

## Spring 2025

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### Get to know US Family Health Plan

#### What is USFHP?

US Family Health Plan is a TRICARE Prime® option available to families of active duty military, National Guard, and Reserves, as well as to military retirees and their eligible family members. US Family Health Plan is available in six regions across the United States, with Brighton Marine as headquarters for US Family Health Plan of Southern New England, which currently serves over 13,000 members in Massachusetts, Rhode Island, and portions of Connecticut and New Hampshire.

You play an important role in our beneficiaries' lives every day, and we thank you for your partnership.

### What is the relationship between USFHP and Tufts Health Plan?

USFHP has a relationship with Tufts Health Plan to serve as the Plan's third-party administrator. They assist in providing claims processing, referral management, and member/provider services. The affiliation provides USFHP beneficiaries with access to a selected Tufts Health Plan network of physicians and hospitals, as well as specialty and ancillary providers.

In March 2024, USFHP opened their network up to allow the addition of mid-level PCPs. A dedicated team member may reach out to confirm provider demographic details of mid-level PCPs. If you would like a PCP roster reconciliation to be completed, please e-mail your group information to [ProviderRelations@usfamilyhealth.org](mailto:ProviderRelations@usfamilyhealth.org).

### Protecting Personally Identifiable Information (PII) / Protected Health Information (PHI) Key Reminders for Healthcare Providers

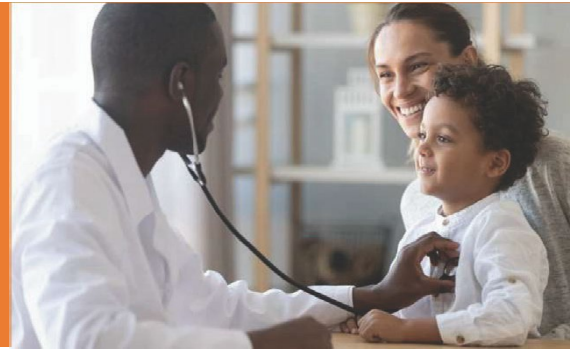
- **Access Only What You Need:** Only access patient records and information necessary for your role.
- **Encrypt Data:** Ensure e-mails and devices transmitting PHI are password protected.
- **Be Cautious with Verbal Disclosures:** Avoid discussing patient information in public or shared spaces.
- **Verify Before Sharing:** Confirm recipient identity before sharing PHI/PII whether electronically or verbally.
- **Report Incidents Promptly:** Notify your compliance officer immediately if you suspect a breach.

### Provider Network Spotlight

If your practice would like to be showcased in an upcoming Heart to Heart newsletter, please reach out to [ProviderRelations@usfamilyhealth.org](mailto:ProviderRelations@usfamilyhealth.org).

[See our full hospital list](#)





## Clinical Corner

### US Family Health Plan at Brighton Marine Ranked in Top Five Percent of Nationwide Health Plans for Member Experiences

Press Ganey, a global leader in healthcare experience solutions and services has awarded US Family Health Plan Brighton Marine with three 2024 Human Experience Pinnacle of Excellence Awards, placing the plan in the top five percent of health plans nationwide for member experience.

The awards are part of Press Ganey's annual ranking of the top health plans, hospitals and health systems in the country, according to performance in a variety of member experience metrics for measurement year (MY) 2023.

Based on the Consumer Assessment of Healthcare Providers and Systems (CAHPS) member satisfaction survey, US Family Health Plan Brighton Marine earned recognition for delivering exceptional performance in three areas:

- Highest Overall CAHPS Ratings
- Highest Plan and Plan Services CAHPS Ratings
- Highest Physician Care CAHPS Ratings

This prestigious honor reflects Brighton Marine's unwavering commitment to understanding and prioritizing the voices of its members.

## Clear and Legible Reports (CLRs)

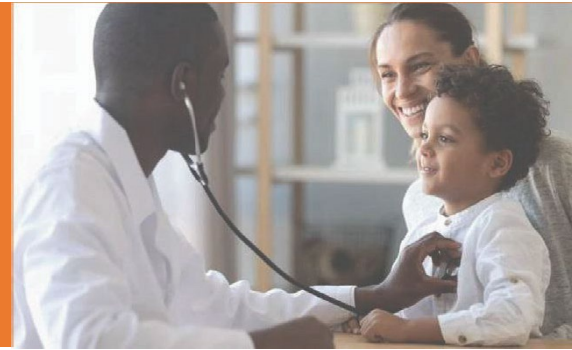
Under TRICARE guidelines, the submission of clear and legible reports (CLRs) is not just a best practice-it's a compliance requirement. Specialty providers must ensure that all patient documentation sent to referring providers is timely, readable, complete, and accurately reflects the care provided.

Ensuring specialists send all consultation or referral reports, operative reports, and discharge summaries to referring providers within 30 calendar days is a critical part of delivering high-quality, coordinated patient care. These notes serve as the primary communication bridge between specialists and referring providers, enabling timely decision-making and continuity in treatment planning. If your practice is unable to fax a copy of the CLR to the PCP, please fax it to (855) 270-5469 and a member of the USFHP team will ensure the PCP receives a copy.

Clear, concise, and timely consult notes aren't just administrative requirements-they're integral to patient care and provider communication.

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# HEART to HEART Provider Update



## Controlling High Blood Pressure: (BP) Provider Best Practices

- Educate patients on the importance of taking medications as prescribed, smoking cessation, physical activity and eating a low-sodium diet.
- Contact patients who miss or cancel appointments to reschedule.
- Document blood pressure at every visit.
- Advise the patient to rest for at least 5 minutes before taking BP.
- Ensure patient is seated with feet on the floor, back supported, and arm supported at heart level.
- Use the proper size blood pressure cuff.
- When using a manual blood pressure cuff, do not round up blood pressure readings.
- Repeat blood pressure at the end of the visit if the initial blood pressure is 140/90.

### *HEDIS Measure:*

### Controlling High Blood Pressure

#### *Indicator:*

CBP

#### *Date range:*

Current measurement year

#### *What is needed:*

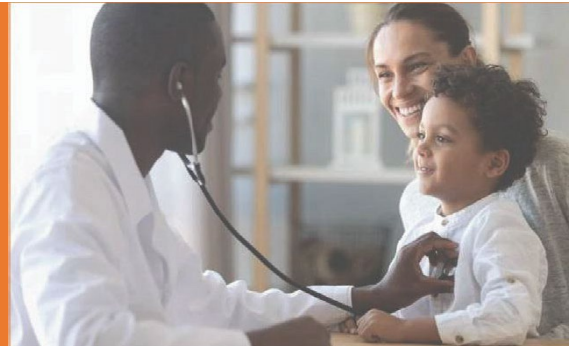
- All blood pressure flowsheets in current measurement year
- All office/telehealth visit notes with dated blood pressure readings in measurement year
- Repeat blood pressure if initial BP is  $\geq 140/90$  (controlled is  $< 140/90$ )
- Specify the exact dates and readings for patient-reported blood pressures taken at home with a digital device

#### *Other:*

If no blood pressure reading available, send last office or telehealth visit note

- Document exact readings and dates of patient-reported blood pressures. Ranges are not acceptable. Remind patients that they must use a digital device when taking their blood pressure.
- Schedule a repeat blood pressure check prior to the end of the measure year for patients with blood pressure  $\geq 140/90$ .
- When billing for visits, be sure to include the correct CPT II codes.

# HEART *to* HEART Provider Update



## Military Cultural Competency: Bridge the Cultural Gap between Veterans and Civilians.

Fostering meaningful relationships between our providers and beneficiaries through open dialogue and understanding will help improve healthcare support both mentally and physically.

Topics to consider when servicing USFHP beneficiaries:

- Respect military values such as discipline, duty, honor, and loyalty, which may influence health decisions and attitudes towards care.
- Understand the stigma around mental health in military culture, which may prevent service members from seeking help.
- Be aware of service-related health issues such as post-traumatic stress disorder (PTSD), traumatic brain injuries (TBI), musculoskeletal injuries, and moral injury.
- Recognize the unique stressors of military life, including deployment cycles, frequent relocations, and family separations.
- Include family dynamics in care plans. Recognizing the role of military spouses and children in healthcare decision-making.

## Access to Care Standards

Type of Care	Access to Care Standards for Participating Provider
Emergency Care	Immediate Access
Urgent Care	Within 24 Hours (1 Day)
Routine Care	Within 1 Week (7 Days)
Specialty Care	Within 4 Weeks (28 Days)
Office Wait Time	Less than 30 minutes



Stay current with all your US Family Health Plan communications. Sign up today to receive digital updates!