



# IMPERIAL PROVIDER NEWSLETTER

SPRING 2024



# TABLE OF CONTENTS

Message from Dr. David Liu ..... 3

Message from our Pharmacy Department ..... 4-6

Allergy Season Symptoms & Treatment ..... 7

OTC Benefit Card ..... 8

Dental Vendor ..... 9

Vision Vendor ..... 10

Papa Pals In-Home Support ..... 11

Care Car Transportation Vendor ..... 12

EZ Net Portal ..... 13

Member Rights & Responsibilities ..... 14

Compliance & SNP MOC Training & Attestation ..... 15

CPT II Codes ..... 16-17

## 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

Dear Colleague:

We greatly appreciate the care that you provide to our members. We want to advise you about a Quality Improvement Plan for our participating primary care providers. In the first quarter 2024, the expectations are:

1. All members should be seen.
2. Please ensure that metrics such as Annual Wellness Visit, Care of Older Adults, other HEDIS measures are met.
3. Review HCCs for each member, which will be provided by Imperial
  - a. Ensure that there is documentation for each member's HCCs.
    - i. Imperial will provide training to you and your staff via webinars on HCCS, RAF scores, documentation, and outcomes.
4. Imperial will be conducting medication therapy reviews as part of its Medication Therapy Management Program (MTMP) for members. This entails the following steps:
  - a. A pharmacist will review medications.
    - i. Medications with cautions for member's disease states, age, and interactions
    - ii. Medications per clinical practice guidelines for each disease state
  - b. Recommendations for each member will be forwarded to her/his PCP
  - c. PCPs will be evaluated for:
    - i. Response to recommendations
    - ii. Implementation for recommendations, if in agreement
5. For PCPs not meeting goals above, a performance improvement plan will be developed, with SMART goals.

Throughout the year, we have monthly Quality Improvement webinars focusing on metrics and how to improve them. Our QI team is also available throughout the year. Please feel free to reach out to: Alberto Vega, 626-838-5100 ext. 508, [alberto.vega@imperialhealthholdings.com](mailto:alberto.vega@imperialhealthholdings.com). Please also note that the 2024 Model of Care (MOC) training can be found at: <https://imperialhealthholdings.com/resources>. Please be sure to complete this training online.



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

Also, please note that for those providers who administer medications in the clinical setting, Imperial will no longer be paying for "buy and bill" following June 1, 2024. Imperial will work with its contracted specialty pharmacies to provide the medications to be administered in physician offices. Administration and monitoring services will continue to be reimbursed as per our provider contracts. If there are reasonable causes for an exception, please ensure you work with our pharmacy team in advance, so that there is no process disruption.

# Message from our Pharmacy Department

## It's Not Too Late to Get a Flu Shot!

As the warmth of spring starts to embrace us and the days grow sunnier, it's easy to forget that the influenza virus still lingers in our midst until May. However, staying vigilant and proactive in our approach to flu prevention remains as crucial as ever.

While the common recommendation for flu vaccination often centers around early fall, it's important to emphasize that getting vaccinated later in the flu season can still provide significant benefits.

We firmly believe that by promoting the flu vaccination, we can empower our patients to take control of their health and play an active role in our collective efforts to minimize the spread of illness within our communities. Encouraging patients to take this step can greatly reduce the risk of illness and its associated complications, safeguarding not only their own health but also that of those around them.

As trusted medical providers, your recommendation carries immense weight and influence in shaping patient decisions. We encourage you to continue advocating for flu vaccination and providing accurate information to address any concerns or misconceptions patients may have.

Let's unite our efforts to ensure that every eligible individual receives their flu shot, thereby protecting themselves and others from the potentially severe consequences of influenza.





## 100-DAY

At Imperial, we understand the challenges patients face when it comes to medications refills, including the inconvenience of frequent pharmacy visits and the potential for gaps in care. By prescribing maintenance medications for 100-day supplies with 3 refills, we can address those challenges head-on and significantly improve medication adherence among our patient populations.

Here are some key points that show why having uninterrupted access to their medications can make a tremendously positive impact for our patients:

1. **Improved Adherence:** Studies have shown that longer prescription supplies are associated with improved medication adherence. By providing a 100-day supply with three refills, patients are more likely to stick to their prescribed medication regimen, leading to better health outcomes and reduced risks of complications.

2. **Reduced Barriers to Access:** Extending prescription supplies minimizes the need for frequent visits to the pharmacy and reduces the chances of gaps in medication therapy. This is particularly beneficial for patients with limited mobility, transportation challenges, or those residing in remote areas, ensuring they receive their medications in a timely manner without undue hassle or delay.

3. **Cost Savings and Efficiency:** Longer prescription supplies can also result in cost savings for patients. Fewer pharmacy visits mean reduced co-pays and transportation costs for patients, while streamlining prescription processes can improve efficiency for healthcare providers and pharmacies alike. Together, let's continue to prioritize our patients to take control of their health and promote medication adherence through simple yet impactful approaches.

## MedImpact

We understand your challenges in ensuring patients receive timely and convenient medication access. Utilizing mail-order pharmacy services is one solution that can significantly enhance patient experience and assist in streamlining healthcare delivery. Encouraging your patients to opt for medication delivery via MedImpact's mail-order pharmacy, BirdiRX, offers many advantages for you and your patients.

First and foremost, it ensures consistent adherence to medication regimens, as patients receive their prescriptions directly at their doorstep, eliminating the need for frequent trips to the pharmacy. Additionally, mail-order pharmacies often provide cost savings for patients, thanks to bulk ordering and reduced overhead costs. This approach enhances medication management with automatic refills and tailored reminders, improving patient outcomes.

Embracing mail-order pharmacy services simplifies the medication process for your patients and contributes to more efficient and effective healthcare delivery.

Here is how you can get in touch with MedImpact for each line of business:

- Part D/Medicare: (877) 391-1105
- Part B: (877) 391-1105
- Marketplace/Exchange: (844) 269-0977

MedImpact's mail order pharmacy is called BirdiRX. These are the ways to send BirdiRX prescriptions:

- Electronically
- Fax: (877) 395-4836
- Website: [www.medimpact.com](http://www.medimpact.com)
- Address:

- o Birdi  
PO Box 8004  
Novi, MI 48376-8004

For specialty medications, you can contact or send prescriptions to Specialty by Birdi:

- Phone: (833) 546-0799
- Fax: (833) 546-0795
- Mail:

- o Specialty by Birdi  
PO Box 51580  
Phoenix, AZ 85076-1580

Email: [specialty@birdirx.com](mailto:specialty@birdirx.com) (please do not include any personal health information)



## Conclusion

We deeply value the importance of medication adherence and strive to support your efforts in optimizing patient care. In this spirit, our Imperial Pharmacy Services Department may reach out to your office regarding your patients' medication needs. We warmly invite you to reach out to us as well. Our team consists of dedicated professionals, including Pharmacists, Pharmacy Technicians, and Pharmacy Concierge, who are passionate about providing exceptional support. With expertise in pharmacy benefits, formulary management, coverage determinations, appeals processes, and more, we are here to assist you every step of the way.

Together, we can work collaboratively to promote the health and well-being of our members, ensuring they receive the highest quality of care possible. Should you have any questions or require assistance with pharmaceutical management procedures and restrictions, please feel free to reach out to us. Additionally, you can find helpful resources on our Pharmacy Resources page on the Imperial Health Plan website.

We are excited about the opportunity to work with your teams and look forward to building a strong relationship focused on delivering outstanding patient care.

- Website: [www.imperialhealthplan.com](http://www.imperialhealthplan.com)
- Phone: (626) 788-0178
- Fax: (626) 689-4232
- Email: [Pharmacy@imperialhealthplan.com](mailto:Pharmacy@imperialhealthplan.com)



# Be sure to discuss allergy symptoms and available treatments with your patients this allergy season.

## Allergy Season Symptoms & Treatments

The months that are typically worse for allergies vary depending on the location and specific allergens involved. In general, spring and fall  tend to be  the peak seasons for allergies in many regions of the United States.

During spring, especially from March through May, tree pollen is a common trigger for allergies. As trees bloom and release pollen into the air, people with allergies may experience symptoms such as sneezing, itchy eyes, and congestion.

Grass pollen can become an issue during late spring and early summer, further exacerbating allergy symptoms for some individuals.

In the fall, ragweed pollen is a major culprit for seasonal allergies. Ragweed plants release large amounts of pollen from August to November, depending on the location.

### Seasonal Allergy Symptoms

The allergy symptoms you will experience in California will vary based on the severity of your allergies and the time of year you are in California.

Symptoms you might experience in California include:

- Stuffy nose
- Itchy and watery eyes
- Congestion
- Headaches
- Sneezing
- Brain fog
- Post-nasal drip
- Aggravated asthma symptoms

### Allergy Symptom Relief and Treatment

Allergies can feel difficult to manage, but there are several different methods you can try out to decrease or eliminate your allergy symptoms.

#### Limit Exposure

An effective method of decreasing your symptoms is limiting your exposure to the allergens that are triggering your allergies. While pollen can be difficult to avoid, there are ways that you can decrease your exposure to pollen in California.

- Check daily pollen count: Keep an eye on pollen levels to see how high they are in California for the day. If it's a high pollen count, try limiting your time outside that day. Pollen tends to be at its highest in the morning and afternoon in California. Evening hours will be the best time to go outside during the California allergy season.
- Trim trees, mow the lawn, and pull weeds: By keeping tree branches trimmed, grass short, and your lawn free of weeds, you can reduce the pollen that will be released directly around your home in California.
- Wear a mask outdoors: Wearing a dust mask when you go outside in California can help prevent pollen from getting in your airways.
- Clean regularly: Pollen is a very sticky substance, meaning it'll get in your home and on you and your clothes. Be sure to clean your house and do laundry frequently. Also, make sure to shower after being outdoors to wash off any pollen.
- Keep windows closed: Opening your windows will allow for more pollen to get into your home. If you can, keep your windows closed and run your A/C instead for the duration of the allergy season in California.
- Install a HEPA filter: Installing a HEPA filter on your A/C can help reduce the pollen levels circulating in your home.

#### Medications

Over-the-counter (OTC) medications are widely available in California, and they provide short-term relief from your allergy symptoms. If you find that antihistamines, nasal sprays, and eye drops don't provide enough relief from your seasonal allergies, you can look into allergy treatments that will provide long-term relief instead of just masking your symptoms.



**OTC –Quarterly Allowance** added to the Card.

**Member Rewards**

**Incentives-** Added to the card for convenience and ease of use.

**Grocery Benefits \$105.00**

**Quarterly (D-SNP, California Only-Eligible chronic conditions to qualify)**

## Over The Counter (OTC)

- Decreased quarterly allowance for PBP 007, 005, 016 from \$120 to \$75 for 2024. Reference OTC benefit chart below.
- Same quarterly allowance for PBP 012 at \$120 for 2024. Reference OTC benefit chart below.
- Increase quarterly allowance for PBP 011 from \$120 to \$140 for 2024. Reference OTC benefit chart below.
- OTC benefit not offered in 2023 and 2024 for PBP 014. No change to benefit.

- OTC allowance is loaded on a Purple Mastercard with Imperial logo and cannot be carried over from quarter to quarter or calendar years. Benefit is a use it or lose it benefit. Benefit is offered by a new vendor for 2024, Soda Health.
- Members can track their quarterly benefit allowance amount by going online or calling 1 -855-AND-MORE.

Plan Name	PBP	OTC Benefits (No Rollover)	Rewards	Food & Produce (No Rollover)
Imperial Senior Value (HMO C-SNP) 005	H5496-005	\$75 per quarter	Up to \$275	N/A
Imperial Traditional (HMO) 007	H5496-007	\$75 per quarter	Up to \$275	N/A
Imperial Dynamic Plan (HMO) 012	H5496-012	\$120 per quarter	Up to \$275	N/A
Imperial Courage Plan (HMO) 016	H5496-016	\$75 per quarter	Up to \$275	N/A
Imperial Insurance Company Dual D-SNP (HMO D-SNP) 011	H5496-011	\$140 per quarter	Up to \$275	\$105 per quarter

**OTC can be redeemed at**

- Online at [andmorehealth.com](http://andmorehealth.com)
- Via phone at 1 -855-AND-MORE
- Retail store: Food 4 less, Fry’s, Kroger, Ralphs, Smith’s Food and Drug, CVS, Albertsons, Amigos, Andronicos, Market Street, Pavilions, Safeway, Tom Thumb, Vons



# Dental



- Offered on all Imperial plans.
- Benefit max amount remained the same from 2023 to 2024 at \$500 max for routine dental services for 2024.
- Benefit max amount for comprehensive services decreased from 2023 to 2024 from \$2000 to \$1000 max for 2024.
- Member Portal with a dashboard, dentist finder, cost estimator offered by a new dental vendor, Delta Dental for 2024.
- Mobile Application available hosted by Delta Dental.

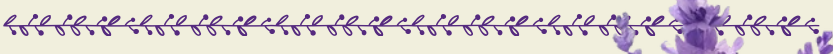




# VISION -VSP



- Access to strong provider network
- Freedom to choose your doctor and eyewear
- \$0 Routine eye exams
- Up to \$250 yearly allowance for contacts, lenses, and frames



# In-Home Support



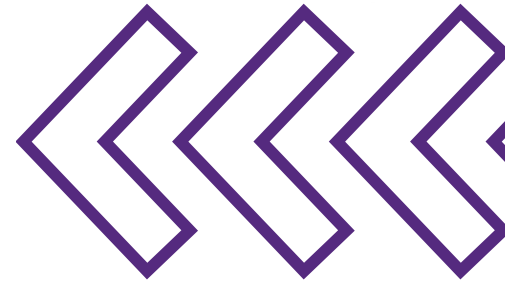
- Is a network of friendly helpers who are available both in-person or virtually through a phone call. Offered by Papa Pals.
- These friendly helpers provide company and help with everyday tasks such as rides, help with errands, grocery shopping, meal prep, and board game/walking partner.

## Benefit Allowance

- Imperial Senior Value (HMO C-SNP) 005 - 48 hours per year.
- Imperial Traditional (HMO) 007 - 48 hours per year.
- Imperial Dual Plan (HMO D-SNP) 011 - 60 hours per year.
- Imperial Dynamic Plan (HMO) 012 - 48 hours per year.
- Imperial Strong (HMO) 014 - 48 hours per year.



# Transportation



## Health Plan Approved Locations

- Primary and Specialist office
- Lab
- Pharmacy
- Dentist
- Vision Provider
- Hearing Care Services

Note: Curb-to-curb routine non-emergency transportation services to plan approved locations within a 30-mile radius of your primary care provider's office.

- 100 One-Way Trips
- \$0 Copayment to access the benefit
- Health plan approved locations ONLY
- Member needs assistance setting up Doctor's appointment and transportation?  
Call (800)-838-8271

Transportation Vendor: Care Car  
To schedule your ride visit: <https://www.carecar.co/schedule> or call: (844) 743 4344



# IMPERIAL is pleased to formally announce the re-launch of

## NEW & IMPROVED EZ NET PROVIDER PORTAL

[portal.imperialhealthholdings.com](http://portal.imperialhealthholdings.com)



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](mailto:office.com))

Portal Training Request/Questions:  
[pnm@imperialhealthholdings.com](mailto: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.

# 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>

*If you would like to receive a hard copy request of this publication, please contact the Provider Relations Department at (800) 595-0619.*

*For any questions, please contact Provider Relations at (800) 595-0619.*

## Provider 2024 Compliance Training, SNP MOC & 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, “Training”**.

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](mailto:pnm@imperialhealthholdings.com).



## Using CPT II codes to reflect performance and to 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 5<sup>th</sup> 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 <b>with</b> evidence of retinopathy	2022F	Dilated retinal eye exam <b>without</b> evidence of retinopathy	2023F
7 standard field stereoscopic photos <b>with</b> evidence of retinopathy	2024F	7 standard field stereoscopic photos <b>without</b> evidence of retinopathy	2025F
Eye Imaging to match diagnosis from 7 standard field stereoscopic photos <b>with</b> evidence of retinopathy	2026F	Eye Imaging to match diagnosis from 7 standard field stereoscopic photos <b>without</b> 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 — <b>no pain</b> 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	<b>Postpartum</b> 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.*