

# The Provider Connection



*A Newsletter from Provider Network Operations*

## *The Doc is In*

As of February 20<sup>th</sup> I will be stepping down as the Chief Medical Officer for Community Health Options. I wanted to take this opportunity to introduce the new CMO, Edward Yoon, MD. Dr Yoon is a graduate of Northeastern Ohio University College of Medicine and he is Board Certified in both Family Medicine and Obstetrics and Gynecology. He is currently the Medical Director for the Southern Maine Health Center-Saco. During his career he has held leadership positions at Martins Point, Capital District Physicians Health Plan and Blue Shield of Northeastern New York. We are excited to have him join our leadership team.

I also wanted to thank all of our participating providers and health care systems for the opportunity to work so well together for the benefit of our members. Having practiced in Maine for 35 years I have come to realize that the Medical Community here is very special. My work at Community Health Options has only reinforced my appreciation of your dedication and professionalism. I know that you will give Dr. Yoon the support and inspiration that you have given me.

*John Yindra, M.D.*

---

## *Thank you Dr. Yindra!*

John Yindra, MD, joined Maine Community Health Options as Chief Medical Officer (CMO) on February 25, 2013. Prior to that he was associate medical director of the Maine Medical Center Physician Hospital organization (MMCPHO) and was involved in efforts to spread the Patient Centered Medical Home (PCMH) model to its primary care physicians. He also did - and continues to do - clinical work one day a week, currently at the DFD Russell Medical Center.

John's many contributions to Health Options include assisting in the development of Health Options plans including the Chronic Illness Support Program (CISP); leading the Credentialing and Quality Assurance Committees; and promoting the principals of Value-Based Insurance Design (VBID). From start-up to full operation, John oversaw the considerable task of building out our Medical Management team, which now stands at 26 strong. John receives high praise from those who report to him; they describe him as supportive, fair, responsive and empowering. He is also well-respected by the provider community.

We thank Dr. Yindra for his five years of dedicated service to Health Options, wish him well as he moves on to the next phase of his career, and hope that he finds adequate time to indulge in his favorite pastimes of fly fishing and travel.

*Kevin Lewis*

*President & CEO*

## eviCore Healthcare Update

In October, Community Health Options announced our new partnership with eviCore healthcare as a way to provide our Members with access to the highest quality of care at the lowest cost. As we enter 2018, we'd like to provide you with more details about how this change will affect your practice's processes.

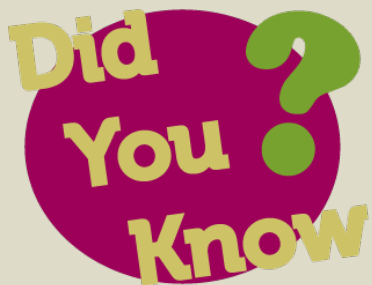
As previously communicated, beginning December 22, 2017, eviCore Healthcare is managing non-emergent (routine and urgent) Prior Approval requests for:

- Advanced Imaging (MR, PET, CT, Nuclear Medicine)
- Ultrasound (OB & Non-OB)
- Cardiac Imaging (Myocardial Perfusion Imaging, Echo, Echo Stress, Diagnostic Heart Cath, Cardiac MR, PET, CT)
- Spine Surgery
- Joint Surgery
- Interventional Pain Management
- Physical & Occupational Therapy
- Speech Therapy
- Chiropractic services

When a non-emergent outpatient service found in the list above is needed, a Prior Approval request must be processed through eviCore healthcare. For your convenience, eviCore offers a streamlined portal for the request at [www.evicore.com](http://www.evicore.com). A decision will be rendered upon submission.

For routine and urgent medical services that require Prior Approval but are not listed above, Health Options is now accepting online requests on our new provider portal at <https://provider.healthoptions.org>.

Health Options' partnership with eviCore is designed to meet the needs of our Members. To support this transition, we are tracking provider feedback and capturing their recommendations on how we can enhance the experience. We are meeting weekly with eviCore to review and address identified issues. As a valued provider partner of Health Options, we look forward to an ongoing dialogue with you about this program.



eviCore and Community Health Options have an implementation website that includes pertinent information to assist with the Prior Approval process including a full list of CPT Codes that require authorization, a quick reference guide, frequently asked questions and a copy of the provider orientation session.

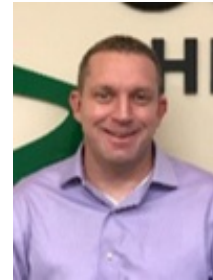
**"[Click Here](#)"** to visit the Community Health Options Implementation website.

# Provider Relations Update

**Provider Network Operations is please to welcome Leigh-Ann Morgan and Scott Motaka to the Contracting team.**



**Leigh-Ann Morgan** joins us from Ahold Delhaize where she most recently held the position of Manager, Managed Care Pharmacy Department and delivered financial business models and recommendation to Leadership, reviewed, negotiated and implemented Medicare, Medicaid and Commercial reimbursement contracts and was accountable for Third Party claim adjudication for 187 pharmacies. Previously, Leigh-Ann was a Supervising Manager of Delhaize's Employee Benefits Department. Her prior work includes many years as a Group Employee Benefits Senior Account Executive at Clark Insurance/ Turner Barker Insurance. Leigh-Ann holds a MBA from Husson College.



**Scott Motaka** is a Certified Commercial Contracts Manager with years of experience working with healthcare providers. He most recently held the position of Manager of Insurance and Payer Affairs at The Renfrew Center in Philadelphia, PA where he provided pre-award and post-award contract management. Prior to that, Scott worked as a Managed Care Contracting Executive, contract specialist and analyst providing analytics and billing and financial management for physician groups. Scott received his MBA from The Pennsylvania State University.



**Welcome!**

**Chief Medical Officer**

**Dr. Edward Yoon, MD, MBA,** joins Health Options on February 20 as Chief Medical Officer (CMO). Dr. Yoon is a graduate of Northeastern Ohio University College of Medicine and the Isenberg School of Management at the University Of Massachusetts, Amherst and is Board Certified in both Family Medicine and Obstetrics and Gynecology. He most recently served as the Medical Director for the Southern Maine Health Center-

Saco. During his career he has held additional leadership positions at Martins Point, Capital District Physicians Health Plan and Blue Shield of Northeastern New York. He practiced for many years at Community Care Physicians in New York and held the role of Physician Director for the last five years of his time there.

We are excited to have Ed join our leadership team.

## General Updates

### Medical Management

The Medical Management Department supports Utilization Management and Population Health services. As part of a departmental restructuring in June to gain efficiencies and effectiveness, the Population Health and Utilization Management teams merged to become a unified Medical Management team. This restructure maximizes resources and integrates utilization and care management in an effort to best support the mission and values of Health Options. With enhanced risk stratification tools, we have greater access to data analytics that helps us identify our most vulnerable Members who would likely benefit from our team's enhanced collaboration with their providers, and it guides our targeted outreach programs that are geared toward supporting self-management strategies based on the Member-provider's treatment plan. In December, Medical Management partnered with eviCore to perform Prior Approvals for a variety of services to include therapies, musculoskeletal interventions, cardiac imaging, advanced imaging and ultrasounds.

### Complex Care Management

Health Options' Complex Care Management (CCM) program is developed in accordance with Case Management Society of America (CMSA) standards of practice, National Committee for Quality Assurance (NCQA) Health Plan Quality Standards, evidenced-practice guidelines and applicable State and Federal regulations. Complex Care Management provides intensive, personalized care

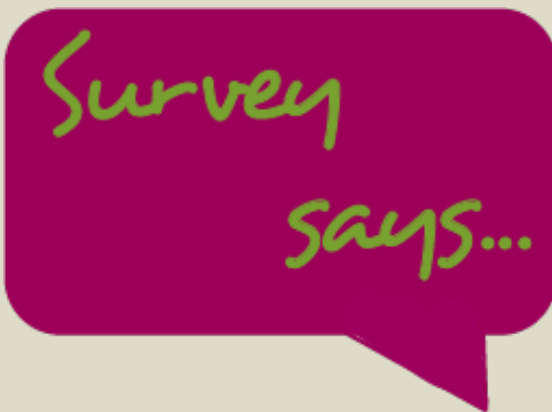
### RE Accessing UM Criteria and Guidelines

**Availability of Utilization Management Criteria and Guidelines:** Members and providers may obtain a copy of the actual benefit provision, guideline, protocol or other similar criterion on which the denial of coverage decision was based free of charge. This can be sent to you upon request by calling **Health Options toll-free number (855) 624-6463, Monday-Friday, 8am-6pm (ET)** or it can be reviewed over the phone by reading the criteria to you, if preferred.



management services, incorporating goal-setting for Members who have complex medical needs and require a wide variety of resources to manage their health and improve their quality of life. Services are provided in a collaborative process that assesses, evaluates, plans, implements, coordinates and monitors the options and services required to meet an individual's health needs and encourage self-management.

Providers can refer patients to the Medical Management Team for evaluation and potential inclusion in the CCM. If a Member does not meet criteria for our Complex Care Management Program, their needs may still be addressed in our Chronic Condition Management, Care Management, Point of Service, Behavioral Health or Disease Management programs. provider may refer to Complex Care Management via direct referral by calling or encouraging a Member/Caregiver to call Member Services. We often receive referrals from Hospital Discharge Planners, provider office Care Managers and Prior Approval requests sent to our Medical Management team indicating diagnosis that meets inclusion criteria. Providers may refer to Complex Care Management via direct referral by calling or encouraging a Member/Caregiver to call Member Services Monday through Friday, 8 am to 6 pm, at (855) 624-6463.



### Provider Updates

Health Options values the relationship we have with you.

We are conducting a brief survey to gather feedback on our service to you and information on how we can improve the care given to our Members.

Please take a few minutes to fill out this survey.

[Take Survey](#)

### New or Updated Clinical Guidelines

Health Options has recently adopted new or updated clinical guidelines. For more information or to review the clinical guidelines click on the links below.

- [2018 American Diabetes Association Standards for Medical Care](#)
- [USPTF Guide to Preventive Service 2014](#)

Maine Community Health Options | (207) 402-3347 | [provider@healthoptions.org](mailto:provider@healthoptions.org) | [HealthOptions.org](http://HealthOptions.org)

STAY CONNECTED

