

PCP E-NEWSLETTER

For Medicare Advantage providers

March 2020

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Message from the Texas Chief Medical Director

Hello,

March is here, and our first quarter is almost complete. We truly value your hard work and dedication to providing quality care for our Cigna patients. As we move forward, it is vital that we keep aiming for, or maintaining, a Five-Star Quality Rating. Thank you for your continued partnership. Let's keep up the fantastic work.

In good health,

Dr. Carlos Gonzalez
Chief Medical Director



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COLORECTAL CANCER AWARENESS MONTH

During March, it's important to raise awareness around the importance of colorectal cancer prevention through early detection. Among cancers affecting both men and women, colorectal cancer is the second leading cause of cancer deaths in the United States. Each year, roughly 140,000 Americans are diagnosed with colorectal cancer, and 50,000 people die from it.

The risk increases with age and more than 90% of colorectal cancers occur in people over age 50. The good news is that 6 out of 10 deaths from colorectal cancer can be prevented if those over age 50 get regular screenings. Additionally, there are several ways to reduce risk. These include consuming diets low in processed meats; eating lots of fruits, vegetables and whole grains; getting regular exercise; limiting alcohol use; and eliminating tobacco consumption.

Below are screening recommendations from three leading organizations.

Organization	Recommendation
American Cancer Society	Starting at 45 years of age and continuing through the age of 75 years, adults at average risk* of CRC with a life expectancy of more than 10 years should undergo regular screening with either a high-sensitivity stool-based test or a structural (visual) examination, depending on patient preference and test availability. Clinicians should individualize screening decisions for individuals aged 76 through 85 years, and discourage individuals older than 85 years from continuing CRC screening.
American College of Gastroenterology	The preferred test is colonoscopy every 10 years, beginning at 50 years of age. Screening should begin at 45 years of age in African Americans. FIT should be offered to patients who decline colonoscopy.
U.S. Preventive Services Task Force	Screening for CRC should start at 50 years of age and continue until 75 years of age. Stool-based tests: › gFOBT every year › FIT every year › FIT-DNA test every one or three years Direct visualization tests: › Colonoscopy every 10 years › Computed tomographic colonography every five years › Flexible sigmoidoscopy every five years › Flexible sigmoidoscopy every 10 years with FIT every year

CRC = colorectal cancer; FIT = fecal immunochemical test; gFOBT = guaiac-based fecal occult blood test.

*An average-risk adult is defined as an asymptomatic person without a personal or family history of adenomatous polyps or other illness that predisposes to CRC (e.g., inflammatory bowel disease, familial adenomatous polyposis, hereditary nonpolyposis colorectal cancer)

By encouraging early screenings, a healthier lifestyle and continuing to work with families and caregivers through a collaborative model, you can help your patients achieve better outcomes and decrease the incidence of colorectal cancer.

References

- <https://www.cdc.gov/cancer/dcpc/resources/features/colorectalawareness/index.htm>
- <https://www.aafp.org/afp/2018/0515/p658.html>
- <https://www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/acs-recommendations.html>

SOCIAL DETERMINANTS OF HEALTH: FOOD INSECURITY

The U.S. Department of Agriculture (USDA) defines food insecurity as lacking consistent access to adequate food for an active, healthy lifestyle.¹ Approximately one in nine Americans and one in seven Texans suffer from food insecurity. Thankfully, various food benefit programs are available to help.



“211” Call Center

The “211” referral and information center connects callers with local and state benefit programs 24 hours a day.² Instruct your patients to dial “211” and ask to be connected with food benefit services in a zip code of choice. The Call Center will access their database of resources and refer the caller to the correct agency of support. Food service information is provided for SNAP (Supplemental Nutrition Assistance Program), local food banks, soup kitchens, Meals on Wheels and congregate meal centers.

Meals on Wheels

Meals on Wheels is a government food program which prepares and delivers meals to the homes of individuals requiring assistance with retrieving and preparing meals for themselves. Founded in 1943, Meals on Wheels has been providing roughly 218 million meals per year. Funding typically comes from various religious institutions and nonprofits. Unfortunately, due to the volume of need, waiting lists in all areas can range from 6 to 12 months. General eligibility: 60 years of age and older, homebound status, unable to shop and/or cook meals.³ Patients may dial “211” to get in touch with a local Meals on Wheels program.

Meal plan benefit post-discharge

Cigna plan customers are eligible to receive 14 nutritional meals delivered to their home after being discharged from a hospital stay. This benefit is for up to three qualified hospital stays per year. For more information, your Cigna patients may visit this Evidence of Coverage link available at [Cigna.com/static/medicare-2020-cigna-com/docs/h4513-054-cigna-healthspring-preferred-hmo-eoc.pdf](https://www.cigna.com/static/medicare-2020-cigna-com/docs/h4513-054-cigna-healthspring-preferred-hmo-eoc.pdf).

Community dining (congregate meals program) – Harris County

Local community centers in Houston and Harris County provide community dining meals for older, vulnerable adults. These centers provide meals and opportunities for social engagement at 35 congregate meal sites throughout Harris County. Transportation to and from these dining locations is also available for eligible older adults. For more information, patients may contact the Harris County Area Agency at **832-393-4301** or visit www.houstontx.gov/health/Aging/nutrition_services.html.⁴

Food banks

Feeding America has food banks which serve large areas. Patients may visit www.feedingamerica.org/hunger-in-america to find a feeding program in their community.⁵

References

1. <https://hungerandhealth.feedingamerica.org/understand-food-insecurity/>
2. <https://www.211texas.org/>
3. <https://www.mealsonwheelsamerica.org/>
4. https://www.houstontx.gov/health/Aging/nutrition_services.html
5. <https://www.feedingamerica.org/hunger-in-america/texas>

CAHPS CORNER

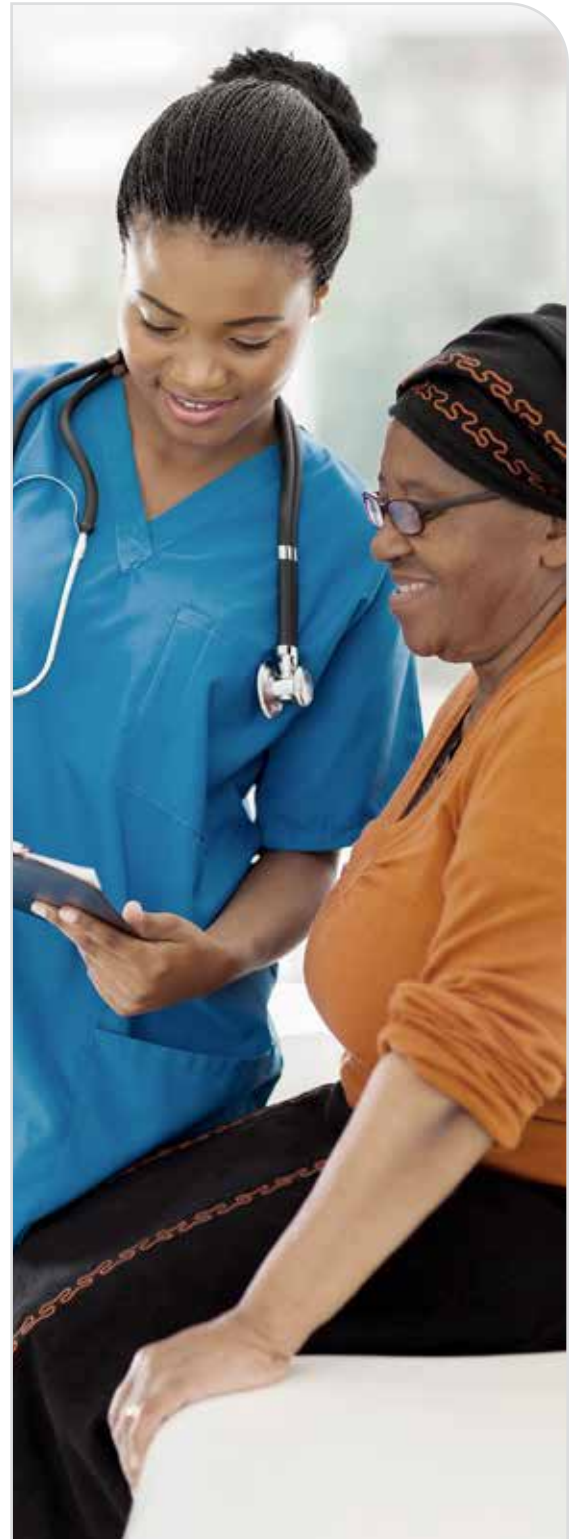
CAHPS 2020 is in full swing and we need your help to ensure your patients continue to have positive experiences in your office.

The Consumer Assessment of Healthcare Provider and Systems (CAHPS) is an annual survey developed to better understand patient health care experiences through scientifically valid strategies and tools that assess patient experience, report survey results and help organizations improve overall quality of care.

Patient experiences encompass interactions that patients have with the health care system, including, but not limited to, care from their health plan, primary care provider, pharmacy benefits and other health care facilities. Patient experience includes several aspects of health care delivery such as timely appointments, easy access to information and good communication with health care providers.

CAHPS surveys are a direct reflection of a patient's experience with their primary care provider as well as their health plan. The Centers for Medicare & Medicaid Services (CMS) expects plans and providers to be engaged. Key areas of focus for our providers include:

- › Wait times
 - Install timers and clocks outside of each room to track wait times.
 - Communicate wait times with patients.
- › Appointment scheduling
 - Send appointment reminders via text message, phone call or email.
 - Add urgent appointment slots into your daily schedule.
- › Care coordination with specialist
- › Patient flow
- › Patient communication
- › Utilize mid-levels
- › Annual flu vaccine administration
- › Provider patient surveys
 - Request our internal provider survey to help track the experiences your patients have in your office. The results are put into a dashboard for review year-round.



Examples of CAHPS survey questions focused on key areas.

Wait time includes time spent in the waiting room and exam room. In the last six months, how often did you see the person you came to see within 15 minutes of your appointment time?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

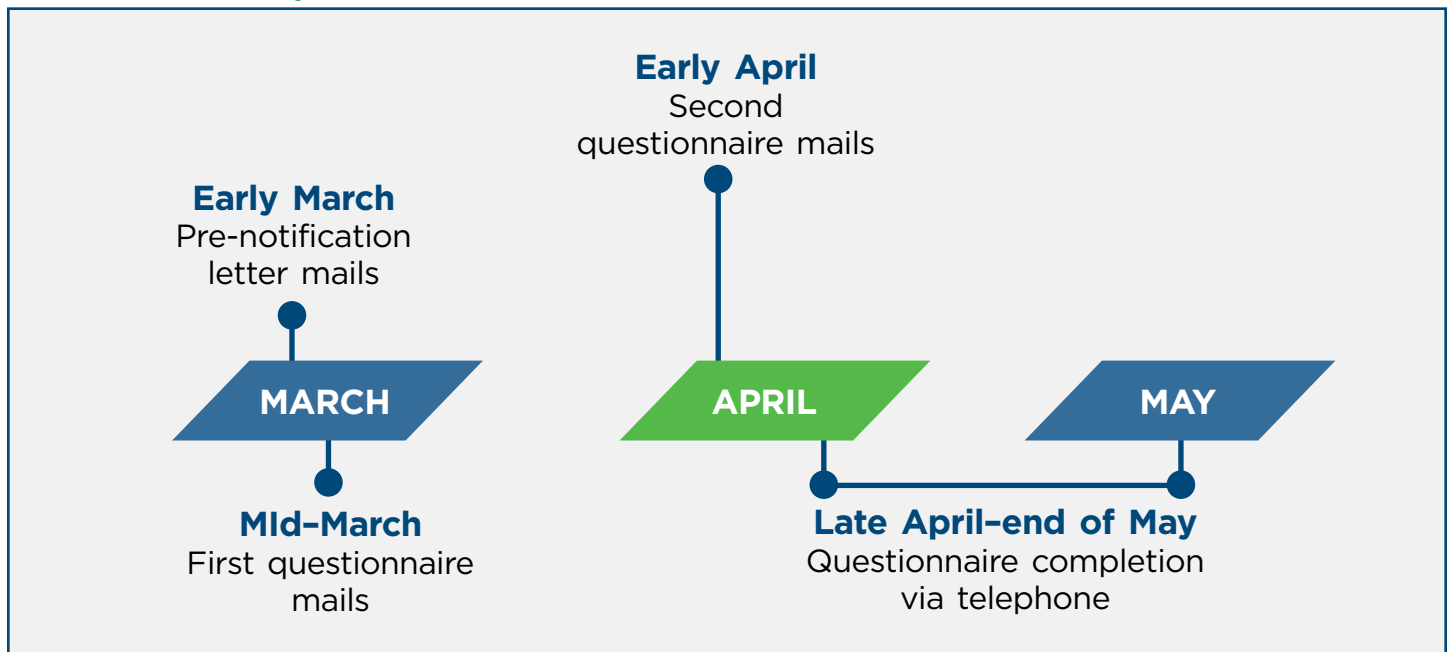
In the last six months, when your personal doctor ordered a blood test, x-ray or other test for you, how often did someone from your personal provider's office follow up to give you those results?

- ☐ Never
- If Never, go to question 22
- ☐ Sometimes
- ☐ Usually
- ☐ Always

In the last six months, when your personal provider ordered a blood test, x-ray or other test for you, how often did you get those results as soon as you needed them?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

CAHPS 2020 Survey Timeline



SHARE YOUR FEEDBACK

Please email us any questions you have or topics you'd like discussed. Our goal is to tailor our content to meet your needs. We look forward to hearing from you at:

PCP_ENewsletter_Team2@HealthSpring.com

