



Winter 2010

in touch

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Parental Evaluation of Developmental Status (PEDS) Tool Update

As you know, AHCCCS implemented a new initiative January 1, 2006, aimed at closer monitoring of developmental and behavioral milestones for all Neonatal Intensive Care Unit (NICU) graduates.

All pediatric providers are encouraged to complete training and begin using this tool in conjunction with scheduled EPSDT visits beginning with the initial newborn exam through age 8. Trained providers can bill for use of the tool using code 96110 with the modifier "EP" in order to receive reimbursement for utilizing the PEDS tool during EPSDT visits with NICU grads. Only trained providers may administer and bill for use of the PEDS tool. Once completed, scored tools should be forwarded with a copy of the EPSDT visit to the Maternal Child Health (MCH) Department at the address below.

University Physicians Health Plans
Attn: EPSDT Data Entry
2701 E. Elvira Road
Tucson, AZ 85756

Training can be completed online at www.azaap.org (located under the Education Opportunities link to PEDS Tool training). You will be able to view the PowerPoint presentation and complete the post test online. Once the test has been completed, print the certificate and mail it to the address above.

More information about the PEDS tool can be found at www.pedstest.com.

Free in-office training by a registered nurse is available through Arizona chapter of the American Academy of Pediatrics (AzaAAP) for providers and office staff. For more information about in-office training, please contact Janiece Doran-Slovak, RN/Program Manager at (602) 316-6768 or email her at ejlovak@yahoo.com.



RBHA Members Returning to the PCP

Non-SMI Members who have been treated by the Regional Behavioral Health Authority (RBHA) for ADHD, depression, or anxiety and have exhibited stability over the last six months on the same medication regimen, may be transitioned back to medication management within primary care if the primary care provider and the member both agree to the transition. The following process should occur:

1. The Regional Behavioral Health Authority (RBHA) Service Provider initiates contact with the PCP to discuss transition of a stable patient with ADHD, depression, or anxiety from RBHA to medication monitoring within primary care. The patient will have already agreed to the transfer, and may still obtain counseling services at the RBHA. PCPs comfortable doing so agree to accept members stabilized on the same medication regimen for at least six months for medication and medication monitoring.
2. The RBHA supplies the PCP with a list of medications tried and failed prior to current regimen and a detailed list of current medication(s) with dosages and contact information for the treating psychiatrist in order to address questions that arise. The PCP may request additional information, including a current psychiatric evaluation.
3. The RBHA or RBHA provider notifies the Health Plan's Behavioral Health Coordinator of the transfer and supplies medication information so that any required prior authorizations can be anticipated.
4. The PCP is asked not to change the medication or the dosage without consulting with the previously treating psychiatrist (the Health Plan can help facilitate if needed: Behavioral Health Coordinator (520) 874-5214).
5. PCP submits any needed prior authorization to the Health Plan (not all medication will require a prior authorization; please see formulary).
6. The Health Plan approves prior authorization for continuity of care.
7. The transferred member is tracked at the Health Plan and offered case management services at the Health Plan as indicated.
8. Member picks up prescription at pharmacy.



**RBHA
consultation
is available
any time.**

Thank you for your excellent coordination of care efforts regarding our members receiving behavioral health services. Please contact our Behavioral Health Coordinator with any questions or concerns about behavioral health. She would be glad to assist you by phone at (520) 874-5214 or a visit to your practice.

The UPHP Behavioral Health Coordinator can assist with setting up the RBHA consultation, which is available any time for AHCCCS Health Plan members being treated in the primary care environment for a behavioral health disorder.

Documentation Tips – Beyond the Basics

As a Physician, you probably review hospital discharge summaries and consult notes, laboratory reports and radiology reports for your patients. You may also order medical equipment and refill medications for your patients even when they aren't in your office. A quick note in the patient's chart reflects the complexity of care required. These notes also support your decision making in subsequent office visits.

Accurate documentation will help you to cover those ongoing medical conditions that can be easily overlooked from time to time. You know your patients well, but another provider may not. A "problem list" is a tool often used to assess the stability of a patient's conditions and measure progress achieved through your quality of care. Thanks for taking those few minutes – accurate, up-to-date documentation benefits both you and your patient.



OB Providers AHCCCS Requirements

Every month UFC sends providers who provide OB services a notice of SOBRA members who are about to lose SOBRA benefits. It is an AHCCCS requirement that those members are referred to no/low cost primary care services. UFC partners with the provider to make those referrals by including a referral list for those services. It is required that these referrals are documented in the medical record. According to recent audits, doctors are not documenting these referrals, although a survey of former members indicates that 30% of those reached do receive this referral from their doctor. Please make these referrals and be sure to document the referral was made in the medical record. It not only fulfills an AHCCCS requirement but it is the right thing for the patient.

Disparities in Oral Health

Oral health disparities are profound in the United States. Despite major improvements in oral health for the population as a whole, oral health disparities exist for many racial and ethnic groups, by socioeconomic status, gender, age and geographic location. The populations most affected by oral health disparities are Hispanics, Native Americans, and African Americans of all ages.

Social factors can also contribute to these differences such as lifestyle behaviors like tobacco use, frequency of alcohol use, and poor dietary choices. Just like they affect general health, these behaviors can affect oral health. The economic factors that often contribute to poor oral health include access to health services and an individual's ability to get and keep dental insurance.

Many of these patients do not understand how to make a dental appointment or even realize they need one. Generally this population of patients don't understand the importance of preventative care; the theory is that if they don't feel bad, they don't need to see a doctor. We encourage you as providers to educate your patients as to the importance of receiving dental care to help improve their overall health.

Acknowledgments
Centers for Disease Control and Prevention <http://www.cdc.gov/>

Verbal Lead Screening

All Medicaid eligible children ages six months to six years must receive a verbal lead screening assessment at each EPSDT visit.

The provider must ask the parent or guardian a series of questions related to possible lead exposure.

The EPSDT form or medical record must show documentation that the verbal lead screening occurred.

OB Providers

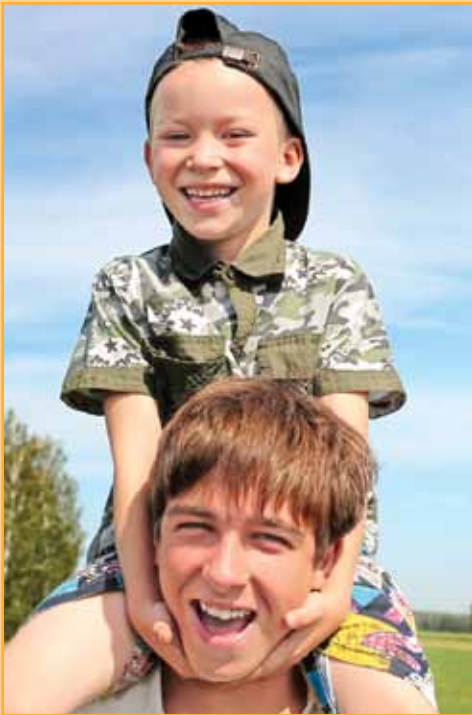
The 2009 OB provider medical record audit showed that UFC providers are not consistently screening pregnant members under the age of 21 with the EPSDT form. To assist providers in fulfilling this requirement, UFC will supply OB providers with EPSDT forms.

When completed, please send these forms to:

University Family Care
Attention: EPSDT Assistant
2701 E. Elvira Road
Tucson, AZ 85756

Understanding EPSDT

University Family Care recognizes the commitment of providers to improving the health and well-being of Arizona's children. The purpose of the EPSDT program is to find children with actual or potential health problems and to screen, diagnose, and treat the problems before they become permanent, lifelong disabilities.



Strategies for improving EPSDT performance include:



1. Document ALL age-specific, required information related to EPSDT screenings and visits on the AHCCCS required standardized EPSDT tracking forms. These forms are designed to help providers deliver comprehensive, age-appropriate screening exams. These forms are available through the Health Plan and are also located in Section 20, Forms, of the Provider Manual. Please send a copy of the completed EPSDT tracking form to the EPSDT Assistant at:

University Physicians Health Plans
Attn: EPSDT Assistant
2701 E. Elvira Road
Tucson, AZ 85756
2. Schedule the next EPSDT appointment at the time of the current office visit, particularly for children 24 months of age or younger. **The benchmark exams of 2, 4, 6, 9, 12, and 15 months are especially critical to ensure that children receive the protection of recommended vaccinations and the benefits of early interventions as a result of developmental screenings.**
3. Refer for an initial dental assessment starting at age 12 months, or earlier if oral health screening reveals potential carious lesions or other conditions requiring assessment and/or treatment by a dental professional.
4. Perform both verbal and blood lead level screenings (as indicated on the age-specific standardized EPSDT tracking forms). Report elevated blood lead levels equal or greater than 10 micrograms/dl to ADHS and coordinate re-testing and follow-up as recommended.
5. Comply with state mandated law requirements to report all childhood immunizations to Arizona Department of Health Services (ADHS)/ Arizona State Immunization Information System (ASIIS).
6. Refer eligible members to the Supplemental Nutritional program for Women, Infants, and Children (WIC), Head Start, Arizona Early Intervention Program (AzeIP), and Behavioral Health.

Remember that UFC is your partner in ensuring the availability and accessibility of health care resources to EPSDT members as well as in assisting members to effectively use these resources.

If we can assist you in any way, or if you have questions, please call us at 1-800-582-8686.

We look forward to continuing to work together toward our common goal of healthier and happier kids in Arizona.



Coming Soon to a Computer Near You: UPHP's Prior Authorization Web Portal

University Physicians Health Plan (UPHP) is in the final implementation stages of our new Prior Authorization (PA) Web Portal. As you know, our current e-services website offers claims and member eligibility inquiry. In the coming months the e-services website will be enhanced.

Some of the enhanced features will include:

- Online submission of prior authorization requests
- Real-Time status updates on prior authorizations
- When the prior authorization is completed it will generate email notification
- Approved prior authorizations will be instantly available to the referring provider and to the referred-to provider
- Online communication with UPHP staff will be possible regarding PA requests

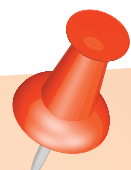
The new website will maintain our current functions and will boast additional features, making it even easier for Providers to interact with UPHP. If you are interested in signing up or you would like training please contact your Provider Relations Representative.



Arizona State Immunization Information Systems (ASIIS)

In an effort to ensure that EPSDT members' immunizations are kept up to date, it is especially important to enter your practice immunization data into ASIIS.

ASIIS is used to monitor immunization levels with a goal of capturing 100% of vaccines provided to children. Please complete your reports in a regular and timely manner as required by Arizona Revised Statute 36-135 for physicians licensed under title 32. By doing this, you will assist University Family Care in ensuring our members obtain the highest level of professional care. Providers can access ASIIS by visiting www.asiis.az.gov



Don't Forget to notify your Provider Representative when:

- A Provider joins your practice location
- A Provider terminates (must give 60 days per contract)
- Your practice location changes – need this in writing (if payment location is changing W-9 is also required).

Make sure your TIN and address is registered with AHCCCS. If the location changes, this will need to be updated.

AHCCCS 1-800-794-6862 option 5 or visit www.ahcccs.state.az

2010 Influenza Update

Clearly, the 2009 flu season had an early start due to the Novel H1N1 influenza that, after emerging in the spring, found new strength shortly after the start of school. As of October, the only flu circulating throughout Arizona is thought to be the H1N1 strain but the seasonal flu will surely follow and could result in an extended flu season into spring of 2010, according to state health experts (TAPI meeting, October 21, 2009).

Since it is very likely this flu season will be a long and difficult one for our providers, University Family Care looks forward to partnering with our providers to maintain the health of our members. As such, it is important to be fully aware of the risk groups since they are different for H1N1 and Seasonal Flu. Below is a brief overview of these risk groups.

H1N1 Flu

- Pregnant women
- All children/young people ages 6 months to 24 years
- Persons with chronic medical conditions such as asthma, diabetes, obesity or heart disease
- Persons who have weakened immune systems from medications, HIV infection or other chronic medical conditions

Seasonal Flu

- Adults 50 years of age and older
- All children ages 6 months to 18 years
- Pregnant women
- Persons with chronic medical conditions such as asthma, diabetes, obesity or heart disease
- Persons who have weakened immune systems from medications, HIV infection or other chronic medical conditions

University Family Care has implemented member outreach campaigns to encourage members to obtain both flu vaccinations from their provider when available or to use flu clinics contracted through the health plan. Provider knowledge and patient outreach is a vital part of our mutual success in ensuring our members'/patients' health during a challenging flu season.

For more information about how to obtain H1N1 vaccine, go to <http://www.azdhs.gov/flu/h1n1/index.htm>

Sources: Arizona Dept. of Health Services, CDC


Pregnant women are five times as likely to suffer serious complications from H1N1 as the rest of the population. If your patient has a cold, sore throat or fever do not hesitate to encourage them to see you immediately or go to urgent care if needed. This is important to the health of the mother and her unborn baby.



NOTE: "NC" = Not Covered

University Physicians Health Plans (UPHP)
PRIOR AUTHORIZATION GRID

Continued on Reverse Side

EMERGENCY SERVICES DO NOT REQUIRE PRIOR AUTHORIZATION			
ALL OUT-OF-NETWORK REFERRALS AND / OR SERVICES REQUIRE PRE-AUTHORIZATION WITH THE EXCEPTION OF EMERGENCY SERVICES.			
			
AHCSS Plans Maricopa Health Plan / University Family Care		Special Needs Plan Maricopa Care Advantage / University Physicians Care Advantage	
SERVICES	PA	SERVICES	PA
Admissions		Admissions	
- Inpatient, Elective	PA	- Inpatient, Elective	PA
- SNF	PA	- SNF	PA
- Rehab	PA	- Rehab	PA
Allergy		Allergy	
Adults (Allergy therapy covered for life threatening conditions only)	NC	Adults & Children	
Children (less than 21 yrs of age)			
- Consults	NO PA	- Consults	NO PA
- Testing	PA	- Testing	PA
- Immunotherapy by Allergist	PA	- Immunotherapy by Allergist	PA
Behavioral Health		Behavioral Health	
- Comprehensive Mental Health Services	NC	- Comprehensive Mental Hlth Svcs (ie, PHP & IOP)	PA
Cardiac Nuclear Medicine Testing	PA	Cardiac Nuclear Medicine Testing	PA
Cardiac Rehabilitation, Outpatient	PA	Cardiac Rehabilitation, Outpatient	PA
Chiropractor, Adult	NC	Chiropractor, Adult	PA
Chiropractor, Less than 21 years of age	PA	Chiropractor, Less than 21 years of age	PA
Cosmetic Surgery / Items	NC	Cosmetic Surgery/Items	NC
Dental Services		Dental Services	
- Dentures	NC	- Dentures	NC
- Oral surgery	PA	- Oral surgery	PA
- Orthodontics	PA	- Orthodontics	NC
- Pedodontic for children over 2	PA	- Pedodontic for children over 2	NC
- Preventive and therapeutic greater than 21 yrs of age	NC	- Preventive and therapeutic greater than 21 yrs of age	NC
Diapers / Incontinence Briefs (Ages 3-20)	PA	Diapers / Incontinence Briefs	NO PA
Drugs/Medications		Drugs/Medications	NC
- Non-formulary	PA	- Non-formulary	PA
- Formulary Step Therapy	PA	- Formulary Step Therapy	PA
- Psychotherapeutic (when on formulary)	NC	- Psychotherapeutic (when on formulary)	NO PA
Durable Medical Equipment (DME)		Durable Medical Equipment (DME)	
- Over \$300.00 Total Purchase Price	PA	- Over \$300.00 Total Purchase Price	PA
- C-PAP, Bi-PAP Purchase	PA	- C-PAP, Bi-PAP Purchase	PA
Family Planning		Family Planning	
- Sterilization	PA	- Sterilization	PA
Hearing Aids (21 and over)	NC	Hearing Aids	PA
- Audiometry, Adult for hearing aid eval	NC	- Audiometry, Adult for hearing aid eval	PA
- Audiometry, Adult for medical diagnosis	PA	- Audiometry, Adult for medical diagnosis	PA
Home Health/Home Care Services		Home Health/Home Care Services	
- Home Health Care	PA	- Home Health Care	PA
- Home Infusion (antibiotics, TPN, etc)	PA	- Home Infusion (antibiotics, TPN, etc)	PA
Hospice		Hospice	
- IP and OP	PA	- IP and OP	PA
Implants		Implants	
- Artificial Joints	PA	- Artificial Joints	PA
- Stimulators, bone, brain, spinal, nerve	PA	- Stimulators, bone, brain, spinal, nerve	PA
Laboratory		Laboratory	
- Cytogenetic studies/Phenotyping/DNA	PA	- Cytogenetic studies/Phenotyping/DNA	PA

Some plans may have limitations on certain benefits. If the benefit is not covered or the limitation is met, payment will not be made. Receiving approval on a prior authorization request does not guarantee payment.

University Physicians Health Plans (UPHP)
PRIOR AUTHORIZATION GRID

NOTE: "NC" = Not Covered

AHCCCS Plans Maricopa Health Plan / University Family Care		State Sponsored Program Healthcare Group		Special Needs Plan Maricopa Care Advantage / University Physicians Care Advantage	
SERVICES	PA	SERVICES	PA	SERVICES	PA
Maternity Services		Maternity Services		Maternity Services	
- Genetic Counseling	PA	- Genetic Counseling	NC	- Genetic Counseling	PA
- Abortion / Pregnancy Termination	PA	- Abortion / Pregnancy Termination	PA	- Abortion / Pregnancy Termination	PA
- Circumcision, Routine	NC	- Circumcision, Routine (within 30 days of birth)	NO PA	- Circumcision, Routine	NC
Neuropsychological/Neuropsychiatric Eval	PA	Neuropsychological/Neuropsychiatric Eval	NC	Neuropsychological/Neuropsychiatric Eval	PA
Nutrition		Nutrition		Nutrition	
- Nutritional Therapy, Enteral/Parenteral	PA	- Nutritional Therapy, Enteral/Parenteral	PA	- Nutritional Therapy, Enteral/Parenteral	PA
Outpatient surgery		Outpatient surgery		Outpatient surgery	
- (Except Cataracts, Tonsils, Adenoids, & Myringotomy with tubes)	PA	- (Except Cataracts, Tonsils, Adenoids, & Myringotomy with tubes)	PA	- (Except Cataracts, Tonsils, Adenoids, & Myringotomy with tubes)	PA
Pain Management Services	PA	Pain Management Services	PA	Pain Management Services	PA
Personal Care Items	NC	Personal Care Items	NC	Personal Care Items	NC
Podiatry	PA	Podiatry	PA	Podiatry	PA
Prosthetic/Orthotic Devices > \$300.00	PA	Prosthetic/Orthotic Devices > \$300.00	PA	Prosthetic/Orthotic Devices > \$300.00	PA
Pulmonary Rehabilitation, Outpatient	PA	Pulmonary Rehabilitation, Outpatient	PA	Pulmonary Rehabilitation, Outpatient	PA
Radiology and Medical Imaging		Radiology and Medical Imaging		Radiology and Medical Imaging	
- MRA	PA	- MRA	PA	- MRA	PA
- MRI	PA	- MRI	PA	- MRI	PA
Reconstructive Surgery	PA	Reconstructive Surgery	PA	Reconstructive Surgery	PA
Rehabilitation Outpatient Therapies		Rehabilitation Therapies		Rehabilitation Therapies	
- Physical Therapy (21 and over)	PA	- Physical Therapy	PA	- Physical Therapy	PA
- Occupational Therapy (21 and over)	NC	- Occupational Therapy	PA	- Occupational Therapy	PA
- Speech Therapy (21 and over)	PA	- Speech Therapy	PA	- Speech Therapy	PA
Sleep Studies (Must be split-night study)	PA	Sleep Studies	NC	Sleep Studies	PA
Transportation		Transportation		Transportation	
- Air Transport, non emergent	PA	- Air Transport, non emergent	NC	- Air Transport, non emergent	PA
- Inter-facility transfers, non emergent	NO PA	- Inter-facility transfers, non emergent	NO PA	- Inter-facility transfers, non emergent	NO PA
Transplants	PA	Transplants - Not covered except		Transplants	PA
- Corneal	PA	- Corneal	PA	- Corneal	PA
- Kidney	PA	- Kidney	PA	- Kidney	PA
Vision		Vision		Vision	
- Adult Glasses and Contact Lenses covered for post cataract needs only	PA	- Glasses and Contact Lenses	NC	- Value-Added Benefits Only (see member's benefits)	NO PA

When provided by a contracted, in-network provider and within the member network option, the following services do NOT require a prior authorization or PCP referral.

- CT Scans
- Dialysis
- EMG / NCV
- Interventional cardiology (cardiac cath, angiography, PTCA, pacing study)
- Outpatient chemotherapy
- Outpatient Radiation therapy
- PET Scans
- PUIVA

 <p>www.ufcaz.com</p>	 <p>MARICOPA HEALTH PLAN managed by UPH HEALTH PLANS</p>	 <p>UNIVERSITY PHYSICIANS HEALTHCARE GROUP www.uphcg.com</p>	 <p>MARICOPA CARE ADVANTAGE managed by UPH HEALTH PLANS</p>	 <p>UNIVERSITY PHYSICIANS Care Advantage www.cpareaz.com</p>
www.ufcaz.com	www.ihpcaz.com	www.uphcg.com	www.mcareaz.com	www.cpareaz.com

Receiving approval on a prior authorization request does not guarantee payment. Some plans may have limitations on certain benefits. If the benefit is not covered or the limitation is met, payment will not be made.

Warm Health: A Powerful Provider Tool For Effective Disease Management

Helping members stay healthy is a basic aspect of every UFC provider's commitment to improving health care quality and outcomes, while keeping costs in check. But providing effective care to members with one or more chronic diseases requires a more focused and intensive strategy. These members are often better served through a team approach that includes ongoing education and encouragement to help them understand their condition and change their behaviors, plus frequent monitoring to help them avoid serious disease-related complications. These high-touch cases definitely require the expertise of a capable physician. But they also clearly benefit from ongoing interaction with case managers and other supporting professionals.

To meet that need, UFC has teamed up with the health care technology experts at Warm Health to help physicians better manage UFC members with chronic illnesses. Through this partnership, Warm Health delivers health information and education to members to encourage better self-care while facilitating ongoing, quick-response monitoring and support from UFC Case Managers.

In Warm Health, UFC providers have the support of an effective, interactive tool to help them manage their patients with chronic diseases around the clock.

The Warm Health system is simple. UFC members are introduced to the appropriate chronic disease program by "Mary Beth," Warm Health's virtual case manager. Then, through regularly scheduled "conversations," Mary Beth provides members with the relevant health education to help them manage their chronic conditions. Mary Beth also asks a few questions on each call to get a sense of the member's current state of health. If the member's answer reveals a health concern, a UFC Case Manager is immediately alerted, and then calls back for a live intervention after the Warm Health call is completed.

Mary Beth, the voice of Warm Health, represents the most technologically advanced Interactive Voice Recognition (IVR) system on the market today. While she is not a "live" person, surveys show that members come to know and accept her, and they even enjoy her calls. She talks with members, asks questions, monitors answers and identifies situa-



tions that might indicate health concerns. Answering a simple "yes" or "no" question is all it takes to link that vulnerable member back to a live UFC care professional. And members receive the care they need.

Calm and professional, Mary Beth and Lucy, her Spanish-speaking counterpart, deliver useful information that supports best practices as determined by UFC. And while the case manager is the first member contact following an alert, both Mary Beth, and assigned case managers routinely encourage members to visit their physician for expert care.

Warm Health participation by members is strictly voluntary. But results indicate that it's a powerful and effective tool, and a valuable asset to the UFC team.

For more information about Warm Health, please visit www.warmhealth.com.

Important Information:

We want your patients to have strong and healthy babies. Please stress the importance and value to pregnant patients of seeing a maternity provider or Certified Nurse Midwife early in her pregnancy.

HIV testing is especially important for your pregnant patients. Most babies born to HIV-infected women escape the virus, but 1 in 4 do become infected before or during the birth or through breast-feeding, although no one is certain when viral transmission occurs.

You can help a mother decrease the chances of her child getting the infection. When an infection in the mother is found and treated early she has a good chance of staying healthy to take care of her baby. Please discuss HIV testing with your patients.



Construction Begins on New Behavioral Health Facilities at UPH Hospital Campus

Construction began in October for Pima County's newest behavioral health care centers. These centers will serve people with mental health and substance use crises. The two new facilities on the UPH Hospital campus are being built through a partnership of Pima County, University Physicians Healthcare, Community Partnership of Southern Arizona and the University of Arizona College of Medicine.

The project consists of two new buildings. The Behavioral Health Pavilion and the Crisis Response Center are being built immediately adjacent to UPH Hospital. Together, the facilities will provide coordinated treatment of patients with behavioral health problems. The new facilities are expected to ease the demand on hospital emergency departments, decrease the number of mentally ill patients in correction facilities as well as reduce the number and lengths of stay of psychiatric hospitalizations. It will also provide a training ground to educate new physicians in a setting that embraces integrated behavioral health care.

The Behavioral Health Pavilion will provide inpatient and outpatient services as well as emergency medical and behavioral health services. The three-level building will

house an emergency department, 96 private inpatient rooms, outpatient services, classroom and teaching facilities and a courtroom for patients admitted through the legal system.

The Crisis Response Center will provide triage for persons in behavioral health crisis and direct patients to the most appropriate resources in the community. It is designed for those not requiring emergency or acute psychiatric care who otherwise might unnecessarily go to hospital emergency departments or be taken to detention centers. The two-story structure includes a 15-bed sub-acute inpatient unit and separate areas for youth and adult crisis services.

The new facilities are expected to be completed and open in the summer of 2011.



New Provider Additions

University Family Care's Network Development Department has made many additions to our provider network this quarter. Notable additions are:

- **United Seating and Mobility** – This new vendor provides custom wheelchairs to members in all UFC service areas.
- **Mobile Dentistry for Kids** – This provider group provides mobile dentistry to members in towns where UFC does not have a contracted dentist.
- **Arizona Early Intervention Program (AzeIP) therapists** – Previously, pediatric therapies (occupational, physical and speech therapy) were coordinated and paid for by the State of Arizona. As of early Spring 2009, pediatric therapy is now the responsibility of the member's health plan. University Family Care has several contracted therapists and multiple contracts in the works to provide these services.

For a complete listing of new and existing providers, please access our web page at www.ufcaz.com and click on **Find a Doctor/Pharmacy**. Or you may contact Member Services at 1-800-582-8686.



Adult Health

Chronic diseases, such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States. Chronic diseases account for 7 out of 10 deaths among Americans each year. These diseases also cause major limitations in daily living for one-fourth of people with chronic conditions. Although chronic diseases are among the most common and costly health problems, they are also among the most preventable. Adopting healthy behaviors such as eating nutritious foods, being physically active and avoiding tobacco use can prevent or control the devastating effects of these diseases.

As a provider, you know how important it is for adults to come in and receive their annual exams. Often, the AHCCCS population doesn't get the preventative care they need because they believe in the "If I feel good, I don't need to see a doctor" theory. We encourage you as providers to help us educate these patients about the importance of preventative care and help them to schedule yearly Well Adult exams.

Acknowledgments

Centers for Disease Control and Prevention <http://www.cdc.gov/>

Cultural Corner

Our Hispanic Population



University Family Care serves a diverse population. It has been reported that over 26% of our University Family Care members are Spanish speaking.

It is uncommon for Hispanics to be aggressive or assertive during health care interactions. Direct eye contact is less common among Hispanics than Anglos. Direct disagreement with a provider is uncommon; the usual response to a decision; in which the patient or family disagrees is silence and noncompliance. A brusque health care provider may not learn of significant complaints or health problems and find the patient is unlikely to return.

Communication and a good relationship between a patient and his/her health care provider is key to providing quality care. Trust and interpersonal comfort is also a critical component of the relationship between the person who is ill and the healer. Quality care is not just a correct diagnosis and treatment, but also the way in which the treatment is provided.



**(520) 874-5290 or
(800) 582-8686**

Behavioral Health
(520) 874-3411 *fax*

Claims Customer Service
(520) 874-7046 *fax*

Grievance & Appeals
(866) 465-8340 *fax*

Member Eligibility

Member Services
(520) 874-3434 *fax*

Pharmacy
(866) 349-0338 *fax*

Prior Authorization
(520) 874-3418 *fax*

Translation Services
(UFC only)

Transportation (UFC only)

Case Management
Maternal Child Health
(877) 874-3933
(602) 344-8372 *fax*

**Contracting/
Provider Relations**
(520) 874-5523
(520) 874-7142 *fax*

Credentialing
(520) 874-5535
(520) 874-7027 *fax*

**Hospital Admission
Notification**
(520) 874-5230

**Grievance & Appeals
Submissions**
2701 E. Elvira Rd
Tucson, AZ 85756

**Claims Mailing
Addresses**
UP HCG
PO Box 37279
Phoenix, AZ 85069

UFC
PO Box 35699
Phoenix, AZ 85069

UFC (Dental)
Attn: Dental Claims
2701 E. Elvira Road
Tucson, AZ 85756

UPCA
PO Box 38549
Phoenix, AZ 85069

Provider Relations Representatives (PRR) are always ready to address your questions and concerns. Let us know what's important to you! Please note our emails, telephone and fax numbers:

**Southern Arizona
Provider Representatives**

Fax Number: (520) 874-5555

Mailing address:
2701 East Elvira Rd.
Tucson, AZ 85756

Staci Garcia, PRR
(520) 874-5524, sgarcia@uph.org

Patricia Llamas, PRR
(520) 874-5530, pllamas@uph.org

Linda Huebner, PRR
(520) 874-5079, lhuebner@uph.org

Pam Birmingham,
Associate Contract Negotiator
(520) 874-5502, pbirmingham@uph.org

Chris Paquette,
Associate Contract Negotiator
(520) 874-5526, cpaquette@uph.org

**Northern Arizona
Provider Representatives**

Fax number: (602) 344-8358

Mailing address:
2502 E. University Drive, Ste. 125
Phoenix, AZ 85034

Connie Leonardo, PRR
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