

PrimePartners

for Case Managers

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Clinical Practice Guidelines and Audit Results

Jennifer Bundy, RN, MSN, PHN, CMCN, CCP, Complex Care and Disease Management Manager

Each year, PrimeWest Health notifies providers of the clinical practice guidelines that we have adopted or continue to approve. These guidelines and their official sources are as follows:

- **Asthma** – National Heart, Lung, and Blood Institute (NHLBI)
- **Diabetes** – American Diabetes Association (ADA)
- **Congestive Heart Failure (CHF)** – American Heart Association (AHA)
- **Adult Depression** – Institute for Clinical Systems Improvement (ICSI)
- **Chronic Obstructive Pulmonary Disease (COPD)** – ICSI
- **Preventive Services for Adults** – ICSI
- **Childhood Depression** – American Academy of Child and Adolescent Psychiatry (AACAP)
- **Chemical Dependency** – American Psychiatric Association (APA)
- **Child and Teen Checkups (C&TCs) and Immunizations** – Minnesota Department of Human Services (DHS)
- **Dental Services** – DHS
- **Children's Therapeutic Support Services (CTSS)** – DHS

These guidelines can be accessed directly through the PrimeWest Health website at www.primewest.org/practiceguidelines.

In addition, each year PrimeWest Health conducts an audit of provider compliance with these guidelines as evidenced by pertinent Healthcare Effectiveness Data and Information Set (HEDIS) scores. In 2014, the audit focused on the following areas:

- Preventive health care for children, adolescents, and adults
 - Childhood immunizations
 - Well-child visits (C&TCs)
 - Breast cancer screening
 - Cervical cancer screening
 - Chlamydia screening
 - Colorectal cancer screening
 - Influenza vaccination
 - Pneumonia vaccination
- Care of members with diabetes
- Care of members with asthma
- Timeliness of prenatal care
- Diagnosis and treatment of COPD
- Antidepressant medication management
- Congestive heart failure and hypertension: controlling high blood pressure

To view a summary of the audit results, please see the *PrimePointers* article at www.primewest.org/2014Summer/ClinicalPractice. To request the full clinical practice guidelines report, please contact **Jennifer Bundy**. 

Customized Living (CL) Tool Reminder

Kristi Shamp, RN, BSN, PHN, CPHM, SNP Senior Care/UM Care Coordinator

When a member enrolls in PrimeWest Health, a member assessment is completed. If the assessment does not reveal a change in needs, PrimeWest Health will honor the Customized Living (CL) services previously approved by the Minnesota Department of Human Services (DHS). County case managers must add the CL information to the formal services section of the care plan, generate a service agreement for the provider, and send a copy of the approved DHS CL tool to PrimeWest Health via email to seniorcare@primewest.org.

If the assessment completed at the time of enrollment does reveal a change in needs, a PrimeWest Health CL tool must be completed and submitted to Cirdan to authorize CL services. If you have questions, please contact **Kristi Shamp.** 

Authorization of Essential Community Support (ECS) Services

Kristi Shamp, RN, BSN, PHN, CPHM, SNP SNF Senior Care Coordinator

There are two methods for authorization and approval of Essential Community Support (ECS) services in the Medicaid Management Information System (MMIS) for PrimeWest Health members.

1. County staff with MMIS access may enter service agreements directly into MMIS.
2. County staff without MMIS access may submit an ECS workbook through the Minnesota Information Transfer System (MN-ITS) for entry into MMIS by Minnesota Department of Human Services (DHS) staff. The workbook can be found on the DHS ECS home page at http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_148023.

If you have questions, please contact **Kristi Shamp.** 

Nursing Facility Level of Care Criteria (NF LOC)

Kristi Shamp, RN, BSN, PHN, CPHM, SNP SNF Senior Care Coordinator

In December 2014, the Minnesota Department of Human Services (DHS) issued DHS-7028, which includes the description of needs that satisfy Nursing Facility Level of Care (NF LOC) requirements. You can view DHS-7028 by going to <https://edocs.dhs.state.mn.us/> and entering “DHS-7028” in the Search field.

The document includes all assessment items and scores that are used to establish need during a face-to-face assessment or preadmission screening. This document should be used as a reference during your assessment processes.

Weather Alerts

Weather can be the cause of a lot of anxiety and many disasters, accidents, injuries, and life-threatening situations. Being informed and prepared can help decrease anxiety and increase safety. The following is a review of the weather warning terms used by the National Weather Service and several ways our members can access information and receive emergency alerts to increase their level of safety. This information was taken and/or adapted from the Minnesota Department of Public Safety’s Homeland Security and Emergency Management website*.

Weather warning terms

The National Weather Service uses the words “advisory,” “watch,” and “warning” to let you know about potentially dangerous weather. Understanding these terms and knowing how to react can be a lifesaver.

- An **advisory** is issued when hazardous weather is occurring, imminent or likely. Advisories are for less serious conditions than warnings that cause significant inconvenience and if caution is not exercised, could lead to situations that may threaten life or property.
- A **watch** means weather conditions are favorable for dangerous weather to occur. In other words, a “watch” means watch out for what the weather could do, and be ready to act accordingly. You may wish to alter or have back-up plans for any outdoor activities or travel.
- A **warning** means the weather event is imminent or occurring within the warning area and that people need to take shelter immediately.

Wireless emergency alerts

In weather emergencies, warnings can save lives. But traditional warning methods such as television, radio, and outdoor sirens don't always reach everyone.

Emergency officials now have a new way to send warnings directly to cell phones in affected areas –Wireless Emergency Alerts (WEAs). These warnings will be broadcast to all phones within range of designated cell towers through the Commercial Mobile Alert System (CMAS).

- WEA messages may look like a text, or appear over your home screen.
- The alert message will include a unique ringtone and vibration.
- You will never be charged for WEA messages.
- Emergency alerts will not interrupt any calls or downloads in progress. If you're on the phone when the alert goes out, you'll get the message when you end your call.
- You need not have GPS or any other special features turned on to receive the alerts.
- The system does not identify your location or phone number – it simply sends the message to all devices in a given area.
- If you're on the road and enter an area with an active warning, you'll receive a WEA message as soon as you come within range of one of the affected cell towers.

You'll need to turn to other sources, such as television, a weather radio, or local radio station to get more detailed information about what is happening and what actions you should take.

Personal weather notifications

The National Weather Service and many local media outlets also provide electronic alert services via email or text messages to cell phones, computers, or other devices. These services are available through subscription. The following is a sampling of various electronic alerting services in Minnesota:

- National Weather Service (<http://inws.wrh.noaa.gov/>)
- Accuweather.com (<http://downloads.accuweather.com/>)
- WCCO (<http://minnesota.cbslocal.com/wireless/>)
- KARE11 (<http://static.kare11.com/newsletters/>)
- KMSP (www.myfoxtwincities.com/weather)

Emergency preparedness and warning apps for smartphones

Get Smart! Today's smartphones and mobile devices can do more than just communicate—they can help you prepare for, respond, or recover from emergencies and disasters. Dozens of apps are available from authoritative sources such as FEMA or the Red Cross—and depending on your type of phone and service, many are free.

Some of these tools can warn you of imminent weather dangers, help you build an emergency kit, locate an emergency shelter, or even make your phone work as a beacon or flashlight.

Just perform a search through the app store on your phone for words like “weather” or “preparedness” or “emergencies and download an app you like.

Please note, some apps are free and some are not.

***Source:** Minnesota Department of Public Safety. Accessed on April 20, 2015. Available online at <https://dps.mn.gov/divisions/hsem/weather-awareness-preparedness/Pages/alerts-warnings-types-of-warnings.aspx> and <https://dps.mn.gov/divisions/hsem/weather-awareness-preparedness/Pages/alerts-warnings-personal-alerts.aspx>. 

Spring Has Sprung! Still Depressed?

Now that spring is here, it may feel like there are signs of happiness everywhere. Flowers are in bloom and the sun is shining, and it may seem like people are going about their daily business with an extra spring in their step. Some of our members would love to feel this way, but they don't. And the fact that they feel depressed while everyone else seems happy can make them feel even more depressed. The pressure to be "out there" with everyone else can be overwhelming. Although many of us associate depression with the winter months, a lot of people suffer from depression in the spring.

One reason that people may find their depression worse in the spring has to do with change. Any kind of change, such as a shift in the weather, can cause anxiety. And that anxiety can lead to deepened depression. Our bodies go through a change with the arrival of spring. Seasonal Affective Disorder (SAD) has been well-documented in winter months—the sun goes away and our hormone levels change. But SAD can happen in reverse during the spring. After going so long without sun, our hormones change again once the sun comes back out.

Allergies can play another role in springtime depression. In fact, people who suffer from allergies seem to be at a higher risk of depression. Allergies can cause headaches, fatigue, and upset to sleep schedules. All of this can lead to a depressed mood.

Pressure to feel good, mental and physical changes due to the change in seasons, and allergies can all play a role in depression. If members are depressed, explain to them that they should not avoid seeking treatment because they think they shouldn't be feeling the way they do. Encourage them to talk to their health care provider. The provider may be able to recommend therapy or counseling or prescribe medication to help them cope. He/she can also put them in touch with support groups where they can talk with other people who are experiencing the same or similar symptoms.

Remind members that if they ever have thoughts of suicide or harming themselves or others, they can call **911** or **1-800-SUICIDE** (toll free). If they don't feel comfortable talking on the phone, they can always text **TXT4Life**. When they text "Life" to **61222**, a trained counselor will respond to their text. If the counselor feels there is immediate danger, he/she will contact local emergency services.

This spring, encourage members to take time to think about their feelings and let them know they are not alone.

Source: Borchard, Therese. "April Is the Cruellest Month: Why People Get Depressed and Anxious in the Spring." Everyday Health Media, LLC. Accessed online April 20, 2015. Available online at www.everydayhealth.com/columns/therese-borchard-sanity-break/april-cruellest-month-depressed-anxious-spring/. 

Be Safe while having Fun in the Sun

Dawn Hartman, RN, SNBC Care Coordinator

After a long winter spent indoors, many of us look forward to spending time outside. The sun can boost our mood and our energy levels and it just feels good! However, it is important to remind members to protect themselves from the sun, even in these early spring days. Each year, more than 3.5 million cases of skin cancer are diagnosed in the United States, with more than 90 percent of cases caused by the sun's ultraviolet rays (UVR). Even a single sunburn increases the risk of developing melanoma, the deadliest form of skin cancer, and the sun's effects are cumulative. Because of this, getting five or more sunburns doubles one's lifetime risk of developing melanoma. This does not mean everyone needs to stay inside all the time; it just means we need to remind members to be smart about sun exposure!

Certain medications contain chemicals that cause the skin to react abnormally when exposed to sunlight or other ultraviolet light sources (such as tanning beds). Because of this, tell members to be aware of any medications they are taking (both prescribed and over-the-counter) that may cause photosensitivity or sun sensitivity. Symptoms of photosensitivity or sun sensitivity can be confused with sunburn and can include red, brown, or blue discolorations; rash; and stinging or itching. If a member is taking medication and thinks he/she is having a reaction to the sun, he/she should contact his/her health care provider to determine if it is a reaction to the sun and not a sunburn. The member's health care provider can also discuss other possible medications that may not cause the same reaction. Remind members to always talk to their health care provider before they change or stop taking a prescribed medication.

Common drugs that cause sun sensitivity

- Antibiotics
 - Doxycycline, tetracycline, ciprofloxacin, levofloxacin, trimethoprim
- Sulfa medications
 - Sulfamethoxazole/trimethoprim, sulfasalazine
- Antihistamines
 - Promethazine, diphenhydramine
- Skin care
 - Benzoyl peroxide, most acne creams such as adapalene and isotretinoin (oral acne medication)
- Nonsteroidal anti-inflammatories
 - Ibuprofen, ketoprofen, naproxen, Celebrex®
- Diuretics
 - Furosemide, hydrochlorothiazide
- Antihypertensives (blood pressure drugs)
 - Diltiazem, enalapril
- Cholesterol drugs
 - Simvastatin, lovastatin
- Estradiol and progestins
 - Oral contraceptives and hormone replacement therapy
- Hypoglycemics
 - Glipizide, glyburide
- Other drugs
 - Amiodarone, quinidine, hydroxychloroquine, coal tar

With a little planning and prevention, you can greatly reduce your exposure to harmful UVRs that can contribute to skin cancer, wrinkles/sagging skin, and sunburn. One very important thing to remember is: **Do not get a sunburn!** Below are some prevention tips to share with members to keep them safe in the sun.

- Stay out of direct sunlight during the hours when the sun is at its most powerful, typically 10 a.m. – 4 p.m. Stay inside or in the shade during these hours (under leafy trees, umbrellas, or roofed areas).
- Wear sun-safe clothing. If you can see light through your clothes, the UVRs are getting through as well. To prevent this, be sure to wear closely woven clothing that covers the body. There are also several clothing options that have ultraviolet protection factor (UPF) labels that show the level of UVRs that penetrate the fabric. For example, a white cotton T-shirt has a UPF of about 5, which allows 1/5th of the sun's UVRs through, where a shirt rated with a UPF of 50 allows just 1/50th of the sun's UVRs though. Some fabrics most likely to have a high UPF rating include lycra/elastane, nylon, polyester, denim (UPF of 1,700!), and corduroys.
- Wear hats with broad brims (3 inches or more) and sunglasses with UV protection (wraparound sunglasses provide the most protection)
- Use a sunscreen with a sun protection factor (SPF) of 15 or higher daily, and for days with extended outdoor activity, use a water-resistant, broad spectrum sunscreen with an SPF of 30 or more. Apply the sunscreen 30 minutes before going outdoors and reapply every two hours using one ounce (two tablespoons) for each application.

Finally, remind members that UVRs bounce off water, sand, concrete, light-colored surfaces, and snow. When spending time working or playing near these areas, everyone needs to take extra care.

Sources: MacNeal, Robert J. Merck Manual. "Photosensitivity Reactions." Accessed online April 20, 2015. Available online at www.merckmanuals.com/home/skin-disorders/sunlight-and-skin-damage/photosensitivity-reactions. Skin Cancer Foundation. "Preventing Skin Cancer." Accessed online April 20, 2015. Available online at www.skincancer.org/prevention/sun-protection/prevention-guidelines/preventing-skin-cancer. ®

Important Dates

✓ County supervisor meeting

Meetings are held on the third Thursday of the month, 10 a.m. – 3 p.m., at PrimeWest Health in Alexandria, unless otherwise noted.

May 21
June 18
July 16
August 20
September 17
October 15
November 19
December 17

✓ County case management educational training

Trainings are held on the fourth Wednesday of the month via webinar from 10 a.m. – noon, unless otherwise noted.

May 27
June 24
July 22
August 26
September 23
October 28
November 25
December 23

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