



## Safely treat **chronic pain**

**Deadly overdoses from prescription opioids are on the rise.** According to the Centers for Disease Control and Prevention, of the more than 64,000 drug overdose deaths in 2016, 20,000 were from fentanyl and fentanyl analogs, or synthetic opioids.

Opioids can play an important role in treating pain. But providers need to use care when prescribing them to treat chronic pain and explore other treatment options first.

The CDC offers guidelines for providers on how to safely prescribe painkillers for chronic pain. Among the guidelines:

- Providers should recommend nonpharmacological and nonopioid therapies before trying opioids to treat chronic pain. Opioids should be prescribed only if their expected benefits outweigh the risks.
- Providers should establish treatment goals with participants, including goals for level of pain and function. If the use of opioids is not leading to meaningful improvement, it should be discontinued.
- Providers should discuss the benefits and risks of opioid use with participants before prescribing the drugs and agree on how to manage their use.
- Providers should start treatment with immediate-release opioids, rather than extended-release opioids, and prescribe the lowest effective dose.
- Providers should think about using urine drug testing before and during treatment to determine if participants are using undisclosed prescription or illicit drugs.
- Providers should consult state prescription drug monitoring program (PDMP) data to review a participant's history of prescription drug use. This can help prevent overdoses and dangerous drug interactions. The data should also be reviewed periodically during treatment.

Learn more and read the complete guidelines at [cdc.gov/drugoverdose/providers/index.html](https://www.cdc.gov/drugoverdose/providers/index.html).

## When should teens transition to adult care?

The American Academy of Pediatrics recommends a transition to an adult care provider between ages 18 and 21.

The Got Transition website, [gottransition.org](https://www.gottransition.org), offers clinical resources and customizable tools to help PA Health & Wellness prepare members for the move to adult care, including “**Incorporating Health Care Transition Services into Preventive Care for Adolescents and Young Adults: A Toolkit for Clinicians**” and **condition-specific transition toolkits**.



# Know your HEDIS facts

**The Healthcare Effectiveness Data and Information Set (HEDIS)** is a set of performance measures developed by the National Committee for Quality Assurance (NCQA). The more than 90 HEDIS measures:

- Examine the effectiveness, availability and experience of care and more.
- Are informed by the 190 million people who are enrolled in health plans that report HEDIS results.
- Are updated annually. The latest measures are available on the NCQA website at [ncqa.org/hedis/measures](http://ncqa.org/hedis/measures).
- Are used by most health plans to evaluate their performance on important aspects of care and service. PA Health & Wellness reviews HEDIS data to identify opportunities to improve performance and ensure members are receiving appropriate care.
- Hold health plans accountable for the timeliness and quality of healthcare services.

We discuss key HEDIS measures in each issue of our newsletter. Please review these measures to make sure you are meeting HEDIS standards, which will help improve our overall HEDIS scores.

HEDIS IN SUMMARY	
MEASURE	DETAILS
<p><b>Breast Cancer Screening</b> This <b>measure</b> assesses women ages 50 to 74 who had at least one mammogram to screen for breast cancer in the past two years.</p>	<p>According to the Centers for Disease Control and Prevention (CDC), breast cancer is one of the most common cancers among women of all racial and ethnic backgrounds. Early detection during routine screenings beginning at age 50 (or 40 for women who have a higher risk) can reduce the risk of death.</p>
<p><b>Cervical Cancer Screening</b> This <b>measure</b> assesses either women ages 21 to 64 who had a cervical cytology (Pap test) performed every three years or those ages 30 to 64 who had cervical cytology and HPV co-testing every five years.</p>	<p>Cervical cancer was previously considered a leading cause of cancer death in women. The availability of effective screening tests for early detection has reduced the risk of death by more than 50 percent over the past 30 years.</p>
<p><b>Chlamydia Screening in Women</b> This <b>measure</b> assesses women ages 16 to 24 who are sexually active and have been tested for chlamydia at least once within the past year.</p>	<p>Chlamydia is one of the most common sexually transmitted infections for young people in the United States, according to the CDC. It is estimated that 1 in 20 sexually active women ages 14 to 24 are infected. Delays in treatment can lead to serious health problems, such as pelvic inflammatory disease and fertility issues.</p>
<p><b>Prenatal and Postpartum Care</b> This <b>measure</b> assesses two factors: the percentage of deliveries that received a prenatal care visit in the first trimester, on the enrollment start date or within 42 days of enrollment in the health plan, and the percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.</p>	<p>Women with low-risk pregnancies should receive an examination at least once during the first trimester of the pregnancy and an exam within four to six weeks after delivery, according to the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists.</p>



## Talking to participants about vaccines

**Some participants may have concerns** about the effectiveness and safety of vaccines for themselves. Providers can play a vital role in educating PA Health & Wellness participants about the importance of immunizations, especially considering that low disease awareness can lead to an increased focus on vaccine risks, according to the **Centers for Disease Control and Prevention (CDC)**.

The CDC recommends providers:

- Educate participants about vaccines and the diseases they can help prevent
- Communicate about the benefits of vaccines
- Discuss risks and side effects of vaccines
- Provide vaccine recommendations
- Reinforce the social norm to vaccinate

Providers can help reinforce their message by using clear language, personal stories and information from credible resources.

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## The impact of asthma

**According to the Centers for Disease Control and Prevention**, more than 18 million adults and 6.2 million children in the U.S. currently have asthma.

Besides causing emergency room visits and hospitalizations, asthma can lead to missed school and work days and limitations on day-to-day activities. However, symptoms can be treated and controlled, allowing participants with asthma to live healthier lives.

The National Committee for Quality Assurance has two Healthcare Effectiveness Data and Information Set measures for analyzing the level of care given to those with persistent asthma between the ages of 5 and 85:

- **Medication Management for People with Asthma:** This measure assesses those who were dispensed appropriate asthma controller medications that they remained on for at least 75 percent of their treatment period.
- **Asthma Medication Ratio:** This measure assesses those who had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year. Asthma patients with an AMR less than 0.5 may be using their controller medication infrequently, leading them to use rescue medication more often.

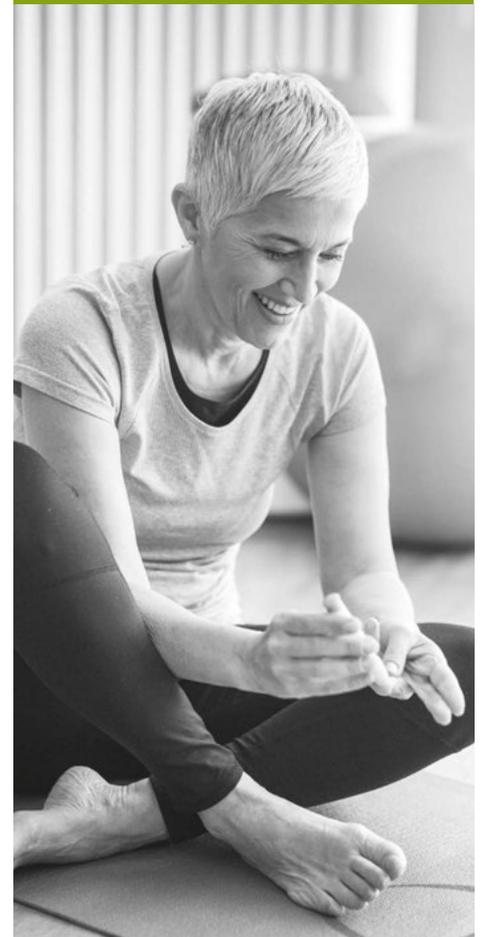
Be sure to discuss the importance of using controller medication with your patients with asthma. It's also important that all patients with asthma have an asthma action plan so they know what to do to prevent and treat their disease.

## Supporting participant health

PA Health & Wellness's management programs help participants with chronic conditions, such as diabetes, self-manage their health.

The programs do this by ensuring that referrals are made to the proper providers, providing health education, promoting coordination among providers and encouraging adherence. We educate patients and provide support and tools needed to help them understand and control their condition, all with the goal of fewer complications.

In addition to disease management programs for participants with chronic illnesses, we offer case management for participants with complex medical needs and behavioral health services. If you have a participant you think would benefit from these services, call us at **1-844-626-6813 (TTY 1-844-349-8916)**.



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PA Health & Wellness  
300 Corporate Center Drive  
Camp Hill, PA 17011  
**PAHealthWellness.com**

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## HEDIS FOR CARDIOVASCULAR CARE

MEASURE	DETAILS
<p><b>Controlling High Blood Pressure</b></p> <p>This <b>measure</b> assesses adults ages 18-85 who have been diagnosed with hypertension and whose blood pressure is adequately controlled:</p> <ul style="list-style-type: none"> <li>▪ Ages 18-59: blood pressure of &lt;140/90 mm Hg</li> <li>▪ Ages 60-85 with diabetes: blood pressure of &lt;140/90 mm Hg</li> <li>▪ Ages 60-85 without diabetes: blood pressure &lt;150/90 mm Hg</li> </ul>	<p>High blood pressure, or hypertension, increases the risk of heart disease and can lead to heart attacks, stroke, kidney disease and other serious conditions. Providers can help participants control their blood pressure by prescribing medications and recommending lifestyle changes, such as getting exercise, eating a heart-healthy diet and quitting smoking.</p>
<p><b>Persistence of Beta-Blocker Treatment After a Heart Attack</b></p> <p>This <b>measure</b> assesses adults ages 18 and older who were hospitalized and discharged after a heart attack and who received beta-blocker treatment for six months afterward.</p>	<p>Beta-blockers lower the heart rate, reducing the amount of force on the heart and blood vessels. They have been shown to reduce mortality in patients who have had a heart attack. Providers should make sure that participants who have had a heart attack take a beta-blocker to help prevent another attack from occurring.</p>

## Oral health offers clues to overall condition

Providers may find clues to a participant's overall health by looking at their mouths and teeth. Several health conditions can affect a patient's oral health:

- **Alzheimer's disease:** A person with Alzheimer's may forget how to care for their teeth and gums, leading to infections, tooth decay and problems eating.
- **Diabetes:** Because diabetes reduces a person's resistance to infection, people with the disease are more likely to develop gum disease.
- **HIV/AIDS:** People with HIV or AIDS may experience oral infections, dry mouth, lesions, canker sores and other problems.
- **Osteoporosis:** Participants with osteoporosis may suffer bone loss in their mouths and lose teeth.

The American Dental Association says there is no one-size-fits-all dental treatment. Some people may need routine visits once or twice a year, while others may need to visit more often.

Providers can help PA Health & Wellness participants stay healthy by asking about their dental health and referring participants in need of a dental provider to PA Health & Wellness participant services at **1-844-626-6813 (TTY 1-844-349-8916)**.