

PIMA HEALTH SYSTEM (PHS)
WE COULD USE YOUR ASSISTANCE IN STRESSING THE IMPORTANCE OF
ADULT IMMUNIZATIONS

Final Results of the 2006/2007 Influenza Immunization Season
October 2006-March 2007

Rider	Vaccine	*Total Given	Total Population	Percent Given	PHS Goal
HCBS	Influenza	1039	2204**	47%	81%
HCBS	Pneumonia	303	***	NA	NA
SNF	Influenza	1257	1422**	88%	88%
SNF	Pneumonia	227	***	NA	NA

*Number given in one year

**Population minus refusals for Influenza

***Error Value = the total population or the denominator can not be accurately determined therefore, the percent can not be calculated

Influenza: - PHS met the influenza goal for SNFs (88%) but did not meet the Home and Community Based Services (HCBS) goal (81%).

Pneumococcal - Over the last five (5) years, four thousand three hundred thirteen (4313) members have reported that they have received at least one pneumococcal vaccination.

During CY 2006/2007, PHS kept track through the consent form of some of the reasons why our members refused either or both of the immunizations. The top five (5) reasons given for refusals were:

HCBS:

Reason	Flu	Pneumonia
"Doesn't want"	169	198
"Makes me sick"	36	10
Allergic	29	11
Acute illness	13	17
Doctor said "NO"	12	27

Of note, 39 member representatives refused the Pneumovac Immunization for the member.

SNFs:

Reason	Flu	Pneumonia
"Doesn't want"	30	79
Allergic	11	4
Member rep refused	2	11
"Makes me sick"	3	6
In hospice	2	1
Doctor said "NO"	0	2

QM will continue the Adult Immunizations as a PHS Performance Measure (PM) using the same goals, methodology and interventions in anticipation of the fact that AHCCCS will be issuing a PM related to Influenza Immunizations in a future contract year. As a part of our interventions, we are requesting that **you**, the member's practitioner, assist PHS in educating our members regarding the importance of these immunizations

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IMPORTANT UPDATE TO QM SITE REVIEWS FALSE CALIMS ACT TRAINING REQUIRED

It's that time of the year again and the PHS Quality Management Division has reviewed their Standards/Procedures to ensure that applicable Federal and AHCCCS requirements are being met.

The Deficit Reduction Act Public Law (PL) 109-171 Section 6032 requires that certain entities (including AHCCCS Health Plans and Program Contractors) must educate their staff about the False Claims Act (FCA), whistleblower protection and qui tam provision. **Because PHS receives or makes annual payments under the State plan of at least \$5,000,000, PHS is required to ensure that all of its employees, contractors and agents receive training regarding the False Claims Act.**

In response to this request, the QM Division revised their Standard and Procedure for QM Site Reviews beginning 10/01/2007. The Corporate Compliance indicator on the tool, already required that providers train staff about the definition of compliance, code of conduct, the importance of conforming to laws, rules, regulations and policies and procedures on an annual basis.

The indicator and corresponding definition on the Site Review Tool that relates to Corporate Compliance was revised to include the additional staff education requirement regarding the FCA. This indicator was incorporated it into the scoring process, and QM staff has begun utilizing the new review tool. At this time, ambulatory sites including primary care, dental and selected specialists, are reviewed every two years, and contracted nursing facilities are reviewed annually.

The following is a definition of the indicator on the Site Review Tool that describes the requirement:

The provider has a Corporate Compliance program in place that instructs each staff member of their responsibilities regarding compliance, including fraud and abuse reporting and the False Claims Act. The program shall include instruction concerning the definition of compliance, personal and professional conduct, the importance of conforming to all laws, rules, regulations, policies and procedures, whistleblower protection and the qui tam provision of the False Claims Act. Staff is also advised of their duty to report any instances of non-compliance.

PHS has prepared a pamphlet that is available through your PHS Provider Services Representative at their extension or through the main Provider Services number (520) 243-8500. You may also direct questions regarding the False Claims Act to your representative and he/she will be happy to help you.



A Power Point training session is also available through the AHCCCS web site: www.ahcccs.state.az.us/HPlans&Providers/.

If you have any questions or comments regarding the change on the QM Site Visit Tool, you may call Jan Reiner, RN, Quality Management Coordinator, at (520) 243-8255.