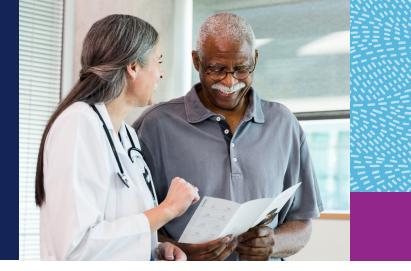
# Provider Check Up





FALL 2023

## **Introducing Jefferson Health Plans**

Our name may be changing, but our commitment to our community remains the same: **Health Partners Plans is now Jefferson Health Plans, effective July 1, 2023**.

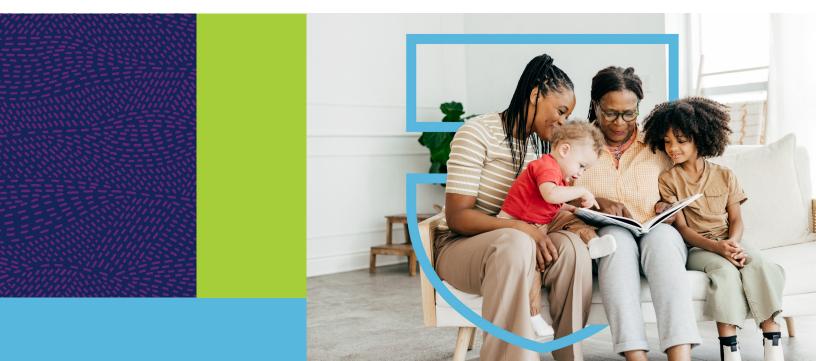
With Jefferson Health, we remain committed to our talented and broad network of providers—and the communities we serve.

Our rebrand will take a phased approach through 2025, with our Medicare plans being the first products to carry our new Jefferson name for the 2024 plan year.

There is nothing you need to change today. Our members can continue seeing their PCPs, specialists and other doctors as usual.

These changes will not impact our dedication to our mission, vision and core values that have guided us for more than 35 years. We will continue to work closely with our provider network to help enhance our offerings and support our members.

You can find more information on this transition in this release from Jefferson Health.



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## **Pharmacy Corner**

## **Contraceptives Including LARCs**

#### LARC Coverage

Jefferson Health Plans is happy to share an exciting update that will simplify things for prescribers and members alike.

For our Medicaid members who wish to utilize contraceptives, Jefferson Health Plans covers:

- Oral contraceptives, vaginal rings and patches
- Long-Acting Reversible Contraception, or LARCs. (LARCs are devices such as intrauterine devices (IUDs) and implanted hormonal birth control that is administered by a healthcare provider, and work for years.)

Contraceptives, including LARCs, are covered on the Jefferson Health Plans Medicaid Preferred Drug List (PDL) under the Pharmacy Benefit. Contraceptives are available

for pick up at pharmacies with a provider's prescription. For LARCs, the pharmacy can help coordinate delivery services to your office.

## See below for a list of the preferred LARCs on Medicaid Preferred Drug List:

- Mirena IUD
- Skyla IUD
- Liletta IUD
- Kyleena IUD
- Nexplanon Implant
- Paragard Intrauterine Copper IUD

#### **Formulary Updates**

For the most up-to-date information regarding Jefferson Health Plans formularies, please visit our <u>online</u> <u>formulary</u>. Here you'll find the most recent formulary, prior authorization, quantity limit, age edit updates and more.

## Statin Therapy for Patients with Cardiovascular Disease

In 2020, cardiovascular disease (CVD) and other associated diseases caused <u>approximately 19.05 million deaths</u> <u>globally</u>. Cardiovascular-related conditions pose serious health threats and require adequate treatment. Statin therapy has been proven to improve patient outcomes by decreasing the buildup of plaque in the blood vessels. Providers can assist patients with CVD by providing statin therapy.

**Statin therapy for patients with CVD HEDIS measure:** Assesses the percentage of males 21-75 years of age and females 40-75 years of age during the measurement year, who were

identified as having clinical atherosclerotic cardiovascular disease (ASCVD).

Two rates are reported:

- **1) Received Statin Therapy:** Patients who were dispensed at least one high-intensity or moderate-intensity statin during the measurement year.
- **2) Statin Adherence 80%:** Patients who remained on a high-intensity or moderate-intensity statin for at least 80% of the treatment period.

Moderate Intensity	High Intensity
Atorvastatin 10-20 MG	Atorvastatin 40-80 MG
Rosuvastatin 5-10 MG	Rosuvastatin 20-40 MG
Simvastatin 20-40 MG	Simvastatin 80 MG
Pravastatin 40-80 MG	_
Lovastatin 40 MG	_



## **Statin Therapy for Patients with Diabetes**

Increased glucose levels in blood vessels can lead to damaged blood vessel walls and nerves that allow the heart to function properly. To prevent further complications of diabetes, statin therapy is considered to minimize the risk of atherosclerotic cardiovascular disease (ASCVD) and other cardiovascular complications. ASCVD is caused by a buildup of cholesterol which results in blocked blood vessels. Health care providers have determined that statin therapy can be used to treat diabetic patients and reduce the risk of ASCVD.

**Statin therapy for patients with diabetes HEDIS measure:** Assesses the percentage of those 40-75 years of age during the measurement year with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD).

Two rates are reported:

- 1) Received statin therapy: Patients who were dispensed at least one statin medication of any intensity during the measurement year.
- 2) Statin adherence 80%: Patients who remained on a statin medication of any intensity for at least 80% of the treatment period.

The following are examples of some statin medications based on intensity:

Low Intensity	Moderate Intensity	High Intensity
	Atorvastatin 10-20 MG	Atorvastatin 40-80 MG
—	Rosuvastatin 5-10 MG	Rosuvastatin 20-40 MG
Simvastatin 5-10 MG	Simvastatin 20-40 MG	Simvastatin 80 MG
Pravastatin 10-20 MG	Pravastatin 40-80 MG	—
Lovastatin 10-20 MG	Lovastatin 40 MG	_

## **Provider News**



#### **Required Training Reminder**

#### Model of Care D-SNP (Special Needs Plan) Provider Training

If you are a provider who has a Health Partners Medicare Special (D-SNP) member assigned to your practice, or a member of your staff who is involved in the care of our dual-eligible special needs plan (D-SNP), our annual D-SNP Model of Care training module must be completed. This training is required by the Centers for Medicare & Medicaid Services (CMS).

The training course is available through through our online <u>required</u> <u>trainings page</u>.

The course will approximately take 10 minutes to complete and must be submitted by October 31.

#### **Annual Orientation and Training**

<u>Register now</u> for an upcoming quarterly provider orientation and training for new and existing providers.

In addition to the live webinar, there are two alternative methods for completing the required training:

- 1. Request face-to-face training by emailing <u>ProviderEducation@hpplans.com</u>
- **2.** Download <u>Our 2023 Annual Orientation and Training</u> to review with your staff. Simply review the information, and click "submit" to complete the requirement by December 31.

#### Well-Child Visit Guidelines and Clarification

You can complete a well-child visit once every year, **even if 365 days have not yet passed** since their last well visit in the prior calendar year. For additional well visit guidelines, please see our article on page 4 of the **Summer 2023 Provider Check Up**.

#### **Street Medicine**

We are excited to inform you about a new opportunity to provide care to unsheltered people experiencing homelessness in locations such as encampments, parks and under bridges, known as "Street Medicine." This will allow Medicaid-covered services to be provided outside of the office setting to better serve homeless Medicaid members.

Effective July 5th, 2023, in alignment with Pennsylvania Department of Human Services (DHS) guidelines, claims billed with place of service 15 (mobile unit), 04 (homeless shelter), 16 (temporary lodging), or 99 (other) with the U2 modifier and one of the following diagnosis codes; **Z59.00**; **Z59.01**; **Z59.02** will not require authorization and will allow payment according to the terms of your contract.



## **Special Investigations Unit Reporting Methods**

Per the DHS' Medical Assistance Bulletin "Guidelines for the Delivery of Physical Health Services via Telemedicine" number <u>99-21-06</u> and updated version number <u>99-22-02</u>:

When the beneficiary accesses services at an enrolled originating site, the provider serving as the originating site may bill for the technology service using the telehealth originating site procedure code Q3014 only. MA Providers may no longer bill procedure code Q3014 in addition to an office visit that is provided at the originating site.

Jefferson Health Plans has made an edit to catch the misuse of billing codes such as the one identified above. Jefferson Health Plans creates edits in our claims software to prevent payments of these types of double billing claims from being paid.

On the post-payment side, Jefferson Health Plans uses software to review claims submitted for potential fraud, waste and abuse. When this is discovered, Jefferson Health Plans' Special Investigations Unit (SIU) will begin an investigation which could result in recoupments of paid claims. To avoid this, be sure that medical records support the claims which are submitted for payment.

Everyone associated with Jefferson Health Plans is responsible for monitoring for potential fraud, waste and abuse, and is responsible for reporting suspicions of such activities to Jefferson Health Plans' SIU.

#### **Reporting Methods:**

Our Compliance Hotline, a confidential and anonymous reporting method, can be reached by phone (**1-866-477-4848**) or <u>online</u>.

You can also make reports directly to law enforcement/regulatory oversight agencies:

- OIG Hotline: 1-800-HHS-TIPS (1-800-447-8477)
- CMS Hotline: 1-800-MEDICARE (1-800-633-4227)
- DHS Hotline: 1-866-DPW-TIPS (1-866-379-8477)

## EPSDT Periodicity Schedule Updates for 2023

The DHS has updated the EPSDT Periodicity Schedule for 2023. The changes for the updated version are:

- The HIV screening recommendation has been updated to extend the upper age limit from 18 to 21 years (to account for the range in which the screening can take place) to align with recommendations of the USPSTF and AAP policy <u>("Adolescents and Young Adults: The Pediatrician's Role in HIV Testing and Pre-and Postexposure HIV Prophylaxis"</u>).
- A separate line has been added under Oral Health to ensure primary care providers are aware that topical fluoride varnish may be applied up to four times per year for beneficiaries from 0 through 20 years of age. This service may be billed using current procedural terminology code 99188.

Please click <u>here</u> to view the EPSDT Periodicity in full.

## **Quality Management Provider Referral Line**

To ensure the highest quality of care, and in accordance with the Pennsylvania Department of Human Services and CMS requirements, our QM department must identify, track and follow up on the following:

- Preventable Serious Adverse Events
- Healthcare Acquired Conditions
- Other Provider Preventable Conditions

We offer a toll-free anonymous provider reporting line to identify and track such events that are deemed preventable, serious and adverse. To report an event, call **1-855-218-2314** with the following information:

- Member name, ID# and/or date of birth
- Date of event
- Description of event
- Location where event occurred

All calls will remain confidential and will be followed up by QM for verification. Our policy is to reasonably track and isolate identified events and account for payments that may have been made in association with them. Jefferson Health Plans reserves the right to retract payments made for what are deemed preventable events.



## Promotion of the Pennsylvania Quitline

Smoking increases the chances of developing chronic diseases such as heart disease, stroke, lung disease and cancer. Pregnant women who smoke are more likely to deliver premature babies, which is a leading cause of death, disability and disease among newborns.

According to the <u>Pennsylvania State of Our Health Report</u> <u>2022</u>, the increased exposure to nicotine products other than conventional cigarettes (e-cigarettes/vaping) is a concerning public health issue among high school students. The PA DOH has made reducing tobacco use among adults and vaping among high school students a component of their 5-year health improvement plan<sup>1</sup>.

Jefferson Health Plans has a tobacco recovery workgroup that meets regularly to develop initiatives to raise awareness around smoking cessation benefits including nicotine replacement and smoking cessation counseling. The initiative promotes tobacco cessation counseling (TCC) certification for providers and clinicians to increase tobacco cessation with our members who smoke. We encourage referrals to the PA Quitline.

#### Jefferson Health Plans Supports the Pennsylvania Free Quitline

The PA Free Quitline (**1-800-QUIT-NOW**) is a telephonebased tobacco cessation counseling service. The counseling service offers up to five free trained quit coaching calls. The Quitline is available 24/7 and unlimited, inbound calls for additional support during times of high risk of tobacco use. Additionally, there are web-based and text message support services, as well as free nicotine replacement therapy – if medically eligible.

#### **Specialty Programs**

**Pregnant and Postpartum Program:** One in every five babies born to mothers who smoke during pregnancy have low birth weight. Mothers who are exposed to secondhand smoke while pregnant are also more likely to have lower birth weight newborns.

- Get up to nine free, personalized coaching sessions
- Receive financial incentives for each call completed

**Youth Tobacco and Vaping Cessation Program:** Teens who vape are four times more likely to smoke cigarettes or use other forms of tobacco. Almost 90% of adults who use nicotine today started as teens.

- Five coaching sessions by phone, live texting or chat.
- Coaches who help teens navigate social situations while finding healthy ways to cope with stress.
- Text or call a dedicated toll-free number (**1-855-891-9989**) for real-time coaching.
- Promotional and educational materials designed for youth with messages from youth about quitting tobacco and vaping.
- Visit mylifemyquit.com.



<sup>1</sup><u>https://www.health.pa.gov/topics/Documents/</u> Health%20Planning/SHAUpdateReport2022.pdf

**Provider Resources:** Educational materials, web support, readiness evaluations, and interventions can be found on <a href="https://pa.quitlogix.org/en-US/Health-Professionals/Education">https://pa.quitlogix.org/en-US/Health-Professionals/Education</a>

#### Vaccine Counseling Only Visits

Effective immediately, Jefferson Health Plans will now reimburse for vaccine counseling only visits for beneficiaries under 21 and their parents/caregivers via use of procedure code **G0312**. Please discontinue use of procedure code **99401** for the purposes of billing vaccine counseling only visits. For more information, please see the updated **DHS bulletin**.

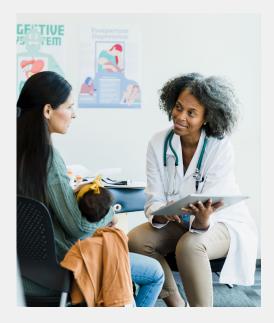
#### **Postpartum Care for New Parents**

Jefferson Health Plans members have several options to complete their postpartum checkup. This appointment screens for health issues, assesses perinatal mood and anxiety disorders and ensures the member is satisfied with her chosen contraceptive method.

The American College of Obstetricians and Gynecologists (ACOG)

now recommends that women receive the first a postpartum checkup between 7 and 21 days after the birth, with at least one other visit before 84 days postpartum. It's best if the member returns to the provider who provided her prenatal care. Baby Partners care coordinators can help members schedule these visits, arrange transportation and provide appointment reminders.

If the member is unable to return to the OB provider, there are two options. Members living in the Southeast zone can schedule an in-home postpartum exam with a nurse practitioner. All members can schedule a virtual postpartum exam with a collaborating primary practice. Baby Partners care coordinators can assist with scheduling these visits.



## Home Visiting Programs for Pregnant Members/New Parents

Jefferson Health Plans encourages in-network providers to refer pregnant members and new parents to an evidence-based home visiting program.

All pregnant Jefferson Health Plans members and parents/guardians of children younger than 18 months are encouraged to participate in one of these programs, free of charge.

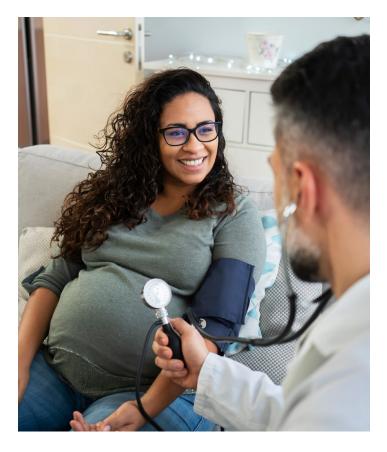
Programs begin during pregnancy, or after birth, and continue for the first 18 months of the infant's life. Agency staff visit the family and provide educational resources, resource referrals and ongoing support; visit frequency is dependent on the family's preference. Here are some of the nationally recognized home visiting programs that are available throughout Pennsylvania:

- Parents as Teachers (717-763-1661)
- Nurse-Family Partnership (844-637-6667)
- Early Head Start
- Healthy Families America

These programs are proven to help new families by educating parents about child development and parenting tactics.

#### How to Make a Referral to These Programs

All these programs accept referrals through their websites and by phone. Providers can make the referral on the member's behalf; members may self-refer as well. You can make the referral by sending an email with the member's information and your contact information to <u>HomeVisitingReferral@jeffersonhealthplans.com</u>; our care coordinator will assist in connecting the family with a program. Our Baby Partners coordinators inform members about these programs and help members enroll. Jefferson Health Plans will continue to reach out to members and encourage them to sign up for a home visit program. For more information, contact the Baby Partners team at **1-866-500-4571**.





#### **Developmental Screenings**

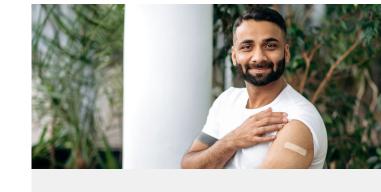
According to the American Academy of Pediatrics, standard developmental screenings should be conducted at nine-month, 18-month, and 30-month wellness visits. Additionally, physicians should administer a screening for <u>autism spectrum disorder</u> (ASD) during the 18-month and 24-month health supervision visits. Developmental screenings should be completed for all patients with a confirmed elevated blood lead level (BLL) — even if a screen was completed during a previous well child visit.

Providers must document all surveillance, screenings and referral activities, and include a copy of the validated developmental or autism screening tool used to conduct the screening. If you

suspect that a child may have a potential developmental delay and requires early intervention services, a referral should be made to CONNECT via phone: **1-800-692-7288** or email: <u>connecthelp@tiu11.org</u>. You may use any validated screening tool to perform this preventive service. To view the validated screening tools please visit our <u>Developmental Screenings provider page</u>.

#### **Depression Screening in Pregnancy**

During pregnancy, women can be more prone to feeling sad, overwhelmed and depressed. Assessing your patients' mental and emotional health and making any necessary referrals is as important as evaluating their physical health, from the first prenatal encounter until their postpartum visit. There are many validated depression screening tools available, from the 10-question Edinburgh Postnatal Depression Scale (EPDS) to the shorter two-question Patient Health Questionaire-2 (PHQ-2). Some Electronic Medical Record (EMR) platforms have these tools available for use. Free versions of depression screening tools can be found on the websites such as the <u>American College of Obstetrics and Gynecology (ACOG)</u> for the EPDS, or the American Academy of Pediatrics (AAP) for <u>PHQ-2</u> or <u>EPDS</u>.



#### Immunizations Aren't Just for Kids

As summer is winding down and a new school year is ramping up, it is time to think about immunizations; not only for schoolaged children but for those who have been out of a classroom for a while.

There are several vaccination preventable diseases that are still in the community, and vaccination remains the best protection against surges in these diseases. Talk to your patients and their families about the need for immunizations. The Centers for Disease Control and Prevention's (CDC) #HowlRecommend campaign offers a video series which explains the need for vaccinations and how to answer questions from patients and their families on why the vaccinations are needed. The series has components for all age ranges: childhood, adolescent, adult and maternal populations. The series also includes a video focused on influenza and videos listed by clinical type or subject. Please visit the CDC's website to learn more: #HowIRecommend.

## This event brings together employers and job seekers in the Philadelphia area. The event is open to the public. DATE October 18, 2023

**Career Day** 

#### LOCATION

Community College of Philadelphia, Bonnell Building

> 1700 Spring Garden Street, Philadelphia, PA 19130

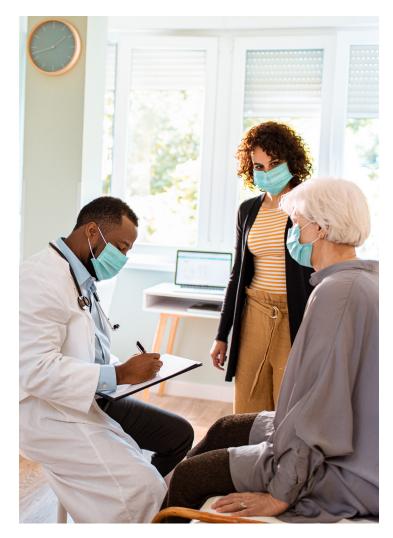
### **Cancer Prevention**

Most cancers, if found early, are treatable. When you are meeting with your patients for their annual well visit or a sick visit, please discuss the importance of cancer prevention and screenings. Talk to your patients about their risk factors:

- Gender
- Personal or family history
- Ethnicity
- Socioeconomic status
- Access to health care
- Modifiable risk factors:
  - Decrease in physical exercise
  - Unhealthy diet
  - Overweight and obesity
  - Alcohol use
  - Tobacco and/or vaping use
  - Exposure to the sun

Discuss with your patient the need to have certain screenings based on their risk factors such as:

- Breast cancer: mammography, clinical exam
- Gynecologic cancer: clinical exam, PAP/HPV testing
- Colorectal cancer: colonoscopy, stool testing
- Prostate cancer: PSA or digital exam based on history
- Skin cancer: annual skin exams



Information for this article was gathered from the <u>National</u> <u>Cancer Institute</u> at the National Institute of Health.

## Addressing Gun Violence and Promoting Gun Safety

Did you know that gun injuries have become the leading cause of death among children and teenagers ages 1 to 19? Children with access to firearms have an increased risk of firearm injury and death. According to the <u>American Academy of Pediatrics (AAP)</u>, removing firearms from the home is the best mode of protection, but that can be difficult when ownership of guns has significantly increased since 2020. It has never been more important that we work together to make sure our members, your patients and our communities are safe.

Below are some tips you can share with your patients whether they have guns in their homes or not:

- Store their guns unloaded and keep the ammunition stored separately. Keep the storage keys hidden and out of children's reach.
- Gun cleaning supplies can be toxic, so lock them up and keep them out of children's reach as well.
- Practice gun safety and teach children that guns are not toys to be played with.
- Never keep a gun in the home if anyone living in the home has a history of depression.
- If your child is going to a friend's house, ask the parents if they keep guns in their home and, if so, how they practice gun safety.

Visit our <u>website</u> for more information about gun safety and to request a free cable-style gun lock and safety instructions for your patients.

## Jefferson Health Plans invites you to join us at our upcoming community events:

#### A Day at the Zoo with Jefferson Health Plans

Join us for a family friendly day at the zoo! You can enter for a chance to win a family membership to the zoo and receive school supplies for children, while supplies last.

Register by September 15 at: <a href="http://www.runsignup.com/HPPLehighValleyZoo">www.runsignup.com/HPPLehighValleyZoo</a>





