NETWORK NEWS

HEALTH FIRST NETWORK (HFNI) EXPANDS NETWORK
In 2009, Health First Network added 66 new physicians to the network bringing the total number to 592. That number represents 56 different specialties.

In response to a contract need for Healthspring Medicare, Health First Network added two new specialties, Chiropractic and Podiatry to the network.

HEALTH FIRST NETWORK PROVIDER SURVEY RESULTS
Every year or two, Health First Network does a performance survey to determine, well, how the organization is doing in regards to serving its members. We are pleased to share this year’s results, which continue a positive response. First, Network leadership is encouraged by the percentage of people who read the Connect eNewsletter– 86 percent of respondents.

Next, use of the HFNI website (www.hfni.com) is on the rise with 86 percent of survey participants indicating they visit the site. While our hope is that number continues to grow, we are excited that the website is attracting visitors.

As for HFNI’s performance, here are the results:

Administration:
- Calls are returned promptly and to your satisfaction: 94 percent strongly agree or agreed
- Staff is courteous and helpful: 98 percent strongly agree or agreed

Provider Relations:
- Staff is knowledgeable of HFNI operations: 88 percent strongly agree or agreed
- Adequate written information regarding Health First Network is available: 88 percent strongly agree or agreed
- Calls are returned promptly and to your satisfaction: 96 percent strongly agree or agreed
- Staff is courteous and helpful: 98 percent strongly agree or agreed

Credentialing:
- Process is effective: 80 percent strongly agree or agreed
- Staff responds to requests in a timely manner: 84 percent strongly agree or agreed
- Staff is courteous and helpful: 88 percent strongly agree or agreed

We offer a big thanks to everyone who participated in the survey. The more feedback we receive, the better we are positioned to deliver on our commitment to service.
MEDICAL MANAGEMENT

Health First Network’s Medical Management Programs are structured for efficiency of services and resources, compliance with evidence-based guidelines, accountability, and the development of systems to determine which services are consistent with medical appropriateness. Program goals are designed to continuously monitor, evaluate, assess, and manage the cost and quality of healthcare services delivered to all members of contracted healthplans.

CASE MANAGEMENT

Case Management is a vital, collaborative process of assessment, planning, facilitation, and care coordination. Nurse Case Managers work with the Primary Care and Specialist Physicians and all members of the healthcare team through communication and available resources to promote quality cost-effective outcomes.

Nurse Case Managers are assigned specific members to assist them with various needs, including obtaining medications, assistive devices, locating community services and resources and providing education regarding their disease process. Case Management services are coordinated with the PCP office in order to avoid any duplication of services as well as to keep the PCP informed of any identified issues.

The Case Management Department implemented Disease Management Programs in 2009 to offer additional assistance and education to the members with a new diagnosis of a chronic disease or a medically complex disease. The following Disease Management Programs are available to the WellCare members: Diabetes, Congestive Heart Failure (CHF), Coronary Heart Disease (CAD), Chronic Obstructive Pulmonary Disease (COPD), Asthma and Complex Disease Management. Case and Disease Management Programs done locally are key to establishing an effective patient-centered medical home with coordination of care.

To refer a WellCare member to Case Management contact the MED3000 Case Management Coordinator at 478-6060, ext 3231.

CASE MANAGEMENT NUMBERS

301 members in HealthEase Case Management prior to contract term date of August 31, 2009.

600 members in WellCare Case Management.

100 members in WellCare’s D-SNP Program.

QUALITY MEASURES AND QUALITY REPORTING

PQRI and HEDIS will form the backbone of standards for quality scoring and quality linked reimbursement incentives. HFNI has developed and is implementing a program to accurately capture our compliance both as physicians and as an organization, and provide an additional level of financial incentive to our PCP’s based on that compliance.
CHANGES TO THE REFERRAL PROCESS
To assist offices in becoming more efficient in the delivery of health care services to their managed care members, Health First Network, made changes to the referral process in late 2008 and early 2009. These changes reduce unnecessary workload and free up time in both Primary Care and Specialist offices. Pre-Authorization requirements were removed on a number of services and PCP to Specialist Referrals were extended to 12 months/12 visits.

PREDICTIVE MODELING
Predictive Modeling is an accurate and powerful tool that has redesigned Health First Network medical management and case management processes. It has become integral to the medical management and case management programs; it is integrated into our weekly clinical, interdisciplinary rounds, and is used in overall population based management and individual member’s needs. Predictive Modeling statistical modeling capabilities include Data Reports and Case Studies allowing RN’s to make early contact and interventions with potentially high risk members before events involving high medical expense occur. This has had a positive impact for the Network, and going forward will allow us to move effectively from individual case management to population management, both of which are important to the health care delivery system, no matter what it looks like.
Benefits obtained through the use of advanced Predictive Modeling systems include all of the following:
• “High risk” members are identified early and aggressively;
• Their cases are discussed by a team of healthcare professionals through a cohesive, interdisciplinary process, and,
• When determined to be appropriate, the members are matched with a case manager who ensures “patient-centered” interventions to ensure that appropriate care and member education is delivered by accessing the most efficient resources.
• Predictive modeling provides a sound statistical methodology stratifying members who require immediate or ongoing care coordination and interventions.
• Predictive modeling has helped to decrease the cost of care per member, in great part by reducing inpatient admissions and emergency room visits.

CODING FOR APPROPRIATE REIMBURSEMENT
With the addition of a Certified Coder to the staff of Health First Network, the Medical Department offers the services of an experienced, certified coder to assist offices with educational needs and the capture of correct codes for appropriate reimbursement and risk-adjusted payments. On-site office visits are scheduled and the coder provides a detailed summary of results with suggestions for improvement for capturing appropriate diagnoses codes for Medicare members.

CREDENTIALING OF PROVIDERS
During 2009, the HFNI Credentialing Department was moved under the auspices of the Medical Department. Previously, credentialing activities had been directed by the Provider Relations Department.
**PRODUCTS**

Health First Network manages a variety of products and services through contracts with several Healthplans. Health First receives a portion of the premium to pay claims and manage the portion of the business for which they have taken financial responsibility.

**Vista/Coventry**

As of December 31st, there were 6,300 members with this healthplan. HFNI manages the professional portion of the premium.

**Vista Healthy Kids**

There are currently 3,400 Healthy Kids in this Vista product. Again, HFNI manages the professional portion of the premium.

**WellCare Medicare Advantage**

HFNI is responsible for the total management of these members. The plan had 5,200 members as of December.

**HealthSpring Medicare Advantage**

This was a new product for HFNI and the market in 2009. The healthplan had a very successful start up year producing almost 600 members. HFNI manages the professional portion of the premium.

**HealthEase Medicaid**

On August 31, 2009 HFNI no longer had an HMO Medicaid product. After much discussion, HFNI reached the decision to terminate the Medicaid contract with HealthEase.

HealthEase subsequently decided to exit this market in our service area. We would like to point out that the problems with this product centered around the funding from the State of Florida. The state was simply not giving the participants, HealthEase and HFNI, enough money to make the product feasible.

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**HFNI COMMUNITY INVOLVEMENT**

In 2009, HFNI continued its involvement in various community initiatives. These include:

- Employees participated in the United Way Day of Caring. The Day of Caring is a one-day, community-wide event that utilizes individuals from various businesses and military commands to administer an assortment of volunteer projects at non-profit agencies and schools in our community. HFNI’s task this year was a reading session at WeeKare Academy.

- Employees of HFNI not only supported the Pensacola Senior Olympics but several of the employees participated, winning medals in varied competitions.

- The Board of Directors of HFNI seeing the drastic need for medical services to the uninsured and poor made contributions to the three free clinics in our area; Health and Hope Clinic, St. Joseph’s and Good Samaritan Clinic.

- Additionally, employees of HFNI offered their expertise to both the United Escambia Community Collaborative Health Solutions team and the Escambia County School’s Health and Wellness Advisory Council.
Realizing that the website is an important communication tool, HFNI has enhanced the website to provide easier navigation and expanded access to information.

Users have the ability to access:

**Network News**
Covering aspects of our business that are important to our providers

**Provider Directory**
List of all HFNI Network physicians

**Provider NPI Numbers**

**New Physicians Joining the Network**
List of new physicians joining HFNI

**Provider Manuals**
Features copies of the HFNI Provider Manual and Credentials Policies and Procedures manual

**Physicians Resources & Education**
Provides links to websites offering free or fee-based CME courses for physicians

**Practice Resources**
Products and services that may assist physician practices

**Health Resources**
Provides links to various websites for clinical health and disease management information.

**Reference Sheets by Healthplan**
Includes formularies, ancillary list, authorization requirements, referral forms and other forms specific to the healthplan

**Commonly Used Forms**
School district forms, School guidelines, and Commercial drivers physical examination form

**Memo’s and Red Letters**
Copies of important notices from HFNI

**Online Provider Changes/Updates Form**
Address changes, billing changes, tax id number changes, etc. can now be completed and submitted online

**Coding Tips**

**Updates from Dr. Whibbs**
Informational Articles written by the HFNI Medical Director

**Contact Information**

The continuous reform of our website is a key part of our commitment to support and be a resource to our physicians and their offices. We invite you to explore some of the new features in detail.

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**eINFOsource log In**
Link to view member’s eligibility, co-pay requirements, submit a referral request, view claims status, etc.

**eINFOsource Training Manual**
Manual describing the various features and functions of eINFOsource

**eINFOsource Training Module**
Series of training modules taken at a self-directed pace

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“Advances in computer technology and the Internet have changed the way people work, learn, and communicate. The Internet has become an integral part of our society.”

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www.hfni.com
HEALTH FIRST NETWORK IS:

**LOCAL.** A gateway to excellence. Proven.

Family Practice. **Powerful.** Specialized Care.


**Community-Oriented.** A resource. A Sounding Board.

Wellness. Integrated Medicine. **Caring.** Care Coordination.


A WEB OF GOOD HEALTH