

## CAPSULE

### Updated Fee Schedule

HealthLink has updated its fee schedules with rates and proprietary Grouper Methodology for the 2010 CPT codes. These rates will be effective April 1, 2010. For more information, please contact your Network Consultant.



### Sign Up for

#### ProviderInfoSource!

ProviderInfoSource allows registered HealthLink contracted providers to access secure information about claim status, member eligibility and payor information. Check out the article on page 2 for details.



### Provider Administrative Manual Available Online

HealthLink's online administrative manual for providers is your source for information about HealthLink processes, procedures and standard specifications. For more information, visit [www.healthlink.com/manual\\_provider.asp](http://www.healthlink.com/manual_provider.asp).

# IN-TOUCH

PHYSICIAN UPDATE

PREPARED BY HEALTHLINK FOR PARTICIPATING HEALTH CARE PRACTITIONERS

2nd QTR 2010

## Preventive Care: A National Imperative

*From the August 2007 study "Preventive Care: A National Profile on Use, Disparities and Health Benefits" sponsored by the Centers for Disease Control and Prevention, The Robert Wood Johnson Foundation and the WellPoint Foundation. To read the full report, go to: [www.prevent.org/content/view/129/72/](http://www.prevent.org/content/view/129/72/)*

Utilization rates remain low for preventive services that are very cost effective and have been recommended for years. Increasing the use of just five preventive services would save more than 100,000 lives each year in the United States.

- 45,000 additional lives would be saved each year if we increased to 90 percent the portion of adults who take aspirin daily to prevent heart disease. Today, fewer than half of American adults take aspirin preventively.
- 42,000 additional lives would be saved each year if we increased to 90 percent the portion of smokers who are advised by a health professional to quit and are offered medication or other assistance. Today, only 28 percent of smokers receive such services.
- 14,000 additional lives would be saved each year if we increased to 90 percent the portion of adults age 50 and older who are up to date with any recommended screening for colorectal cancer. Today, fewer than 50 percent of adults are up to date with screening.

- 12,000 additional lives would be saved each year if we increased to 90 percent the portion of adults age 50 and older immunized against flu annually. Today, 37 percent of adults have had an annual flu vaccination.
- 3,700 additional lives would be saved each year if we increased to 90 percent the portion of women age 40 and older who have been screened for breast cancer in the past two years. Today, 67 percent of women have been screened in the past two years.
- Breast and cervical cancer screening rates were lower in 2005 compared to five years earlier for every major racial and ethnic group: White, Hispanic, African American and Asian women all experienced declines.
- 30,000 cases of pelvic inflammatory disease would be prevented annually if we increased to 90 percent the portion of sexually active young women who have been screened in the past year for chlamydial infection. Today, 40 percent of young women are being screened annually.

*WellPoint's medical policy on Preventive Health Guidelines considers preventive services medically necessary if approved by any of several different organizations including the American College of Obstetrics and Gynecology (ACOG), the American Cancer Society (ACS) and the US Preventive Services Task Force (USPSTF).*

### PHYSICIAN SPOTLIGHT

## Meet Dr. Wahied Gendi, Internist



Wahied Gendi, MD

Wahied Gendi, MD practices adult primary care/internal medicine for patients from age 16 through the senior years.

Before joining SSM St. Charles Clinic Medical Group, Dr. Gendi worked as a hospitalist at SSM St. Joseph Health Center/Hospital West. Prior to completing his residency at Saint Louis University, he spent three years as a postdoctoral scholar at the University of Alabama at Birmingham where his work

included projects funded by the National Cancer Institute. Dr. Gendi received his medical degree from the University of Alexandria and practiced internal medicine and pulmonology in Egypt for 14 years before coming to the United States. He is now an American citizen.

"My background includes traditional training in the field of internal medicine as well as years of hands-on experience in applying that knowledge. This combination provides me with the necessary means to treat my patients' various illnesses," said Dr. Gendi. "I look forward to using my capabilities as a member of the St. Charles Clinic Medical

Group in caring for patients, preventing future illnesses, and building lifelong relationships that will allow me to provide better care for each individual person."

Dr. Gendi's hobbies and interests include chess, soccer, computer software and spending quality time and traveling with family and friends. He welcomes new patients.

*The St. Charles Clinic Medical Group offers primary care and specialty services throughout St. Charles County and in Warrenton and Troy, MO. For more information, please visit [ssmdrs.com](http://ssmdrs.com) or call 636-669-2444.*

## ProviderInfoSource: Don't Miss Out on This Valuable Tool

ProviderInfoSource enables HealthLink contracted providers to access secure information about claim status, member eligibility and payor information. Users can:

- ✓ Self-register for secure access to the system and may administer the access of others within their organizations;
- ✓ Determine the status of a claim, resubmit a re-priced claim and verify patient eligibility;
- ✓ Send questions and/or requests to HealthLink via secure mailbox;
- ✓ Update physician/facility contact information;
- ✓ Download and/or print the *In-Touch* provider newsletter, standardized forms and policy manuals; and
- ✓ Access payor contact information.



### Coming Soon! System Enhancements

HealthLink is pleased to announce the following ProviderInfoSource enhancements, coming soon to better serve your needs:

- ✓ Increased security – better privacy protection for you, all users and HealthLink members. **Administrators, now is a good time to verify all users' access within your organization. For security purposes, if a user has not logged in over a period of 30 days, the account is automatically locked.**
- ✓ “Find a Payor” feature – more comprehensive to better assist in claims resolution.

### Help HealthLink Go GREEN!

To help us with our continuing efforts to GO GREEN, please register today for full access at:

<http://providerinfosource.healthlink.com>.



## Meet Your HealthLink Network Consultant Team

HealthLink has been a provider-driven organization from the start. Our corporate objectives reflect our commitment to meeting the customer and administrative service needs of the health care professionals and facilities that comprise our network.

HealthLink's highly skilled Network Consultants offer both telephonic and on-site support to participating providers. Network Consultants provide orientation to new benefit programs and assist with navigation of provider web tools and electronic applications. They are instrumental in addressing complex inquiries and facilitating resolution for provider concerns.

To locate your HealthLink Network Consultant, please visit the HealthLink website: [www.healthlink.com](http://www.healthlink.com). Click on the “Network Consultants” link on the Physicians/Hospitals home page.

*Top photo: Illinois Network Consultants*

*Left to right – Cathy Baack, Steve Yarck, Danielle Freeman, Billy Levy, Donna Free-Wiese, Patricia Martin*

*Bottom photo: Missouri Network Consultants*

*Left to right – Lynn Schleper, Carrie Nevills, Derek Billups, Shantel Hollins, Kristin Golden, Trina Falls, Karen Harris, Leslie Kenedy, Marsha Caldwell, Heather Barret*

*Not pictured: Jacqueline Hammond, Pam Ingram-Townsend, Holly Jarvis, Sonya Patterson, Diane Shipley, Dale Evans-Blackmon*



## Overview: American Recovery and Reinvestment Act of 2009 (ARRA)



ARRA, often referred to as the Stimulus Act, is federal legislation that was signed into law by President Barack Obama on February 17, 2009. The legislation includes a substantial allocation for health information technology (HIT), or electronic health records, intended as a measure to help reduce the cost of health care.

The U.S. Congress believed that it was important to enhance individual privacy rights within the Stimulus Act, in order to help offset the perceived risk that is associated with electronic medical records and other HIT

programs. As a result, this new law carries significant changes to health information privacy practices.

ARRA includes:

- A COBRA premium subsidy program;
- New HIPAA privacy provisions and security requirements;
- Disclosure requirements for entities using Electronic Health Records (EHRs).

By definition, ARRA requirements apply to health plans, health care clearinghouses and health care providers who receive, maintain, or disclose individually identifiable health information in any form or medium. Under this regulation, certain HIPAA privacy and security obligations applicable to covered entities also apply to business associates.

### Privacy Provision: Security Breach Notification

ARRA creates a federal requirement to immediately notify each individual whose unsecured PHI is the subject of a breach, or is reasonably believed to be subject to a breach. And as appropriate, breaches are to be reported to the Group Health Plan affected by

the breach, the Secretary of Health and Human Services (HHS) and in some instances, the local news media.

The term “breach” is defined as an unauthorized acquisition, access, use or disclosure of PHI which compromises the security or privacy of the PHI, with limited exceptions.

It involves disclosure of PHI to an unintended recipient, including for example, such data as Social Security number (SSN), name, date of birth, diagnosis, address, and/or credit card information.



According to ARRA:

- The notification must be made within 60 days of the actual discovery of a breach
- Or within 60 days of when the breach should have been discovered.
- If a breach impacts 500 or more individuals, the Secretary of HHS must be notified. If 500 or more residents of a particular state or jurisdiction are involved in the breach, notice must also be made to prominent media outlets.

HealthLink has adopted and, where applicable, expanded its existing privacy and security protocols to meet the requirements of ARRA legislation.

*Article Source: [www.wellpoint.com](http://www.wellpoint.com)*

### CODING CORNER

**Q. When billing an injection of hyaluronan or derivative (i.e. Supartz, Orthovisc), we bill the injection with code 20610 (injection, major joint or bursa) with the appropriate anatomic modifier (RT, LT, or 50) along with the code for the medication (J7321-J7324). Should we also use the anatomic modifier on the code for the medication?**

A. An anatomic modifier such as RT, LT, or 50 may be used on 20610 to provide additional information on where the injection occurred, but should not be used with the HCPCS codes for the drug itself. Medications do not have an anatomic component and should be billed with the appropriate number of units to reflect the total dosage injected for that day of service. Use of an anatomic modifier with J codes is not needed and may delay the processing of the claim.

*If you have a coding issue you would like to see addressed in this column, please contact your Network Consultant.*

*Any information included in this newsletter is not intended to be a substitute for medical care or advice provided by a physician. Any reference in the material to other organizations or companies, including Internet sites, is not an endorsement or warranty of the services, information or products provided by those organizations or companies. HealthLink does not assume responsibility for any circumstance arising out of the use, misuse, interpretation or application of any of the information in this newsletter.*

### DO WE HAVE YOUR CURRENT INFORMATION?

*Have you relocated? Going into solo practice? Do you have a new tax ID number?*

Please be sure to inform us of these types of changes as soon as possible. You can contact your Network Consultant or visit HealthLink’s website, [www.healthlink.com](http://www.healthlink.com), to update your information. From the main menu, go to the “Providers” home page and in the “Forms and Manuals” section, click on the “Physician Address/Name/TIN/NPI Change Form.” If you are moving to a new practice, be sure to include both your former practice and new practice TINs.

Please note that failure to notify HealthLink of these changes could result in claim processing delays as the payor verifies current information.

*HealthLink®, Inc. is an Illinois corporation. HealthLink, Inc. is an organizer of independently contracted provider networks, which it makes available by contract to a variety of payors of health benefits, including insurers, third party administrators or employers. HealthLink has no control or right of control over the professional, medical judgment of contracted providers, and is not liable for any acts or failures to act, by contracted providers. HealthLink, Inc. is not an insurance company and has no liability for benefits under benefit plans offered or administered by payors. HealthLink® is a registered trademark of HealthLink, Inc. and a separately incorporated and capitalized subsidiary of WellPoint, Inc.*

## Welcome to *IN-TOUCH!*

IN-TOUCH is published by HealthLink specifically for participating physicians, hospitals and other health care professionals. Our goal in creating IN-TOUCH is to bring HealthLink and participating providers closer together by providing information that will be helpful to you and your staff. We welcome your ongoing feedback.

### IN-TOUCH ROUTE LIST

*Route among your staff.*

- ▶ Dr. \_\_\_\_\_
- ▶ Dr. \_\_\_\_\_
- ▶ Office Manager
- ▶ Claims Administrator
- ▶ Marketing Director

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## IN-TOUCH

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# IN-TOUCH

# Go Green with HealthLink



## NOTICE

HealthLink has postponed our January 1, 2010 Go Green launch. We would like to hear how you would like to receive newsletters, manuals and other communications from HealthLink.

### Internet Access

To access documents such as our newsletters, manuals and secure information about claims status, member eligibility and payor information, please log on to:

***[www.providerinfosource.com](http://www.providerinfosource.com)***

**If you do not have Internet access, please supply the following information and mail this form to HealthLink:**

Office Name/Provider Name \_\_\_\_\_

Main Office Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Tax ID Number \_\_\_\_\_

NPI Number \_\_\_\_\_

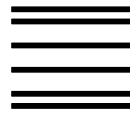
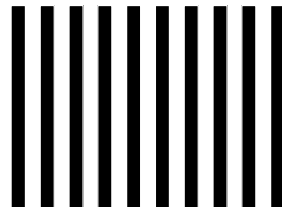
Please fax to: Attention - Network Consultants, 314-925-6627

**Going Green Helps Save the Earth.  
Thanks for your help in this initiative!**



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