

# INFORMATION SECURITY TEAM MESSAGE: How hardened are your systems against cyberattacks?

The recent crippling cyberattack on Change Healthcare is a stark reminder that it is more important than ever for organizations to protect themselves from attacks like the one carried out by BlackCat/ALPHV.

There's one big reason the healthcare industry is particularly vulnerable to cyberattacks: **Personal patient information is valuable.** The threat actors are holding valuable healthcare data ransom resulting in company's paying a \$22M ransom. In addition, threat actors can also use extortion tactics such as threatening to release Protected Health Information to the public if the company does not pay an addition sum of money. Lastly, Healthcare records are being sold on the dark web for \$1,000 per patient record. Organizations can learn from such incidents and implement best practices to enhance their cybersecurity posture.



Here are key takeaways and recommendations:

 Maintain business contingency plans. Healthcare organizations must have plans in place to address cyberattacks or disruptions in revenue cycle processes, including proactively securing lines of credit to mitigate payment disruptions.

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- 2. Ensure access to payer portals. Organizations should ensure they have payer portal logins for all payers with significant claims volume, and establish policies and procedures outlining changes to operations in case of a cyberattack.
- **3.** Secure your Active Directory. Securing AD is critical to limiting ransomware attacks such as BlackCat/ALPHV from spreading across a network. Organizations can take multiple steps to secure AD including implementing robust backup policies and hardening access with fine-grained password policies that limit the risk of domain compromise.
- **4.** Invest in ransomware protection. It is incumbent upon organizations to take the necessary steps to prevent ransomware and limit risk.

## USFHP at PacMed Information Security Team

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## TOOLS YOU CAN USE:

## **USFHPNW Provider Portal**



US Family Health Plan providers can view USFHP eligibility and claims status electronically through our provider portal. In addition, referral coordinators can view authorization status on the portal. Our goal is to make working with us that much easier!

**To set up your account,** contact USFHP Provider Relations at <u>ProviderRelations@USFHPpacmed.org</u>

**Already have a portal account?** Please let your caregivers know they can gain access by reaching out to designated administrators in your organization.

# PHARMACY UPDATE: ENDOCRINE BEERS

### US Family Health Plan's Quality Project for 2024 focuses on the appropriate use of endocrinology drugs based on the Beers Criteria.

The Beers Criteria is published by the American Geriatric Society and pinpoints medications that may be inappropriate in certain patients over the age of 65. The Beers Criteria was last updated in the autumn of 2023.



We have sent notifications either by fax

or secure email if you have a patient identified as being on a high-risk medication. Please take a moment to review those notifications and get back to us regarding what is safest for the patient.

Drug/Drug Class	High-Risk Population	Issues
Sulfonylureas	History of hypoglycemia History or high risk of cardiac events	Increases risk of hypoglycemia and cardiac events
SGLT-2 Inhibitors	Patients with history of repeated UTIs/ yeast infections or ketoacidosis	Increases risk of UTI and can precipitate ketoacidosis
Pioglitazone	Patients with heart failure	Can lead to fluid retention
Prandial Insulin Monotherapy	Patients who are not on basal insulin or an insulin pump	Increased risk of hypoglycemia and poorer control than when combined with a basal insulin
Desiccated Thyroid	All patients over age 65	Erratic thyroid control
Estrogen Replace- ment (Systemic)	Patients over age 65 (Use of vaginal estrogens ok)	Increases risk of thrombosis as well as endometrial/breast cancer
Testosterone Replacement	Patients without hypogonadism	Cardiac effects
Growth Hormone	Patients who are not growth hormone deficient	Edema, insulin resistance, and gynecomastia
Megestrol	Patients over age 65	Increased risk of thrombosis and mortality
Corticosteroids	Delirium patients	Can precipitate or worsen delirium

Below is a list of specific medications and medication classes that we are reviewing in endocrinology.

## **COMPLIANCE CORNER**

# PROGRAM INTEGRITY: Help us to help you



You may see the record requests and results and wonder: What is being reviewed and why? This program is an integral piece of TRICARE fraud, waste, and abuse prevention. The activities we perform focus on detecting, preventing, and correcting errors, as well as education for future success. Clean claims and knowledge of policies helps everyone in the billing cycle. Codes change frequently, and so do the rules or guidance.

This once-a-year post-payment review gives us a look at member care, services billed vs. rendered, and quality of care. For some of the mandated reviews, it ensures that our members who need specialized services and care are getting the most out of their benefits. In the case of applied behavioral analysis (ABA), these results help shape future treatment. It identifies providers and specialties that can have long-term positive effects for these patients and their families.

Program Integrity has steps, metrics, and a specified timeframe for the review. If we don't hear from you or get documentation in the time requested, it automatically fails. We are not able to add additional requirements after that window has closed. But don't fret! We're here to help. The medical community has been carrying a great weight since 2020. When you receive record requests and you have questions or constraints, please reach out. We are your ally and want to see you flow through the process and succeed.

When in doubt, <u>TRICARE Reference Manuals</u> are your best resource for making sure you know what we need to see and verify.



## REMINDER: UPDATE YOUR ACCOUNT INFORMATION WITH USFHP & INSTAMED FOR TIMELY PAYMENTS

- To ensure EFT/ACH claim payments are routed properly and in timely fashion, please update any changes to your bank account with InstaMed as-soon-as possible.
- For check payments, your address should be updated with USFHP and InstaMed.
- You can sign-up for EFT/ACH payments at any time for expedited reimbursement
- If a provider changes practices, this should be reported to USFHP & InstaMed immediately, to ensure future payments are routed correctly.

#### InstaMed:

Phone: 1-866-467-8263 Email: <u>Support@InstaMed.com</u> Website: <u>instamed.com/support/providers</u>

## USFHP Provider Relations:

Phone: 1-800-585-5883, option 2 Email: <u>ProviderRelations@USFHPpacmed.org</u>

## **INVITATION:**

## Help USFHP Advance Quality, Safety and Utilization Management



US Family Health Plan encourages you to serve as a member of the USFHP Quality, Safety, and Utilization Management Committee.

We welcome your ideas and suggestions on how service may be improved for providers and health plan members. To express interest in serving on this committee, or other committees that may be formed by USFHP, please contact USFHP Provider Relations: <u>ProviderRelations@USFHPpacmed.org</u>



## ATTENTION: TRICARE PROGRAM MANUAL

Please be aware that we will be switching over to using the **2021 EDITION OF THE TRICARE PROGRAM MANUALS**.

You can view the updated manual here: https://manuals.health.mil/

## CONTACT US



We are here to answer your questions, and we welcome your suggestions or feedback.

**MEMBER SERVICES** (800) 585-5833, option 2

#### NETWORK CONTRACTING & PROVIDER RELATIONS

ProviderRelations@USFHPpacmed.org

(800) 585-5883, option 2

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#### CREDENTIALING

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#### www.usfhpnw.org

### US FAMILY Health Plan

A health plan sponsored by the Department of Defense (DoD) that offers the TRICARE Prime® benefit to uniformed services beneficiaries in the Puget Sound region. The plan is administered by Pacific Medical Centers, which has performed this role for over 30 years.

### **MISSION**

To provide quality health care for uniformed services family members, retirees and their family members; to have extremely satisfied members; to demonstrate quality, value and operational effectiveness; and to be an integral and respected health care partner in the DoD's Military Health System.



#### **REMINDER:**

### **USFHP and Health Net Are Different Organizations**

To avoid complication and frustration for you and US Family Health Plan members, please make sure that bills/claims/referrals and anything else intended for USFHP does <u>not</u> go to Health Net Federal Services. We are not the same organization.

Claims are processed by date of service, and USFHP reimburses facility-based care at the TRICARE/CHAMPUS DRG or contracted rate. TRICARE rates are updated annually. To access information about TRICARE fee schedule changes, as well as our current <u>Provider Manual</u>, please visit <u>www.usfhpnw.org</u>.