

Providers rewarded for timely IHAs

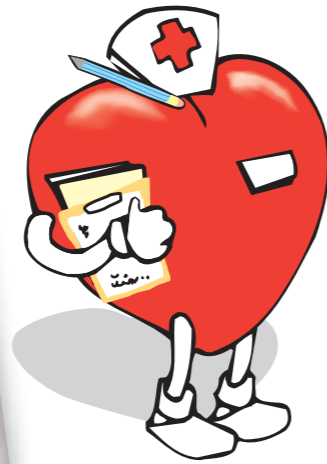
Patients are required to have an Initial Health Assessment (IHA) within the first 120 days of becoming a member of Kern Family Health Care.

In the case of children members under 18 months of age, the IHA needs to be done within 60 days of becoming a Kern Family Health Care member.

In an effort to assist providers in identifying members who need an IHA, we identify new members on your Monthly Member Lists. When you receive your Monthly Member List,

the first thing you should do is single out all members who have an "X" by their name. These are the members you need to be contacting for an IHA.

We recognize that you won't be able to get each member in for an IHA within the 120-day timeframe. However, it is very important that you document your efforts. *Kern Family Health Care will be evaluating compliance with this requirement as part of the PCP Quality Incentive Pool Distribution for 2004 contract year.*



Focus Review: Let's stay focused on QUALITY...

Kern Health Systems has a contractual obligation with the State to do a site review on each contracted PCP office once every three years. Due to the extended time between each site review, KHS will be visiting your offices at least one time during the three-year period to perform a focus review.

The review is an opportunity for KHS to assist you in remaining focused on the requirements of the site tool and of managing our members' care. In particular, we will be reviewing areas that needed improvement during the previous site visit as well as reviewing critical elements of the site tool. In addition, the KHS Quality Improvement (QI) Department also will be looking at medical records to ensure compliance with quality indicators as required by your contract with KHS. If you have any questions regarding the review, you may contact the manager of Quality Improvement at (661) 664-5111.



PROVIDER news

August 2004

Save the Date !!!

MANDATORY PRIMARY CARE PROVIDER FORUM

Kern Health Systems will be holding three provider forums in the month of October. It will be mandatory that each PCP attend one of the three forums in order to be eligible to participate in the Quality Incentive Pool for contract year 2005. The dates are as follows:

- October 5, 2004**
Breakfast Meeting
- October 7, 2004**
Lunch Meeting
- October 12, 2004**
Dinner

KFHC DIVA Eligibility Verification Line

Remember that KFHC's DIVA phone number (eligibility verification) is (661) 664-5185. Effective September 1, 2004, our old toll-free DIVA number (1-800-391-0020) will be cancelled. Please update your records today. Thank you for your cooperation!!!!

Recommend Immunizations, Vaccinate Adults

Today in the United States some 40,000 American adults die of diseases that could have been prevented by routine adult vaccinations. This number represents the same number of persons dying from traffic accidents annually.

In a statewide effort to save lives, all Medi-Cal primary care providers are now mandated to assess adult immunization status and provide vaccine coverage as needed. Kern Family Health Care has the duty of assuring that these preventive services are administered.

Requirements can be found in the "Recommended Adult Immunization Schedule" published by the Centers for Disease Control and Prevention. Kern Family Health Care has adopted these guidelines for administration and reimbursement purposes. It is revised as needed and can be referenced easily via the internet at www.cdc.gov/nip.

Primary to the success of any initiative is what transpires at the point of contact. Studies have shown that a clear recommendation to the patient by a health care provider, even those who are hesitant to receive immunizations, result in compliance in 85-90 percent of cases. Through reassurance and education, these numbers should improve.



KFHC will continue to monitor rates through our on-going medical record reviews. Momentum is building as this problem is being addressed at several levels. Through institutional support, provider empowerment and patient education, history indicates that this issue will improve.

We are committed to improving the quality of health care for our members through support of our providers. We offer educational materials and resources through our Quality Improvement Department. We encourage any questions or comments from providers or staff members. Please call (661) 664-5113

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Staying Healthy Assessments: *Agony or ecstasy!*

Avoid the agony of a corrective action by taking steps to comply with the Staying Healthy Assessment requirement. The following steps make compliance easy...

Step 1. Contact Kern Family Health Care to obtain the appropriate age and language forms for your patients.

The forms are divided by ages 0-3, 4-8, 9-11, 12-17 and 18 and over. They are also available in Spanish. Please let us know if you have other language needs for your patients. Forms can be obtained by calling the Health Education Department at (661) 664-5108.

Step 2. Have the appropriate form completed by the patient or parent while they wait to be seen.

Parents or legal guardians should complete the form for members under the age of 11. Members 12 years old and over can complete the form on their own. Please be sensitive and offer assistance to lower literacy patients who cannot read. If reading or interpretation assistance is provided, check the appropriate box in the "Assistance needed:" section.



Completing the form is voluntary. Members have the right to refuse to complete the form. If this is the case, you must document patient refusal in the medical record.

Step 3. Review the patient responses and provide any necessary interventions.

Appropriate interventions include, counseling, educational materials, referrals or subsequent follow-up. Intervention codes are found at the bottom of each form (C: counseling, EM: educational materials, R: referral, F: follow-up or SPN: See progress notes.). Always date and initial after each intervention documented. Remember that the Health Education Department is available to provide assistance with non-medical patient referrals. In addition, we have many health education materials available to provider offices.

Step 4. File the completed Staying Healthy assessment in the patient's medical record.

Note that all patient records are confidential. The adolescent form (12-17), in particular, must be protected under confidentiality laws for minors.

Step 5. Review the form at the patient's subsequent visits for follow-up or counseling.

At a minimum the form should be reviewed annually with the patient. Make sure to date and initial the "Annual Review" section of the form as documentation.

Step 6. Re-administer the form at the appropriate age intervals.

As the patient passes on to the next age category a new form must be completed. The form only needs to be re-administered once per age group. It is, however, recommended that adolescents be surveyed annually. Adults should be re-assessed every five years.

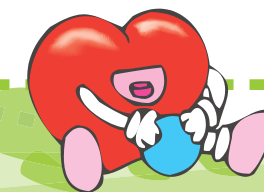
All primary care providers are required to administer this form with their Medi-Cal Managed Care patients.

This is a contractual requirement initiated by the state Department of Health Services effective as of March 1, 2000. Facility site reviewers will be checking the patient's medical record for the completed Staying Healthy form and appropriate provider notations. Any patient seen in your office since March of 2000 should have a completed Staying Healthy form in their medical record. New Medi-Cal members must have a form completed along with their 120 Initial Health Assessment. Existing members should be assessed at their next appointment if they do not already have a completed form in their medical record or if they have entered the next age category.

To schedule an in-service, or if you have any questions please call the Health Education Department at (661) 664-5107. We are here to help!



What is Early Start ???



Early Start is a program within Kern Regional Center.

It is targeted for children between the **ages of 0-36 months**, where conditions known to lead to developmental delay are present, significant developmental delay is suspected, or the child's early history places them at risk for delay.

Counseling, case management,

and community support are some of the services available to Kern Family Health Care members through Early Start. Kern Health Systems encourages its providers to refer to the Early Start Program when necessary. No authorization is required from KHS for non-medical services. However, for purposes of tracking and follow-up, plan providers

should notify KHS of all referrals to the Early Start Program.

Kern Regional Center also has services available for **KFHC Members over the age of 36 months. Referrals may be initiated by calling the Kern Regional Center Intake Coordinator at (661) 327-8531, ext. 220.**