



PARTNERS in CARE

Vermont Managed Care
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From The Desk of the Medical Director

Planning For the Very End of Life; helping caregivers through those final moments

End of life concerns are much discussed, but often in generalities or in areas such as advance directives and power of attorney. But end of life eventually comes down to those final hours or moments resulting in death, and this is a time for which many families and caregivers are unprepared.

As an ER physician, I've too often been party to the heartbreak of receiving an obviously end of life patient getting CPR or other vigorous medical treatment, solely for the reason that the family didn't know what to do other than call EMS, which can be just a "call for help" without any intent to activate a full-scale medical intervention. In discussing this with colleagues, I've discovered that many providers also don't clearly know what can or should be done in those circumstances.

- 1) Clearly, advance planning is a good idea. The key elements are to define patient and family preferences, then create a plan that allows or facilitates those preferences. Advance directives or DPAs certainly may be components, but are not by themselves a plan. It's critical that the patient and family have a realistic mutual understanding of what will and won't be the role of CPR, intubation, hospitalization, fluid and nutritional support, etc., but they also need an overall care map that leads to those decisions and beyond. The provider is ideally situated to act as an advisor and advocate, designing reasonable goals while balancing wishes and values.
- 2) Consider hospice consult for patients who may be "sick enough to die" in the next six months. One recurring theme is a misconception that the provider should already "know" whether someone is or isn't a hospice candidate. Hospice consultation, in addition to answering that ques-

tion, can assist with planning elements, provide suggestions, links or referrals for palliative care or other home care services, or give anticipatory advice for future hospice involvement.

- 3) Patients can have multiple hospice enrollments. They can be on hospice, leave hospice status if they improve or stabilize, then return to hospice at a later date if warranted.
- 4) The last moments – what to do, who to call.
 - (A) If the pt is moribund but not dead, this is where advance planning and discussion pays off. The family can just sit with the patient, or provide comfort measures that have been prescribed. (of course, if the wish of the patient and/or family is to pursue further medical care, it should be sought through their provider or, if needed, EMS)
 - (B) If the patient appears dead, who should the family call, and how can death be pronounced? Police, EMS, nurses, and physicians can all perform this function. The police are very familiar with the procedures related to death determination, medical examiner notification, etc. Discussing this with caregivers can prevent confusion and fear leading to unnecessary medical intervention.

In the case of hospice patients, the hospice nurse is available at all times for both scenarios.

<http://cme.medscape.com/viewarticle/542262>
[The Last Hours of Living: Practical Advice for Clinicians]

Many thanks to Dr. Zail Berry for her expertise and time consulting on this article.



Provider Newsletter

PARTNERS in CARE

We encourage our readers to call or write us with your feedback about our newsletter.

Contact Martita Giard at 847-8161 or email to: martita.giard@vtmednet.org

Partners in Care is provided as an informational and educational service for participating providers in Vermont Managed Care, Inc. To the extent the content concerns operations and programs of Vermont Managed Care, the terms of applicable contractual and other legal documents shall prevail. Program descriptions and other specific content are for use in connection with Vermont Managed Care programs and are not intended to direct or prescribe activities unrelated to Vermont Managed Care.



SAVE THE DATE

A VMC SPONSORED HEALTH CARE CONFERENCE

Vermont Managed Care

3rd Annual Conference

Tuesday November 10, 2009

7:00 am – 11:30 am.

Sheraton Hotel and Conference Center
in Burlington, Vermont

Speakers and Topics are

Dr. Raymond J. Lanzafame, MD MBA FACS -
Minimally Invasive Surgery: Opportunities and Challenges

Arthur (Art) N. Lerner, Esq. – Partner, Crowell & Moring, LLP
Anti-Trust Regulations and The State of
Health Care in the Obama Administration

Implementing the Red Flags Rule Identity Theft Prevention
Program

There is no charge to attend and registration information
will be available soon.

For further information you
may email VMC at
VMCConference@vtmednet.org
or contact your
Provider Relations Specialist.



Coming in October...

Vermont Managed Care's Provider Satisfaction Survey will be available this year through Zoomerang's on-line service. VMC will be sending a reminder notification either by email or by post-card. This year, VMC will be offering five randomly drawn prizes worth \$100 each. We look forward to your responses on our performance over this past year.

Newly Credentialed VMC Providers

Name	Degree	Spec	Group
Thomas Laudino	PT	PT	Addison Wellness, INC
Robert Lafiandra	MD	IM	Porter Hospital DBA Porter Internal Medicine
Jacquelyn Dempsey	OT	OT	The Rehab Gym Inc
Nicholas Marconi	OD	OPT	Michael Taub, OD, PC
Lorna Mayo	MD	IM 1	DHMC Emergency Medicine
Carol Blattspeiler	APRN	ORTH SUR	Associates In Orthopaedic Surgery
Charles Miranda	OD	OPT	Charles A Miranda, OD
Thomas Brudz	PA	ORTH SUR	DHMC Hematology Oncology
Brigitte Cameron	APRN	FM	DHMC Hematology Oncology
Amy Gregory	MD	OPH	Eye Care Associates, PC
Nader El Gharib	MD	CARD DIS	FAHC Cardiology
Matthew Gilbert	DO	ENDO	FAHC Endocrinology, Metabolism & Nutrition
Kelley Wulfkuhle	MD	OB/GYN	FAHC Maternal Fetal Medicine
Kimberly Pratt	RD	CLIN NUTR	FAHC Nutrition Services
Jennifer Keller	MD	OB/GYN	FAHC Women's Health Care Services
Sadie Mills	MD	IM 1	Fletcher Allen Health Care
Doreen Benoit	APRN	URG CARE	Northwestern Occupational Health, LLC
Jessica Rouse	MD	FM	Porter Hospital DBA Champlain Valley Family Health
Mattie Towle	MD	FM	Porter Hospital DBA Little City Family Practice
SANJAY BOSE	MD	CARD DIS	Porter Hospital DBA Porter Cardiology
Britni Williams	PT	PT	The Rehab Gym Inc
Victoria Priganc	OT	OT	Turner Hand Therapy
David Diaz	MD	OPH	Vermont Eye Associates
Elizabeth Hamlin	APRN	SUR	DHMC Hematology Oncology
Erin Miceli	PT	PT	The Rehab Gym Inc
Alison Schneider	MD	IM	Porter Hospital DBA Porter Medical Associates
Wendy Friant	PT	PT	Cornerstone Physical Therapy
Melissa Pugliano-Mauro	MD	Derm	FAHC Dermatology
Emily Decker	PT	PT	Appletree Bay Physical Therapy Inc
Martha Allen	PA	EMER	Central Vermont Emergency Dept
Krishnendu Bhadra	MD	IM 1	Central Vermont Medical Center
Taraneh Tehrani	MD	IM 1	Central Vermont Medical Center
Nathaniel Thompson	MD	IM 1	Central Vermont Medical Center
Patricia Lukasavage	DDS	ORALMAX	Champlain Valley Oral & Maxillofacial Surgery, PC
Courtney Iverson	PT	PT	Choice Physical Therapy, LLC
Alexander Abess	MD	ANES	DHMC Anesthesiology
Kevin Finkel	MD	ANES	DHMC Anesthesiology
Randy Loftus	MD	ANES	DHMC Anesthesiology
W.D. McGrath	APRN	ANES	DHMC Anesthesiology
Martha Paduch	APRN	ANES	DHMC Anesthesiology
Patrick Magnus	MD	IM	DHMC Cardiology
Robert MacNeal	MD	DERM	DHMC Dermatology
Elisha Dekoning	MD	EMER	DHMC Emergency Medicine
Seth Podolsky	MD	EMER	DHMC Emergency Medicine
Kerrington Smith	MD	SUR	DHMC General Surgery
Bert Fichman	MD	ANES	DHMC Hematology Oncology
Heidi Fitzgerald	MD	SUR	DHMC Hematology Oncology
Shoshana Hort	MD	IM	DHMC Hematology Oncology
Jennifer Krawitt	MD	RAD	DHMC Hematology Oncology

Events &

Physician Brag Board

The Times Argus recently published a list of Best of the Best Readers' Choice Award Winners. **Berlin Family Health** won this award in the overall Best Medical Practice category. An individual award was won by **Lise Kowalski, M.D.**, a Family Medicine physician at Fletcher Allen and an assistant professor of Medicine at the UVM College of Medicine. Dr. Kowalski won the award for "Best Doctor in the Area."



Congratulations to both Berlin Family Health and Dr. Lise Kowalski!

MVP 2009 Fall Seminars



Two representatives from your office are invited to attend the annual MVP Health Care Professional Relations Seminar.

Please join us for the latest information on products, systems and other information relevant to your office.

All seminars will be held from 12:00 – 1:30 p.m.

Please RSVP at least 2 weeks prior to the seminar date. You may fax this registration form to (802)264-6509 or mail to: Gina Polchlopek, MVP Health Care - PR, 66 Knight Lane, Suite 10, Williston, VT 05495

Date	Place	City
Thursday, October 1	Northeastern Vermont Regional Hospital	St. Johnsbury
Tuesday, October 6	Holiday Inn Express	Brattleboro
Thursday, October 8	Northwestern Medical Center	St. Albans
Tuesday, October 13	Mt. Anthony Country Club	Bennington
Friday, October 16	Central Vermont Medical Center	Berlin
Wednesday, October 21	Rutland Regional Medical Center	Rutland
Wednesday, October 28	Doubletree Hotel	Burlington
Friday, October 30	Porter Hospital	Middlebury

Space is Limited – Register early

Bridging the Divide: A Conference Fostering Collaboration between Primary Care, Mental Health, Substance Abuse, and Behavioral Health

Burlington Sheraton Hotel and Conference Center
Burlington, VT
November 16, 2009

This conference is being offered in conjunction with the Child Psychiatry for the Primary Care Clinician conference which takes place on Tuesday, November 17, 2009.

The objectives of this conference are to convene primary care providers and the broad array of mental health & substance abuse practitioners to learn more about each other's role in providing care. Present examples of successful collaboration between primary care & mental health.

Child Psychiatry for the Primary Care Clinician

Burlington Sheraton Hotel and Conference Center
Burlington, VT
November 17, 2009

This conference is being offered in conjunction with the Bridging the Divide conference which takes place on Monday, November 16, 2009.

The objective of this course is to equip primary care clinicians with practical strategies for the diagnosis and treatment of many of the most common childhood psychiatric conditions, specifically ADHD, bipolar disorder, substance use and aggression. Emphasis will focus on incorporating strategies within the practical confines of a busy outpatient primary care setting.

Available credit: AMA Category 1, AAFP, Nursing, Mental Health, Social Worker, Psychology

For Additional Information Regarding These Conferences Contact:

University of Vermont
Office of Continuing Medical Education
128 Lakeside Avenue, Suite 100
Burlington, VT 05405
PH: 802 / 656-2292
FAX: 802 / 656-1925
<http://cme.uvm.edu>

Notices

Managing Chronic Pain while Putting the “Control” Back into Controlled Substances

Hampton Inn Conference Center,
Colchester, Vermont
Rescheduled to October 23/24, 2009

Who Should Attend?

The program is designed for health care providers who care for patients with chronic pain and related conditions, including problems with opioid medications.

Program Includes:

- “Prescribing Opioids for Chronic Pain,” a nationally recognized CME program offered with support of the Center for Substance Abuse Treatment/SAMHSA
- VT Legal Counsel— “Understanding Patient Consent and Other Legal Issues”
- “Creating a Community Based Medical Controlled Substance Monitoring System”
- “Utilizing Effective Standardized Provider Tools”
 - Initial Patient Consent to Treat Form
 - HIPAA Privacy Policy
 - Chronic Pain Initial Patient Assessment Tool
 - Patient Consent & Controlled Substance Agreement
 - Chronic Pain Patient Progress Notes
 - Termination of Agreement Form
- Vermont Prescription Monitoring System/Registration
- Conflict Management— “Getting Ready for Tough Discussions”
- Available Resources
 - Complimentary & Alternative Treatment Modalities
 - Local/State Agency Programs
 - Faith Based Programs / Teen Challenge

Resource Fair

Exhibitor Fair

Conference Brochure & Registration Form to Follow
CME Credits Will be Awarded

Organized by:

The Franklin-Grand Isle Chronic Pain/Narcotics Community Forum

VMC Employee News

This past year VMC has had several staff changes. We would like to congratulate the following VMC employees



Promotions:

Kelley Beams -- Was promoted from Network Profile Specialist to Senior Network Profile Specialist

Elizabeth Roach – Was promoted from Provider Relations Specialist to Senior Provider Relations Specialist

Apex Remits for FAP Members

VMC has just learned that there has been a slight modification to the layout of the remits from APEX on behalf of the Fletcher Allen Health Care Members. As of the August 4, 2009 remit, the information is being displayed by the provider’s last name. Previously it was displayed by their first name. While this is not a significant change VMC wanted to notify our contracted providers of this change.

VMC Provider Relations Needs Your Help!

VMC Provider Relations is asking all VMC contracted providers to assist us in collecting their email addresses. If you have a personal or group email address please provide us with that information.

In an effort to reduce costs and paper we will be sending the Partners in Care quarterly newsletter via email. In addition, there may be other pieces of information VMC could provide you through email in a timely low cost method. Please note contractual information will continue to be sent by traditional methods and not email.

Please provide us with the email address you would like us to send the Partners in Care newsletter and other general updates to. Please send your email address to Elizabeth Roach at elizabeth.roach@vtmednet.org or call her at 847-4035.

The VMC Care Management Department Annual Notices

UM Availability

The Care Management Department is available to you 24 hours a day, 7 days per week to assist with Utilization Management Determinations. During normal business hours, you can call us directly through our local or toll free numbers listed below. On weekends, holidays, and off-hours you can access assistance by contacting the on-call Nurse Case Manager by cellular telephone. If a Medical Director is needed, the on-call nurse will coordinate this.

Local Number (802) 847-8369

Toll Free Number (802) 639-3881

On-call Cellular Telephone Number (802) 363-0974

UM Criteria

Annually, the Care Management Committee of the Board reviews and approves the utilization management criteria for use as guidelines and benchmarks to inform the Care Management process. The most current versions of the following criteria are approved for use by the Care Management Sub-Committee of the VMC Board of Directors.

<u>Area of application</u>	<u>Criteria</u>
Inpatient, Home Care, Case Management, Recovery Facility, Surgical Procedures, Imaging and select DME items	Milliman Care Guidelines
New technology	Hayes Directory

Other criteria sets are also approved for reference. These include “Apollo’s Medical and Rehabilitation Review Criteria”, “Therapy Referral Handbook, Second Edition” and the “APTA Guide to Physical Therapist Practice, Second Edition”.

External Review firms contracted to provide specialty review services include American Medical Review (AMR) Medical Review Institute of America (MRIOA) and MCMC II.

Providers may request a copy of the criteria used to make a Utilization Management decision by contacting the Care Management Department at the numbers listed under UM Availability.

Medical Director Availability

When there is an adverse determination for one of your VMC members, you may always access a VMC Medical Director to discuss the case. You can make arrangements to contact one of them by dialing the numbers listed above and request a Case Manager. They will work with you to schedule a convenient time for you to discuss the case with one of the Medical Directors.

No Incentives

The purpose of Utilization Management is to facilitate efficient, safe and appropriate care that meets standards for quality. Because this is one of the guiding principles for Care Management at VMC, the Care Management Committee of the Board has adopted a policy that prohibits the application of incentives for anyone involved in making UM decisions. UM decision making is based only on the appropriateness of care and service and the existence of coverage. VMC does not specifically reward practitioners or other individuals for issuing denials of coverage or care. Financial incentives for UM decision makers do not in any way encourage decisions that result in underutilization. VMC regularly monitors utilization trends to look for and encourage appropriate utilization of services. This policy can be found in the Utilization Management Plan.

In summary, the volume or type of adverse determinations or denials does not affect in any way incentives that may be offered to any person with responsibility for UM decision making at VMC. This includes Medical Directors, Case Managers, Client Account Representatives, Managers or anyone involved in Utilization Management decisions.

UM Policies

The Utilization Management Policies are provided to you in the VMC Provider Manual. The policies are reviewed and revised as needed on an annual basis. All updated policies can be accessed on the VMC website: www.vermontmanagedcare.org.

This notice is published annually in this newsletter and the Fletcher Allen Preferred Medical Plan member newsletter “Medical Plan Notes”. It is also provided annually to all VMC employees.

Fletcher Allen Preferred Medical Plan Pre-Approval Form

Please be advised that there have been several changes to the Pre-Approval form for the Fletcher Allen Preferred Medical Plans. Please go to the VMC website at www.vermontmangedcare.org then go to Providers/Provider Manual/Practice Management Operational Tools. You will find the updated form under FAP. If you do not have access to the VMC Website please contact your Provider Relations Representative, Elizabeth Roach or Carrie Germaine at 847-8161 or 1-800-639-3881 and they will be happy to provide you with a copy.

2009 Vermont Legislative Acts



The 2009 Legislative Year produced some significant health care legislative Acts and they will be continuing to work on health care reform this fall. Here is a short summary of some of the more relevant Acts. This is not a complete list of the legislative Acts enacted by the VT Legislature that may have an impact on your practice. Please confer with your attorney for legal advice on how the activities of the Vermont Legislature impact your practice. Unless noted otherwise, the provisions of these Acts are effective on July 1, 2009:

Act No. 0061 An Act Relating Health Care Reform

- Implementing Health Care Provisions of the American Recovery and Reinvestment Act (ARRA); a comprehensive Health Information Technology Plan for the State of VT.
- Worker's Compensation Medical Claim Payment Standards; extensive clarifications to the billing processes.
- Fair Contract Standards; creates standards and transparency requirements for health plans' relationships with health care practitioners. Developed by the Vermont Medical Society, includes requirements related to 1) Timely Payment, Effective on or before July 1, 2010, reduces timely payment or denial to 30 days for all claims; 2) Overpayment Recovery; Effective no later than July 1, 2011, expanded guidelines; 3) Claim Edit Standards; Effective no later than July 1, 2011,

requires disclosure; 4) Disclosure Requirements and Standards for Health Care Contracts; Effective September 1, 2009 for requests; January 1, 2010 automatically to all providers; guidelines; 5) Contract Amendments; guidelines and limitations; 6) Most Favored Nation Clauses Prohibited; and 7) Rental Networks, Effective no later than January 1, 2010, access guidelines.

- Treatment of a Partner of a Patient Diagnosed with Chlamydia; permits a provider to treat/dispense prescription drugs to the partner(s) of a patient with a diagnosed sexually transmitted Chlamydia infection without an examination of the sexual partner(s).
- Study on Emergency Response for Patients Suffering a Stroke; Effective May 12, 2009, requests VAHHS convene a workgroup to recommend ways to integrate timely, effective stroke treatment in VT.
- Vaccine Purchasing Pool; directs the DOH to establish a cost free universal access immunization pilot program for children and adults utilizing funds through the CMS Global Commitment for Health waiver. A pilot program will acquire and distribute the vaccines to Provider offices from January 1, 2010 to December 31, 2012. Insurers will reimburse the state for the vaccine cost plus an administrative surcharge.
- Health Workers Program; directs DOH to make recommendations to develop a program to provide health care services to workers in 3-5 counties of the agricultural sector.
- Orally Administered Anticancer Medication; coverage required Effective April 1, 2010, implemented no later than April 1, 2011; payers must provide coverage for orally administered anticancer medications on a financial basis that is no less favorable than that provided for IV or injected anticancer medications.

Act No. 0025 An Act Relating to Palliative Care; this Act updates and adds to existing statutes to incorporate Palliative Care with a Patients' Bills of Rights and Right to Information including 1) a patient has the right to be informed of all evidence-based options for care and treatment, including palliative care; 2) providers may no longer withhold information from a patient for any reason of judgment or by providing it to a family member instead.

Act No. 0034 An Act Relating to Insurance Coverage for Colorectal Cancer Screening; Effective October 1, 2009, implemented no later than October 1, 2010; this Act requires insurers to provide coverage for colorectal cancer screening. Benefits are subject to a co-payment no greater than the co-payment applicable to care or services provided by a primary care physician under the insured's policy, provided that no co-payment shall exceed \$100.00; not subject to deductible or coinsurance requirements.

Act No. 0049 An Act Relating to Containing Health Care Costs; this Act directs various agencies to conduct analysis and generate reports on specified health care issues.

- Utilization Rate Variances; VPQHC will analyze variations in the use of health care provided to identify "treatments or procedures for which the utilization rate varies significantly", "where the utilization rates are changing faster", and to "recommend solutions to contain health care costs by appropriately reducing variation, including by promoting the use of equally or more effective, lower-cost treatments and therapies".
- Certificate of Need; the program is now a 5 year certificate which expires absent a petition for extension, and the program is expanded to include mobile technology and ambulatory surgical centers.



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VMC Board of Directors

* Robert Pierattini, MD, Chairperson Fletcher Allen Health Care Psychiatry Services	Jerry Larrabee, MD Fletcher Allen Health Care University Pediatrics
Peter Casson, MD Fletcher Allen Health Care Women's Health Services	Mitchell Norotsky Fletcher Allen Health Care Surgery - Cardiac & Thoracic
Christopher Commichau, MD Fletcher Allen Health Care Neurology	Thomas Peterson, MD Fletcher Allen Health Care Family Practice
PM Costello, MD Essex Pediatrics Pediatrics	Mark Pitcher, MD Good Health, P.C. Internal Medicine
Roger Deshaies Fletcher Allen Health Care, CFO	Paul Reiss, MD Evergreen Family Health Family Practice
Nancy Drucker, MD Fletcher Allen Health Care Pediatric Cardiology	Ted Sirtotta, CFO Northwestern Vermont PHO
Jonathan Hayden, MD Fletcher Allen Health Care Internal Medicine	Paul Unger, MD Vermont Center for Cancer Medicine, Inc. Hematology/Oncology
Mark Healey, MD Mountain View Surgery Surgery	James Viapiano, MD Fletcher Allen Health Care Anesthesiology

Vermont Managed Care Contact Numbers



Phone #	Phone # FAP	Fax #
Main		
802-847-8161		802-847-6214

Customer Service (CS) / Case Managers (CM)		
802-847-8369 (CS)	802-847-4862 (CS)	802-847-6213 (CS)
800-639-3881 (CS &CM)	866-582-6836 (CM)	802-847-6212 (CM)

Provider Enrollment (PE) / Provider Relations (PR) / Credentialing		
802-847-8161 or		802-847-3427 (PE)
800-639-3881		802-847-6214 (PR)
		802-847-6254 (CRED)

A complete phone list of all staff is available in the VMC Provider Manual available online at www.vermontmanagedcare.org.

* Board Officers