

## CareOregon is Online

CareOregon's website, [www.careoregon.org](http://www.careoregon.org) went online February 4, 2002. In designing the website, our intent was to create a site that would be user-friendly and useful, visually attractive and reflective of CareOregon's values. Our website is also part of a larger communication strategy that informs various target audiences – including clinicians, CareOregon members, policy makers and the general public – of the broad scope of CareOregon's work.

The Clinician section of the website provides you with online versions of CareOregon's Provider Manual, Provider Directory and Formulary that are updated in real time. You can also read this newsletter, and past newsletters, online. We are currently developing an interactive OHP Prioritized List Inquiry which we expect to have online by early May. Additionally, we are designing components for the Clinician section, accessible via a protected logon, that will allow you to review claims and utilization data specific to your practice or clinic.

By reviewing the Member section of the website, you can easily see our Member Handbook, newsletters and health information provided to CareOregon members. Knowing what health information is being provided to members enables you to reinforce preventive health messages or refer members to the website. We are currently in the process of translating the website into Spanish, Russian and Vietnamese so it is accessible to a wide array of CareOregon members.

*Questions and comments about the website can be directed to [webmaster@careoregon.org](mailto:webmaster@careoregon.org).*

## Utilizing a Chronic Care Model with Diabetes

To more effectively treat diabetes, eighteen clinics statewide – ten of which are contracted with CareOregon - are participating in a Diabetes Collaborative/OMPRO program that utilizes the chronic care model. This care model is based upon the premise that clinical outcomes for chronic diseases can be improved through more productive interactions between patients and clinicians. Strategies to promote this interaction include: active patient involvement in managing care, evidence based treatment guidelines, information tracking, connections to community resources, and financial and planning resources for clinicians.

An initial example of the chronic care model in action is occurring at the Sandy Clinic, a primary care clinic of the Clackamas County Health Department. The clinic offers regular diabetes group visits. Currently there are two groups – one for English speaking and the other for Spanish speaking adults, with 6-8 participants per group. Group participants set individual measurable health improvement goals (e.g. walking 2 blocks every day) and at their group visit have the opportunity to talk about how things are going, share a healthy snack that reinforces proper diet exchanges, and have one-on-one time with their provider. Additionally, the clinic has developed a relationship with a local fitness center that will provide individual fitness center passes to the participants. The group visits do not supplant routine visits with providers but offer an extra measure of education and support to reinforce prevention and good diabetic care.

Clinic participation in the chronic care program requires a one year commitment, attendance at three 2 day educational trainings and a summary conference, and monthly progress reports. Currently CareOregon is providing direct support to four clinics participating in the program. Support includes underwriting training tuitions, QI technical assistance, and a grant to purchase snacks and fitness center passes for the group visits at Sandy Clinic.

*To learn more about the Diabetes Chronic Care Model programs, please contact Sue Staples, RN, CareOregon Clinical QI Coordinator, at 503-416-3649.*

## No Good Deed Goes Unpunished

In an effort to reduce the number of pended referrals and expedite claims payment, we made internal changes to streamline the processing of referrals. Unfortunately, we failed to communicate these changes externally before putting them into effect and caused confusion in some provider offices. We apologize.

Our internal procedures, effective February 18th:

- PCPs continue to submit complete and accurate referrals.
- The 48 hour rule remains in effect; however, we will no longer pend referrals.
- If clinic notes are needed to process a referral, submit them within 24-48 hours to avoid automatic denial.
- If you use EZNet: after 48 hours, only referrals entered in EZNET or denied referrals will appear on the EZNet screen.
- If you do not use EZNet: you will not experience any changes in the notification process.
- For denials or change in the number of visits or treatments (i.e. OT, PT, speech therapy, acupuncture, chiropractor or anesthesia for pain), you'll receive notification.
- If you have not been notified of or, in EZNet do not see, a denial after 48 hours, your claim will be paid.
- Authorization numbers are no longer necessary to process your claims. If you need an authorization number to produce a claim, we can assign one to you.
- Consistent with CareOregon policy, denied referrals can be appealed.

*If you have any questions about the changes in our internal procedures, please contact your provider representative. For questions on a specific referral or to get an authorization, please contact Diane Leonard, Referral Coordinator, at 503-416-1412.*

## Customer Service

### Telephone Statistics

	DEC 2001	JAN 2002
Calls Received	17,422	23,478
Average Speed of Answer	13 seconds	14 seconds

Industry Standard – Average speed of answer = 30 seconds

### Claims Processing

	DEC 2001	JAN 2002
Total Number of Claims Received	73,419	95,539
Total Number of Claims Paid	73,930	103,209
Percent of Claims Paid Within 14 Calendar Days	84.93%	85.03%

Industry Standard – 85% of claims paid within 14 calendar days

## Check Your Mailbox for Our 2002 Formulary

In addition to posting our formulary online, we are in the process of sending out hard copies of our 2002 Formulary to clinician and provider offices. If you do not receive a formulary by the beginning of April, please contact Brian Ritz, Distribution Coordinator at 503-416-1481 or [ritzbr@careoregon.org](mailto:ritzbr@careoregon.org).

## Addressing Concerns

If a situation arises regarding customer service at CareOregon, we are committed to working with you to resolve the issue. We will bring the right people to discussion, identify the problem or systems issue and work with you to bring the problem to resolution.

*Concerns about customer service should be directed to Derrick Dale, Customer Service Director, at 503-416-3638.*



*CareOregon is a not for profit 501 [c] 3 Medicaid managed care plan founded in 1993 by Multnomah County Health Department, Oregon Health Sciences University and Oregon Primary Care Association. CareOregon partners with both safety net and private practice clinicians in 16 counties to assure access and quality health services to vulnerable populations.*

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