



Florida | Summer/Fall 2017

# practice**matters**



## **For More Information**

Call our Customer Service Center at **877-842-3210**

Visit **[UHCommunityPlan.com](http://UHCommunityPlan.com)**

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We hope you enjoy this edition of Practice Matters. In this issue, you can read about prior authorization for proton pump inhibitors, member rights and responsibilities, culturally competent care, and more.

## Prior Authorization Formulary Change for Proton Pump Inhibitor Medications

Effective Dec. 4, 2017, UnitedHealthcare Community Plan of Florida will begin requiring prior authorization after six months of utilization for all proton pump inhibitor medications (PPIs). If a patient who is a member requires continued therapy, please request prior authorization. The form can be found at [UHCommunityPlan.com](http://UHCommunityPlan.com) > For Health Care Professionals > Florida > **Pharmacy Program**.

Please contact the UnitedHealthcare Pharmacy Department at 800-438-3617 if you want a list of affected members.

Completed prior authorization requests can be faxed to 866-940-7328. You can also request authorization or direct questions to the UnitedHealthcare Pharmacy Department at 800-310-6826, Monday through Friday, between 8 a.m. and 6 p.m., Eastern Time.

## Member Rights and Responsibilities

As a reminder, the UnitedHealthcare Community Plan Member Rights and Responsibilities can be found in the Provider Manual at [UHCommunityPlan.com](http://UHCommunityPlan.com) > For Health Care Professionals > Florida > **Provider Administrative Manual**. Member Rights and Responsibilities are distributed to new members upon enrollment. On an annual basis, members are referred to their handbook to review their Member Rights and Responsibilities.

## Communication between PCPs and Specialists Is Key to Well-Coordinated Care

Primary care physicians (PCPs) and specialists share responsibility for coordinating care and communicating essential patient information on consultations, treatment plans and referrals. Lack of communication can negatively affect quality patient care.



Relevant information from the PCP to the specialist should include the patient's history, diagnostic tests and results, and the reason for referring the member to the specialist for a consultation. The specialist is responsible for timely communication of the results of consultations to the PCP, and ongoing recommendations and treatment plans.

Information exchange between care providers should be timely, relevant and accurate to facilitate ongoing patient management. The partnership between the PCP and specialist is based on the consistent exchange of clinical information, which is a critical factor in providing quality patient care.

## Reviews Help Ensure Members Receive Proper Care

UnitedHealthcare Community Plan performs concurrent reviews on inpatient stays in acute, rehabilitation and skilled nursing facilities, as well as prior authorization reviews of selected services. A listing of services requiring prior authorization is available online at [UHCommunityPlan.com](http://UHCommunityPlan.com) > For Health Care Professionals > Florida > **Provider Administrative Manual**.

A physician reviews all cases in which the care does not appear to meet guidelines. Decisions regarding coverage are based on the appropriateness of care and service and on existence of coverage. We do not provide financial or other rewards to our physicians for issuing denials of coverage or for underutilizing services.

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## Important information for health care professionals and facilities

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If a service is denied, the treating physician has the right to request a peer-to-peer discussion with the reviewing physician and a copy of the criteria used in the review. The denial letter contains information on how to request materials and how to contact the reviewer. Members and practitioners also have the right to appeal denial decisions.

Appeals are reviewed by a physician who was not involved in the initial denial decision and is of the same or similar specialty as the requesting physician.

### Get Updated Clinical Practice Guidelines

Clinical Practice Guidelines are available at [UHCCommunityPlan.com](http://UHCCommunityPlan.com). UnitedHealthcare Community Plan promotes the use of nationally recognized evidence-based clinical guidelines to support care providers in making decisions about health care. Guidelines are available for diabetes, asthma, perinatal care, preventive services, Attention Deficit Hyperactivity Disorder, depression and many other conditions.

To view a complete list of the most current guidelines, go to [UHCCommunityPlan.com](http://UHCCommunityPlan.com) > **For Health Care Professionals > Florida > Clinical Practice Guidelines**.

### A Member's Right to Culturally Competent Care

We work to try to identify gaps in care related to member's language and cultural needs. To help reduce those gaps and improve culturally competent care, we are reminding care providers that UnitedHealthcare Community Plan's members have a right to receive care that is culturally appropriate and respects their cultural and ethnic background and origins. Upon enrollment, information regarding a member's primary language is obtained and members may receive assistance in choosing a PCP who will meet their needs.

UnitedHealthcare Community Plan provides access to a language line for translation of communications for our non-English speaking members. The language line is available to help ensure that the cultural, ethnic and linguistic needs of our members are being met. If you need assistance in communicating with one of our members you may call customer service for assistance at 877-842-3210.

### Where to Get Pharmacy Updates

UnitedHealthcare Community Plan is required to use the Florida Agency for Health Care Administration's Preferred Drug List (PDL), including prior authorization and step therapy guidelines. Pharmacy updates are available at Link or by visiting [UHCCommunityPlan.com](http://UHCCommunityPlan.com) > For Health Care Professionals > Florida > **Pharmacy Program**, where you can find:

- A list of covered pharmaceuticals, including restrictions and preferences
- Pharmaceutical management procedures
- Explanations on limits
- How to submit and support an exception request
- Generic substitution, therapeutic interchange and step-therapy protocols
- Educational resources related to drug utilization review programs and statistics

If you have questions or need assistance related to pharmacy, you may call Provider Services at **877-842-3210**. Remember to get a tracking number for future reference. You may also visit the website at [UHCCommunityPlan.com/health-professionals/fl/pharmacy-program.html](http://UHCCommunityPlan.com/health-professionals/fl/pharmacy-program.html).

## Case Management Program

The UnitedHealthcare Community Plan Case Management program is a holistic approach to care for members with complex needs, especially those with chronic conditions. The goal is to keep our members in the community with the resources necessary to maintain the highest functional status possible.

Here's what our case managers can provide to your eligible patients:

- Telephone contact with members and home visits as needed
- Condition specific programs such as diabetic disease management and our maternity program, Healthy First Steps
- Health education and educational materials
- A health assessment with stratification of diagnosis and severity of condition and psychosocial needs
- Referral to community resources as needed
- Assistance with medical transportation
- Arrangements for durable medical equipment and ancillary services
- Outreach to members to help them keep appointments
- Work with members to identify and address barriers to seeking health care and following their medical treatment plan of care.





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Practice Matters is a quarterly publication for physicians and other health care professionals and facilities in the UnitedHealthcare network.

