



IMPERIAL PROVIDER NEWSLETTER

WINTER 2023

IMPERIAL HEALTH
1100 E. GREEN



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MISSION

Deliver valuable care so our members are healthy in body, mind, and spirit to achieve their inherent potential.

VISION

Deliver value-based care that is clinically effective, sustainable, and achieves exceptional outcomes.

Message from Dr. David Liu

Hello,

As we move into the holidays, I want to offer my warmest wishes and thanks to you for providing excellent care to our members. Currently, and moving forwards, Imperial is working towards more effectively measuring the quality of care that our members receive. Because in the end, beyond the CMS measures, quality means treating patients the way we would want our own families to be treated. And with the true meaning of the holidays being in our relationships, it is appropriate that we are emphasizing quality.

- **HEDIS/Wellness Visits:** For the remainder of 2023, please ensure that your members fill any remaining HEDIS gaps, and have their Annual Wellness Visit, if not previously completed. Also remember to recapture any open HCC gaps. We are in the process of implementing Cozeva as our Quality and Risk reporting tool, which will make identifying and completing gaps much easier.
 - Ensure your billers include supplemental tracking codes, like CPT-II codes, to reflect a total picture of the member’s visit and avoid calls for medical records to close gaps.
- **Flu vaccines:** Do remember to remind your patient to get a Flu shot.
- **Physical Activity:** Discuss the importance of activity to a general sense of wellbeing. If members are interested, they can avail themselves to the services of our vendors at Silver and Fit.
- **Fall Prevention:** Falls are a major source of morbidity in the elderly. Discussion around preventing falls, strengthening, home safety evaluation can help mitigate this risk. Consider a home safety evaluation through our Utilization Department.
- **Urinary Incontinence:** Patients can benefit from and appreciate general information around incontinence management. Consider discussing Kegel exercises, referral to a urologist and education around incontinence products through our over-the-counter benefit.

For each month of 2024, we will have a particular quality focus, ranging from cervical cancer screening in January, child and adolescent immunizations in August, and diabetes control in November. For each month, we will provide training, and at any time are available to provide technical assistance as well. The training will include CAPHS and documentation improvement. For some of these quality metrics, member incentives are available as well; members will be able to check their quality metric completions and incentive eligibility on the member portal.

Additionally, we have begun a virtual clinic, including a chronic disease management program, including cardiovascular disease and asthma/COPD. In each of these programs, we will be using evidence based clinical practice guidelines to assist members with the management of their disease states.



David MKI Liu,
MD, FACP, FAAP, FASAM
Chief Medical Officer



Imperial has also partnered with Story Health, a cardiovascular health provider, to provide care for patients with cardiovascular disease. You will receive clinical notes from any services provided by Imperial. We will be working with you, our providers, to optimize the management of the disease states, improving quality of life and the overall health of our mutual patients.

To your health,

David MKI Liu, MD, FACP, FAAP, FASAM



Pharmacy Benefit Manager (PBM) Change for 2024

This is to inform you of an upcoming change in our pharmacy benefit manager (PBM) that will be effective from **January 1st, 2024**. We are excited to introduce a new PBM that will bring numerous benefits and improvements to our network. At Imperial we continuously strive to enhance the quality and efficiency of our services. After careful consideration and evaluation, we have selected **MedImpact** as our new PBM partner. This change is aimed at providing our valued providers with enhanced tools, resources, and support for delivering exceptional patient care. The transition to **MedImpact** will introduce several positive changes in our pharmacy services. These changes include streamlined prior authorization processes and advanced reporting capabilities that we feel will help our members receive their needed medications in a timely manner.

We believe that these enhancements will enable you to better serve your patients and simplify administrative processes. We understand that transitions can bring uncertainties. We have meticulously planned the transition process to minimize any disruptions to your practice. We will provide comprehensive training sessions to familiarize you with the new PBM's processes, tools, and systems. Additionally, our dedicated support team will be available to address any questions or concerns you may have throughout the transition period.



We encourage you to reach out to our support team by phone at **(626) 788-0178** or by email at **Pharmacy@imperialhealthplan.com** for any assistance or clarifications during this transition.

Your feedback is highly valuable to us, and we welcome any input you may have to ensure a seamless experience for you and your patients. We sincerely appreciate your partnership and the exceptional care you provide to our members and believe that the change in PBM will further strengthen our collaboration and improve patient outcomes. Thank you for your attention to this important matter. Should you have any questions or concerns, please do not hesitate to contact us.



STARS Measure – Medication Adherence



As we are nearing the end of 2023, the Pharmacy Services Department at Imperial wants to focus and emphasize our efforts on our members and their adherence to medications. Medication adherence is vital to the overall health and wellness of our patients. Poor medication adherence for chronic conditions often can negatively impact clinical outcomes, quality of life, and lead to higher rates of readmissions. Together, we want to create a plan to improve and achieve the greatest level of adherence.

How do you make an impact on medication adherence?

- As a reminder, our plan offers 100-day supply on most maintenance medications. Utilization of this pharmacy benefit can significantly reduce both trips to the pharmacy and cost in certain situations.
- Clearly communicate with and educate your patients regarding what their medications are for and why they are important to take on a regular basis.
- Involve family members and caregivers in treatment plans, especially for elderly patients.
- Save the patient money by prescribing Tier 1 and Tier 2 medications.

You can find the Part D formulary list by going to:

1. <https://imperialhealthplan.com>
2. Select your state and county.
3. Scroll down the quick links and under “Prescription Search” select the Plan Benefit Package.



You might hear from our team on a regular basis regarding your patients’ medications. Please help us by responding to our requests so that we can keep our members adherent. We invite you to reach out to us as well should you have any questions or concerns. Our team is a small but mighty group of specially trained Pharmacists, Pharmacy Technicians, and Pharmacy Concierge. We are experts in pharmacy benefits, formulary, coverage determinations, appeals, and more. We hope that in collaborating, we can help optimize the health of our members.

Immunization Updates



As part of the Inflation Reduction Act (IRA), the Advisory Committee on Immunization Practices (ACIP) recommended on June 21, 2023, to include Respiratory Syncytial Virus (RSV) vaccines for adults. Adults 60 years of age and older may receive a single dose of RSV vaccine using shared clinical decision making.



Below are the two available RSV vaccines that are covered on our formulary at \$0 copay to beneficiaries:

1. AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED 120 MCG/0.5ML (Glaxo Smith Kline)
2. ABRYSSVO INTRAMUSCULAR SOLUTION RECONSTITUTED 120 MCG/0.5ML (Pfizer)

*Other Part D covered vaccines are now available to beneficiaries at \$0 copay.

2023-2024 Flu shots are now available at all pharmacies. Please have your members schedule a flu shot today! Other recommended vaccines for seniors are pneumonia, shingles and COVID which are all covered at a \$0 copay.

Give us a call, fax, or email if you have any questions. It is our pleasure to assist you.

Phone (626) 788-0178

Fax (626) 689-4232

Pharmacy@imperialhealthplan.com

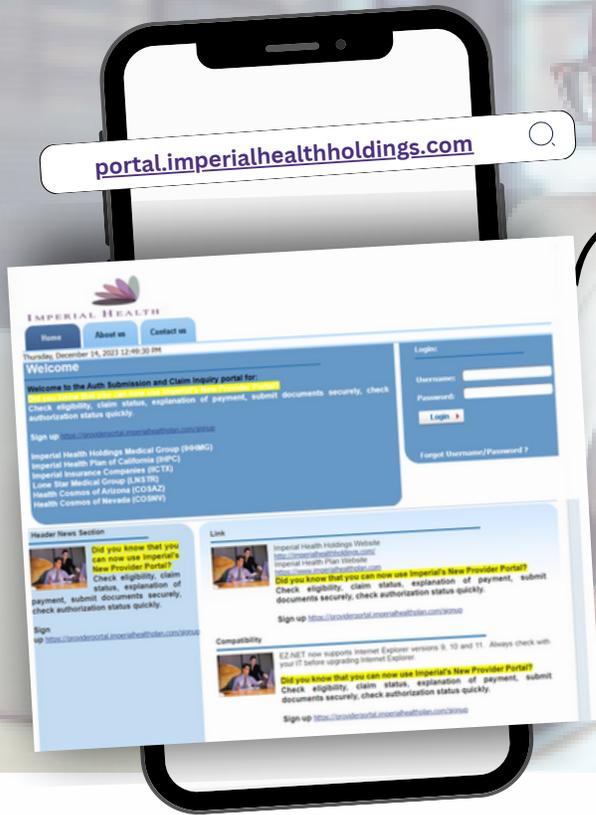
Sincerely,

Imperial Pharmacy Department



IMPERIAL is pleased to formally announce the re-launch of

NEW & IMPROVED EZ NET PROVIDER PORTAL



IMPERIAL is committed to enhancing our provider's experience with the best service possible to support their practice and its daily administrative needs.

Imperial is pleased to formally announce the re launch of the IMPERIAL EZ NET PROVIDER PORTAL to all participating network providers.

PORTAL REGISTRATION IS SIMPLE! PLEASE UTILIZE THE URL BELOW!

[Provider Portal Web Application Submission \(office.com\)](https://portal.imperialhealthholdings.com)

Portal Training Request/Questions:

pnm@imperialhealthholdings.com

Please allow 3-5 business days for inquiry response

Listening to the needs and requests of providers that utilize our original portal, IMPERIAL has responded with a Secure, User-Friendly Web Platform to allow users effortless, navigation!

- **Member Verification of Eligibility**
- **Member Lists**
- **HEDIS Gaps**
- **Claims Status (detail information)**
- **EOP access**
- **Authorization Submission, Confirmation and Status-**
- **Provider Search**
- **Training Modules**
- **Secure Submission Documents such as W9's, Annual Training Attestation**

Urgent authorization requests should be submitted through the Imperial Provider Portal for expedited processing. An expedited/urgent request for a determination is a request in which waiting for a decision under the standard time frame could place the member's life, health, or ability to regain maximum function in serious jeopardy.

For example:

- A serious threat to life, limb, or eyesight.
- Worsening impairment of a bodily function that threatens the body's ability to regain maximum function.
- Worsening dysfunction or damage of any bodily organ or part that threatens the body's ability to recover from the dysfunction or damage; or
- Severe pain that cannot be managed without prompt medical care.

Urgent requests need determination within 72 hours.

WARM WISHES FOR A HAPPY NEW YEAR!

Dear Network Provider:

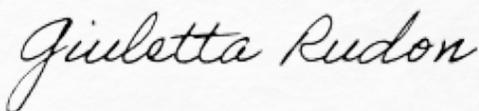
As we close out the year, looking forward to 2024, Imperial sends warm wishes for a Happy and Successful New Year to all. Taking steps towards a successful working relationship, Imperial is sending this letter to address provider updates for the coming year.

Provider 2024 Compliance Training & Attestation

Please access and review Compliance Training and Education materials which include training on Compliance, FWA, HIPAA and Annual Model of Care Training (SNP-MOC) located at <https://www.imperialhealthplan.com> under the Provider section.

Please note the completion of the attestation is time sensitive with CMS. Once the referenced materials have been reviewed, please complete the training attestation form, and return it by fax to Provider Network Management at (626) 689-4230 or by email to pnm@imperialhealthholdings.com.

Please submit the completed attestation form by January 31, 2024.



Giuletta Rudon

Giuletta Rudon | Director, Network Management





IMPERIAL MANAGEMENT
ADMINISTRATORS SERVICES

Dear Network Provider:

Taking steps towards a successful working relationship, Imperial is sending this letter to address provider updates for 2023/2024.

W-9 Request

In efforts to improve provider remittance accuracy and end-of-year reconciliation (i.e., IRS withholdings). Imperial is requesting the submission of current W-9 for provider billing/pay-to/place of service information verification and uploading. Please ensure that the current W-9 is signed and dated.

Please respond to this request by sending the current, signed W-9 to the attention of Markaja Washington, Provider Network Coordinator at fax (214) 452-1190 or email pnm@imperialhealthholdings.com.

Should you have any questions, please feel free to reach out to Provider Network Management at or (626) 838-5100 and choose option for Provider Services.

We look forward to a harmonious working relationship in the New Year and beyond.

THANK YOU FOR BEING A NETWORK PROVIDER!



IMPERIAL INSURANCE COMPANIES



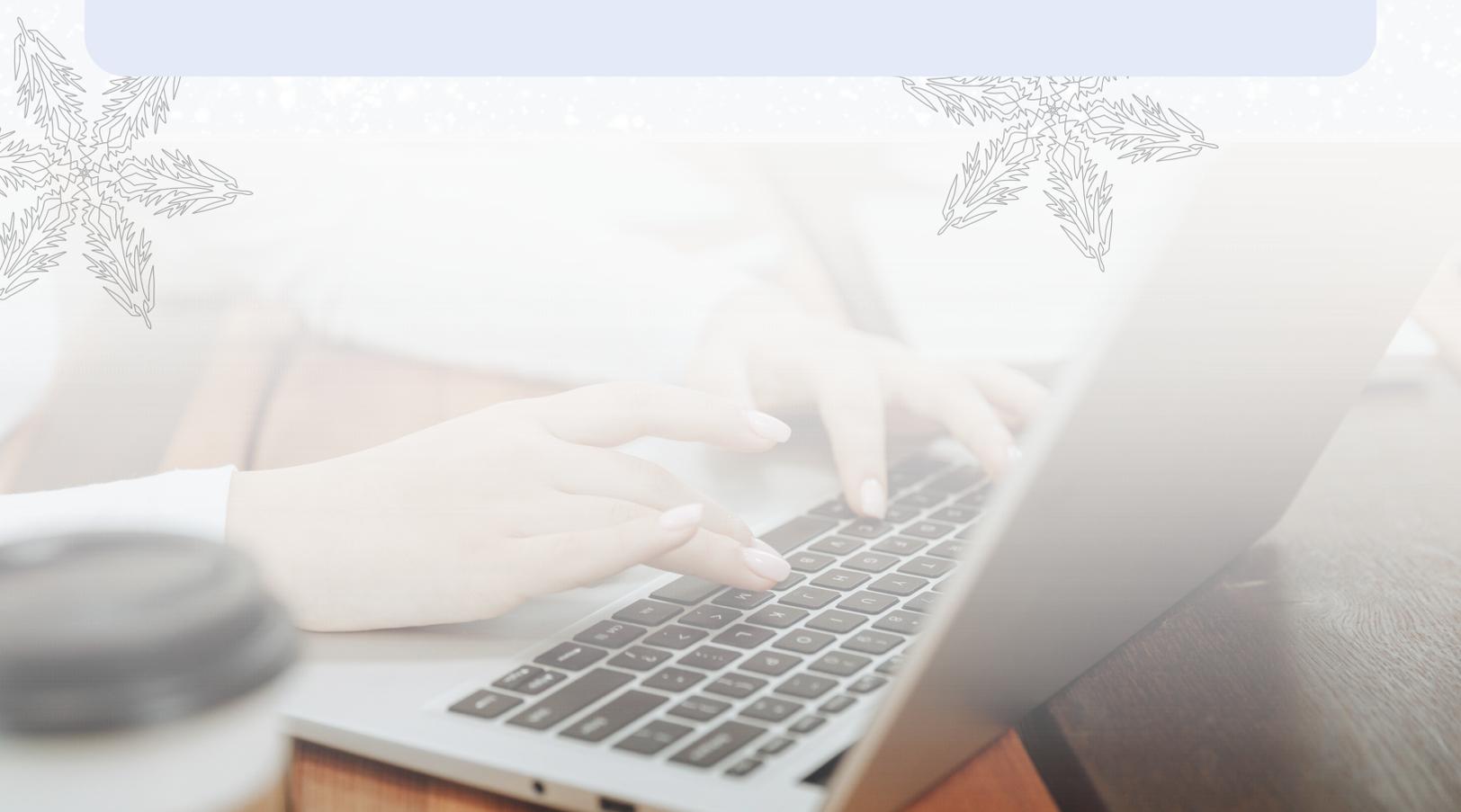
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP



IMPERIAL HEALTH PLAN
OF CALIFORNIA

HEALTHCOSMOS
MEDICAL GROUP, LLC

LONESTAR
MEDICAL GROUP, PLLC



Imperial Health Plan of California
2024 Special Needs Plan Model of Care
Training Materials Coming Soon!

Please check our website for updates. Complete the 2024 SNP MOC Provider Attestation and return signed attestations to the Provider Network Management Department via Email: pnm@imperialhealthholdings.com or by Fax: 626-689-4230



Using CPT II codes to reflect performance and the reduce data collection burden on you, the physician.

CPT Category II (“CPT II”) codes are supplemental tracking codes that can be used for performance measurement and decrease the need for record abstraction and chart review, thereby minimizing the administrative burdens on physicians and other health care professionals. CPT II codes include an Alpha character in the 5th position and are also sometimes referred to as “F Codes” for this reason.

These codes facilitate data collection about quality of care by coding certain services and/or test results that support performance measures and that have been agreed upon as contributing to good patient care. They are not associated with a dollar value but can provide financial benefit to providers by reducing or eliminating medical record requests. Some

These codes describe components that are typically included in an evaluation and management service or test results that are part of the laboratory test/procedure. Consequently, they do not have a relative value associated with them. However, some codes may be associated with Provider Incentive or Member Rewards programs offered by Health Plans. CPT II codes may not be used as a substitute for Category I codes.

Tracking codes for performance measurement are released 3 times yearly following approval of the panel minutes after each Editorial Panel meeting (March 15th, July 15th and Nov. 15th) on the AMA CPT Category II Codes page and published annually in the CPT book as part of the general CPT code set.

Refer to this abridged list of CPT II codes and ensure your billing practice includes submission of these codes whenever appropriate to reflect the quality care you provide.

Controlling High Blood Pressure (CBP) and Blood Pressure Control for Patients with Diabetes (BPD)

Systolic blood pressure		Diastolic blood pressure	
less than 130	3074F	less than 80	3078F
between 130 to 139	3075F	between 80 to 89	3079F
greater than/equal to 140	3077F	greater than/equal to 90	3080F

Report 2 CPT II codes; one for the lowest systolic and one for the lowest diastolic measured during the encounter.

Hemoglobin A1c Control for Patients with Diabetes (HBD)

HbA1c Level	
less than 7.0	3044F
greater than or equal to 7.0% and less than 8.0%	3051F
greater than or equal to 8.0% and less than or equal to 9.0%	3052F
greater than 9.0	3046F

Report the appropriate CPT II code with the date of test, not the date of the office visit when the test was reviewed.



Eye Exam for Patients with Diabetes (EED):

Systolic blood pressure		Diastolic blood pressure	
Dilated retinal eye exam <i>with</i> evidence of retinopathy	2022F	Dilated retinal eye exam <i>without</i> evidence of retinopathy	2023F
7 standard field stereoscopic photos <i>with</i> evidence of retinopathy	2024F	7 standard field stereoscopic photos <i>without</i> evidence of retinopathy	2025F
Eye Imaging to match diagnosis from 7 standard field stereoscopic photos <i>with</i> evidence of retinopathy	2026F	Eye Imaging to match diagnosis from 7 standard field stereoscopic photos <i>without</i> evidence of retinopathy	2033F

Diabetic retinal screening negative for retinopathy completed in prior year and reviewed in current year: 3072F

Any provider can report the appropriate CPT II code for the eye exam results. It does not have to be reported by only the ophthalmologist or optometrist.

Transitions of Care (TRC)

Medication Reconciliation Post-Discharge (MRP)	
Discharge medications reconciled with current medications in an outpatient record	1111F

Report the medication reconciliation post-discharge when performed either via a telephone call or during the Transitional Care Management office visit. The member does not have to be present during the review.

Care for Older Adults (COA):

Pain assessment — pain documented	1125F	Pain assessment — no pain documented	1126F
Medication list documented	1159F	Medication review by prescribing care provider or clinical pharmacist documented	1160F
Functional status assessed		1170F	

Document both the medication list and the medication review; report both CPT II codes. The medication review must be completed by a prescribing care provider or clinical pharmacist.

Advance Care Planning (ACP):

ACP discussed/documentated or surrogate decision maker documentated	1123F	ACP discussed/documentated; no surrogate named, or no ACP provided documentated	1124F
ACP or similar legal document present in medical record	1157F	ACP discussion documentated in the medical record	1158F

Prenatal and Postpartum Care (PPC)

Initial <i>prenatal</i> care visit	0500F	Subsequent <i>prenatal</i> care visit	0502F
Prenatal flow sheet documentated in medical record by first <i>prenatal</i> visit	0501F	<i>Postpartum</i> care visit	0503F

Cardiovascular Monitoring for People with Cardiovascular
Disease and Schizophrenia (SMC)

Most recent LDL-C less than 100mg/dL	3048F	Most recent LDL-C 100-129 mg/dL	3049F
Most recent LDL-C greater than or equal to 130 mg/dL		3050F	

Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD) and
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)

Most recent LDL-C less than 100mg/dL	3048F	Most recent LDL-C 100-129 mg/dL	3049F
Most recent LDL-C greater than or equal to 130 mg/dL	3050F	HbA1c level less than 7.0	3044F
HbA1c level greater than or equal to 7.0% and less than 8.0%	3051F	HbA1c level greater than or equal to 8.0% and less than or equal to 9.0%	3052F
HbA1c level greater than 9.0		3046F	

For SMD: Report the appropriate CPT II code for the A1c result value with the date of test, not the date of the office visit when the test was reviewed. Report the appropriate CPT II code for the LDL-C result value.



Member's Rights & Responsibilities

Our organization annually distributes the Member's Rights and Responsibilities Statement to Providers in the newsletter. Additionally, Providers and Practitioners can find it in the Provider Manual, you received upon the orientation process.

Member Rights & Responsibilities

- A right to receive information about the organization, its services, its practitioners and providers as well as member rights and responsibilities.
- A right to be treated with respect and recognition of their dignity and their right to privacy
- A right to participate with practitioners in making decision about their health care
- A right to a candid discussion of appropriate for medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- A right to voice complaints or appeals about the organization or the care it provides
- A right to make recommendation regarding the organization's member rights and responsibilities policy
- A responsibility to supply information (to the extent possible) that the organization and its practitioners and providers need in order to provide care
- A responsibility to understand their health problems and participate in
- A responsibility to follow plans and instructions for care that they have agreed to with their practitioners
- A responsibility to understand their health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible



You can access the Member's Rights and Responsibilities Statement, on our website at:
<https://www.imperialhealthplan.com/california/los-angeles/members/member-rights-and-responsibilities/>

*If you would like to receive a hard copy request of this publication, please contact the Provider Relations Department at (626) 838-5100, Ext. 5
 For any questions, please contact Provider Relations at (626) 838-5100, Ext. 5*



IMPERIAL MANAGEMENT
ADMINISTRATORS SERVICES

A Message from our Chief Medical Officer

Hello Valued Providers,

Happy holidays. With colder weather and holidays come increased exposure to infection, and this year there is the convergence of influenza, RSV and new variants of SARS-CoV-2 (COVID-19). Please remind your patients to get their flu COVID-19 booster and RSV vaccines (if 65 years or older). Every year, thousands of people have needless illness and sometimes even death because they do not vaccinate against the flu, COVID and RSV. While vaccinations are not guarantees against becoming ill, they can reduce the severity and length of the infection, and often prevent death.

COVID-19 boosters strengthen immunity from earlier vaccinations or even COVID-19 infections, and thus patients should still get them even if they have previously been vaccinated or infected. Finally, although previously recognized as a significant respiratory pathogen in infants and young children, RSV also causes significant morbidity and mortality among the elderly. The new RSV vaccine has demonstrated efficacy against this virus.

As always, please feel free to reach out to me if you have any questions.

Thank you for your continued partnership,

David Liu, MD

David Liu, MD, FACP, FAAP, FASAM | Chief Medical Officer

Websites: Imperial Health | <https://imperialhealthholdings.com/>

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