

# the checkup



MARCH 2016

A monthly publication of Texas Children's Health Plan



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## Texas Children's Health Plan's Medical Officer partners with local Ronald McDonald Charities

**Dr. Heidi Schwarzwald**, Chief Medical Officer of Pediatrics at Texas Children's Health Plan, has been appointed to the Board of Directors of **Ronald McDonald House Charities®** (RMHC®) of Greater Houston/Galveston.

RMHC® is focused on finding and supporting programs that directly improve the health

and well-being of children in the Greater Houston/Galveston community. Both Texas Children's Health Plan and RMHC® of Greater Houston/Galveston are committed to making a difference and redefining healthcare for those often considered less fortunate.

**Congratulations on this amazing achievement, Dr. Schwarzwald!**

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# Mosquitos: Safe repellent and protection



The recent **Zika Virus** epidemic has increased awareness of mosquito borne illnesses. Currently, the biggest risk of infection with Zika is for women who are pregnant or considering pregnancy and their partners. Nevertheless, mosquitos can also carry other illnesses and create discomfort. Use the following tips to advise families on protecting themselves and their children from mosquito bites:

- 1. Advise environmental control.** Mosquitos breed in standing water. Ensuring that there are no stagnant pools of water in the areas around their homes, such as small amounts of water inside tires, unused flower pots or other containers, helps to control the mosquito population.
- 2. Encourage families to wear protective clothing** when going outdoors, such as light shirts with long sleeves and long pants.
- 3. Educate families** on the appropriate use of insect repellents. Repellents should not be used on children under two months of age.

The Centers for Disease Control (CDC) and American Academy of Pediatrics recommend using DEET products that contain 10 to 30 percent DEET for children. Products with higher concentration provide longer protection.

Active Ingredient	Examples of Brands
DEET	Off, Cutter
Picaridin (KBR 3023, Bayrepel, icaridin)	Cutter Advanced, Skin So Soft, Bug Guard Plus
Oil of lemon eucalyptus (OLE) or PMD	Repel, OFF! Botanicals
IR3535	Skin Smart, Skin So Soft, Bug Guard Plus Expedition

For the full article, please visit [TheCheckup.org](http://TheCheckup.org).

## Brighten smiles with dental varnish

1 in 4 children begin kindergarten with a history of childhood cavities. To help ensure dental health, all children 6 months of age and older should be referred to a dental home.

Periodic oral evaluations and application of fluoride varnish in the medical home during well child exams can help combat this widespread problem. In 2014, the American Academy of Pediatrics recommended fluoride varnish at least once every 6 months – starting at tooth emergence. Dental Fluoride Varnish is a covered benefit for CHIP and Medicaid members who are 6 to 35 months of age. **This is a quick and effective procedure that is reimbursed in addition to the THSteps checkup reimbursement.**

To bill for this procedure, physicians, advanced practice registered nurses and physician assistants must be certified through the Department of State Health Services (DSHS) by completing an online training.

### In order to complete the free online training:

1. Visit [txhealthsteps.com](http://txhealthsteps.com) and click "Find a Course."
2. Scroll down to Oral Health and then click on Oral Evaluation and Fluoride Varnish.
3. Once trained, the THSteps medical provider can delegate the fluoride varnish application to nurses and medical assistants.

**For more information**, please contact the Provider Relations Department at **832-828-1008** or toll free at **1-800-731-8527**.



**COLD & FLU**

Still receiving patients with cold and flu symptoms? It's not too late to vaccinate! Visit [TheCheckup.org](http://TheCheckup.org) to learn about best practices for Tamiflu® treatment.

# Progesterone for Recurrent Preterm Birth Prevention

Injectable 17 Alpha-hydroxyprogesterone caproate (17P) is indicated for women with a current singleton pregnancy and a prior spontaneous singleton preterm birth at less than 37 weeks gestation. Therapy should be initiated between 16 and 20 weeks.

## WHAT'S NEW

Evidence from observational trials supports initiation as late as 26 weeks and 6 days for women who present late for care. In two studies, the outcomes for women whose treatment was started late were similar to those who started treatment earlier. Remember, treatment should not intentionally be delayed – this just gives an option for women who are late to care.

If you receive a denial for therapy that you believe is medically necessary, please submit an appeal to Texas Children's Health Plan, following the process delineated in the denial letter. You can contact the Utilization Management Department at **832-828-1004** for more information.

## Prior authorization for 17-P is required.

17-P can be obtained as either a medical benefit or a pharmacy benefit. If you have questions, please speak with your provider relations representative or at **832-828-1008** or toll free at **1-800-731-8527**.



Join us at  
our next  
CME!

Best Practices for Preterm Birth Prevention  
Thursday, May 5, 2016 6 – 8 p.m.  
Damians Cucina Italiana  
3011 Smith St.  
Houston, TX 77006

OB/GYN



## ZIKA VIRUS

### *and Pregnant Woman*

**Everyone is talking about Zika!** This virus is transmitted through infected mosquitos. Mexico, the Caribbean, Central America, along with parts of South America, have documented transmission of the virus and pregnant women who live in or travel to these areas are at risk of infection. No treatment is available at this time.

### Excerpts of Updated Guidance for adult women

- Antibody testing for Zika virus is now recommended for all pregnant women who have traveled to an affected area regardless of the presence of clinical illness.
- Health care providers should discuss reproductive life plans, including pregnancy intention and timing, with women of reproductive age in the context of the potential risks associated with Zika virus infection.

### Excerpts of Updated Guidance for newborns

- Testing of infants who were born to mothers who traveled to or resided in areas affected by Zika virus during pregnancy should be guided by 1) whether the infant had microcephaly or intracranial calcifications detected prenatally or at birth and 2) the mother's Zika virus testing results.

Testing for Zika virus and for antibodies to it is occurring primarily at the Centers for Disease Control and Prevention. For more specific information, contact your local Health Department – they can provide information and facilitate testing through the appropriate resources.

To read the full article visit [TheCheckup.org](http://TheCheckup.org).

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# It's March. **Take action now!**

**All providers must re-enroll in Texas Medicaid** to comply with federal regulations! Any Medicaid provider enrolled **before January 1, 2013**, must be fully re-enrolled by **September 25, 2016**.

For help with enrollment please call **1-800-925-9126** or email **PE-Email@tmhp.com**.



## For further reading

You can go to our website and log-in to Provider TouCHPoint to learn more on topics like:

- Quality program goals, processes, and outcomes
- Referrals to case management
- Pharmaceutical management procedures
- Disease Management Programs
- Formulary
- How practitioners can access authorization criteria
- Limits/quotas
- Availability of staff to discuss authorization process
- Supporting an exception process
- Availability of TDD/TTY services
- Member rights and responsibilities
- Availability of language assistance for members
- Generic substitution, therapeutic interchange, and step therapy protocol
- Prohibiting financial incentives for utilization management decision makers
- Clinical practice guidelines and preventive health guidelines

## OB/GYN UPDATE

### IMPORTANT

Paragard® and Nexplanon® have been added to the Long-Acting Reversible Contraceptives (LARC) Buy Back Program. For information about ordering LARC products in the Buy Back Program, visit [TheCheckup.org](http://TheCheckup.org).



Effective  
April 1, 2016

## UPDATE → Non-EMERGENT AMBULANCE TRANSFERS

Texas Children's Health Plan members who require the use of an ambulance for non-emergent transport must have the request for authorization submitted by the member's physician, facility or health-care provider.

**Effective April 1, Texas Children's Health Plan does not accept authorization requests from ambulance/medical transportation vendors for non-emergency transport.**

Please contact Texas Children's Health Plan Provider Relations with any questions at **832-828-1008** or **1-800-731-8527** or visit [TheCheckup.org](http://TheCheckup.org) for more information.

the **checkup**

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