private specialty providers. If you wish to utilize this service, you may either fax a consultation request to SelectHealth at 212-404-4894 or call Member Services at 1-866-469-7774. Please include any relevant clinical information along with your request. The SelectHealth referral form can be found in the SelectHealth Provider Manual or on our website at <http://nyp.org/selecthealth/> under provider forms.

Provider Directory



SelectHealth has updated its provider directory. It is available for download on the SelectHealth website at:

<http://nyp.org/selecthealth/>

Hard copies are also available.

Please call

1-866-469-7774.

Provider Relations Representatives

If you have any questions concerning your relationship with NYPS SelectHealth, please call 1-866-469-7774 and ask to speak with a Provider Relations Representatives. The Provider Relations Team is available Monday through Friday from 9 AM to 5 PM.



Controlling Hypertension

Hypertension remains a considerable public health concern. Data from the National Health and Nutrition Examination Survey (NHANES) indicates that more than 50 million or more Americans have hypertension. Of these individuals, approximately 30% are unaware that they have hypertension and more than 40% are not on treatment. Of those on treatment, less than two thirds are considered adequately controlled (BP levels less than 140/90).

Hypertension is of particular concern for people living with HIV/AIDS (PLWHA) for a number of reasons.

In PLWHA with hypertension, blood pressure control is increasingly important because the consequences of uncontrolled blood pressure are amplified by the presence of a concomitant chronic disease (e.g. chronic kidney disease, cardiovascular disease, etc). As a Special Needs Program that coordinates care for members that are living with HIV/AIDS, giving members the resources to control high blood pressure is particularly important and the focus of NewYork-Presbyterian System SelectHealth's (NYPSH) 2010 New York State Quality Improvement Study. Hypertension is a multifaceted problem without a simple solution, however the goal of this year's Quality Improvement Study is to promote understanding of blood pressure control, to offer resources to members and providers, and to provide access within our network that may be useful to the treatment of



Hypertension among our members. Therapeutic strategies have developed which provide an evidence based approaches to the prevention and management of Hypertension. The benchmark of these strategies is the Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC 7). The website where it can be found is provided below.

<http://www.nhlbi.nih.gov/guidelines/hypertension/>

JNC 7 Highlights

- In those older than age 50, systolic blood pressure (BP) of greater than 140 mm Hg is a more important cardiovascular disease (CVD) risk factor than diastolic BP.
- Beginning at 115/75 mm Hg, CVD risk doubles for each increment of 20/10 mm Hg; those who are normotensive at 55 years of age will have a 90% lifetime risk of developing hypertension.
- Prehypertensive individuals (systolic BP 120–139 mm Hg or diastolic BP 80–89 mm Hg) require health-promoting lifestyle modifications to prevent the progressive rise in blood pressure and CVD;
- For uncomplicated hypertension, thiazide diuretic should be used in drug treatment for most, either alone or combined with drugs from other classes; this report delineates specific high-risk conditions that are compelling indications for the use of other antihypertensive drug classes (angiotensin-converting enzyme inhibitors, angiotensin-receptor blockers, beta-blockers, calcium channel blockers);
- Two or more antihypertensive medications will be required to achieve goal BP (<140/90 mm Hg, or <130/80 mm Hg) for patients with diabetes and chronic kidney disease;
- For patients whose BP is more than 20 mm Hg above the systolic BP goal or more than 10 mm Hg above the diastolic BP goal, initiation of therapy using two agents, one of which usually will be a thiazide diuretic, should be considered.

NYC Reach

The New York City Regional Electronic Adoption Center for Health (NYC Reach) is collaboration between the NYC Department of Health and Mental Hygiene and the Fund for Public Health in New York to help make sure doctors in New York City implement Electronic Health Records (EHR) in their practices.

Its mission is to assist medical providers in adopting EHR technology. NYC Reach helps to offset the transition cost and burden as much as possible through training, education, and links to funding sources. It also assists eligible providers in accessing incentives from federal, state or private programs.

NYC Reach can assist eligible providers in the following areas:

- How the Meaningful Use criteria for EHRs translate to better quality care for patients and improved public health.
- Who qualifies for up to \$63,750 in incentives and how to meet the federal criteria.
- Where to get assistance selecting, implementing, and using EHRs.

To get more information, please visit www.nycreach.org.

My Health Profile

My Health Profile provides a ‘snapshot’ of patients’ core medical information in a simple, concise format, 24-hours, seven days a week, via a secure website. The clinical ‘snapshot’ is based on an emerging standard for electronic health information exchange, termed the Continuity of Care Document (CCD).

My Health Profile is a great tool for assessing medication adherence! It provides a list of the last 50 medications a member filled. The list contains the following information: Drug name, Ordered By, Order Date, Days Supplied, Quantity, and Date Filled. This information is useful in assessing your patient’s medication adherence patterns as well as seeing who else may be prescribing medication for your patient.

