



SENIOR WHOLE HEALTH

Simple. Secure. Independent.

**Executive Director**  
Pamela Gossman

**Chief Medical Officer**  
Kathleen Bennett, MD

**Director, Clinical Services**  
Sheila Condon, RN

**Director, Provider Relations/  
Network Development**  
Laura Pedone

**Director, Client Services**  
Judy Klein

**Director, Marketing**  
Deborah Daviau

### SENIOR WHOLE HEALTH, LLC

58 Charles Street  
Cambridge, MA 02141

### Key Contacts

**24 hour Clinical Support**  
888-794-7268

**Clinical Fax**  
617-494-5554

**Pharmacy**  
617-252-6366

**Pharmacy Fax**  
888-251-7823

**Member Services**  
888-794-7268

**EDI Technical Assistance**  
617-551-4155

**Provider Relations**  
617-494-5353

We are on the web at  
[www.seniorwholehealth.com](http://www.seniorwholehealth.com)

## Important Regulatory Compliance Information

As a Medicare Advantage Special Needs Plan (MA-SNP), Senior Whole Health is required to include certain federal, State and Medicare Advantage provisions in its health care provider contracts. From time to time, regulatory agencies add or

modify these provisions. In December 2010, in order to ensure all of its contracts are in compliance, SWH sent a Regulatory Addendum that includes these mandatory provisions to the contact person and address listed in the Notice section of each provider contract. If you received this Regulatory Addendum and have questions or did not receive one but believe you should have, please call Provider Relations at (617) 494-5353.

## New and Improved SWH Provider Manual Now Available Online

SWH's redesigned Provider Manual is now available online at [www.seniorwholehealth.com](http://www.seniorwholehealth.com). Upon entering the site, choose the **Massachusetts** option, click on **Providers and ASAPs**, and then click on

**Provider Forms & Resources**. Provider Manual is one of the resources listed.

Questions and feedback about the manual are always welcome. Please contact Provider Relations at 617-494-5353.

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## CMO Message – Kathleen Bennett, MD CHF-Related Challenges



One of the most challenging things we physicians face is managing patients with congestive heart failure. At SWH we have had success in decreasing preventable hospital admissions due to pneumonia, UTIs, dehydration, and COPD. Decreasing preventable admissions for patients with heart failure remains a challenge.

For 80% of CHF admissions the admitting diagnosis is not CHF, but CHF is often an underlying cause. This adds to the challenge. Multiple comorbidities make management a day-to-day balancing act that requires the engagement of both the physician and the patient.

Despite monitoring by a visiting nurse several times a week, one SWH member was admitted to the hospital two or more times a month. I

increased the number of nurse visits and asked the nurse to call my cell phone from the member's home. After a few months of numerous calls I wondered why this member's hospital admissions were always on Tuesdays. The nurse let me know that this member is the patriarch of a large Portuguese family. Every Sunday, he presided over a rich, salty dinner. He had been told not to eat this way, but this dinner was the one thing he was not willing to change. I suggested to his physician that the order for CHF medication be increased on Sundays; the hospital admits became less frequent.

It has been our experience at SWH that CHF is often best managed by a team of physicians in non-traditional ways. Dropping everything to answer every phone call is not reasonable for most physicians. SWH's care model allows insight into our members' lives. Our nurse care managers practice patient management rather than disease management. Our community resource coordinators have often been recruited from the ethnic communities of our membership; they sometimes receive daily calls from members. This support system relieves the administrative burden for practices, allowing physicians to capitalize on the time they do have with our members.

## Provider Satisfaction Survey – Outstanding Results!

Senior Whole Health completed its second annual provider satisfaction survey in the fall of 2010. **99% of respondents noted they were "satisfied-to-highly-satisfied" with Senior Whole Health overall.** These results are remarkable in that they showed consistent satisfaction scores and some improvements over last year's initial survey where 98% indicated their overall satisfaction.

The survey also measured satisfaction with Provider Relations, Claims, and the Utilization Management program. In all of these categories, at least 96% of providers responded that they were "satisfied-to-highly-satisfied."

We appreciate your participation and look forward to sharing the results of our next survey, which is scheduled to take place during the third quarter of 2011. We will be in touch to invite your participation in the 2011 survey!

*Congratulations to William Lucas, MD, New Bedford, MA and Charles Adomfeh, MD, Albany, NY, both won an **Amazon Kindle**, the raffle prize for participating in the survey.*

## Meet our Director of Sales & Marketing – Debbie Daviau

Debbie joined Senior Whole Health in the fall of 2009 as Director of Sales & Marketing. Prior to joining SWH, Debbie held various sales management positions at Tufts Health Plan from 1996-2009. At Tufts Debbie developed a keen understanding of the importance of meeting member needs.

Debbie is a strategic thinker always looking for crucial opportunities to get the word out about Senior Whole Health. As such, Debbie and her team design marketing strategies that maximize results. An essential part of that design is effective communication between providers, prospective members, and SWH.

Since joining SWH, Debbie has



implemented a number of innovative and creative internal restructures to maximize efficiency and productivity in the SWH Sales Department. She has also implemented programs designed to assist elders in the community while at the same time enhancing SWH's visibility.

Debbie is enthusiastic about her role, and embraces collaboration within SWH. "SWH is a wonderful organization and I am proud to be a part of its continued membership growth (a 20% increase under her tenure). I am passionate about our mission to improve the lives of our members, and will continue to develop strategies that help us get the word out about our organization, and the many benefits we offer our members."

Debbie and her team are always seeking ways to actively engage providers in outreach activities. If you are interested in exploring potential marketing activities with SWH, please contact Debbie at [ddaviau@seniorwholehealth.com](mailto:ddaviau@seniorwholehealth.com)

## Diabetes Care Management/ SWH to Sponsor Web Based, Self Paced CMEs this Spring

Senior Whole Health has partnered with Boston University/Boston Medical Center (BMC) Department of Endocrinology to develop educational offerings on diabetes care. This multi-tiered programming targets three audiences:

- SWH Nurse Care Managers and Community Resource Coordinators
- SWH Geriatric Support Services Coordinators from the Aging Services Access Points
- SWH network Providers

The program offers access to state-of-the-art diabetic educational materials that include:

- On site educational sessions
  - Educational resources
  - A Web-based CME seminar
- To kick off this initiative, three educational sessions were held for SWH Nurse Care Managers in January and February. Topics included:
- Treatment Options for Diabetes
  - Psychosocial and Complex Medical Issues
  - Health Literacy and Patient Assessment of Diabetes Knowledge
  - Medical Nutrition Therapy and Diabetes

Additional educational seminars are scheduled for this spring.

The Web-based diabetes CME seminar focused on the latest therapies in diabetes. Adaptation for elders will be available in late spring. It will be asynchronous so that providers can log-on at any time, and CMEs will be provided at no cost to participating providers. More information will be provided closer to launch.

Thank you to all who have contributed to make the program a success!

## Pharmacy Corner

Prepared By: *Joseph DaSilva, PharmD*

Formulary decisions at SWH are made by a Pharmacy and Therapeutics (P&T) Committee consisting of Physicians, Nurses, and Pharmacists. The P&T Committee reviews drugs that are new to the market, new clinically relevant trial data, and policies and procedures related to the pharmacy program. As a result of our periodic internal reviews and feedback from our providers, we would like to share the following updates:

- Celebrex was on prior authorization (PA) due to safety concerns over cardiovascular risk and increased cost compared to generic NSAIDs. In reviewing the PA requests over the past



year, the decision was made to remove the prior authorization for Celebrex. Instead, SWH will be starting an initiative by which we identify patients with CHF who are on medications that cause fluid retention, such as NSAIDs and Celebrex.

- Biologic DMARDs were removed from prior authorization. The

committee found that requests for PA were consistent with clinically appropriateness.

- Pradaxa was added to the SWH formulary. Review of the data supported that Pradaxa was more effective than warfarin for stroke reduction in non-valvular atrial fibrillation. Bleeding risk is similar to warfarin and routine monitoring is not required.
- Aricept 23 mg was not added to the formulary. In clinical trials, the medication demonstrated minimal benefit over 10 mg with increased side effects. In addition to the GI side effects, cardiovascular side effects of the medication are a concern.

## Quality Cues:

### Availability of SWH documents:

The following reference and notification documents are available to SWH Network Practitioners upon request and/or on the SWH website at [www.seniorwholehealth.com](http://www.seniorwholehealth.com):

- SWH Quality Improvement Program
- SWH Utilization Management criteria
- SWH Utilization Management denial decision process and access to appropriate practitioner reviewer for decision-making

Please remember, SWH utilization decision-making is based only on appropriateness of care and service and the existence of coverage. SWH does not specifically reward practitioners or other individuals for issuing denials of coverage or care; SWH does not provide financial incentives for underutilization.

If you would like to receive a hard copy of any of these documents, please contact Anne Feierstein, Director, QualityManagement at 1-617-252-6320 or [afeierstein@seniorwholehealth.com](mailto:afeierstein@seniorwholehealth.com).



**Reminder:** SWH contracted providers have an obligation to provide 60 days written notice of an SWH credentialed PCP's or SCP's termination of group affiliation. This notice period allows sufficient time to notify members regarding selection of new practitioners.