PROVIDER INSIDER plus





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In this edition:

- RMHP Transition Updates (pg. 1)
- Growing the Health Care Workforce (pg. 1)
- Update Clinical Practice Guidelines (pg.2)
- Health Outcomes Survey: Mental and Physical Health for Medicare Patients (pg. 3)
- Care for Older Adults (COA) Measure (pg. 3)
- The Department of Healthcare Policy and Financing Corner (pg. 3)
- Child Health Plus Primary Care Shared Savings Announcement (pg. 6)
- Education & Training (pg. 6)

Rocky Mountain Health Plans Transition Updates

On January 1, 2023, Rocky Mountain Health Plans (RMHP) transitioned our computer systems to UnitedHealthcare (UHC). This transition includes changes to claim submissions and payments. **Please read all communications you receive from UHC and RMHP.** Read the most recent <u>Frequently Asked</u> <u>Questions (FAQ)</u>. This FAQ will be updated regularly. Please bookmark and check <u>this link</u> often for new and updated information throughout the transition.

Additionally, please be aware that the process for prior authorizations for RMHP plans has some different steps than other UHC plans. For more information on the process to submit authorizations for RMHP Members on <u>UHCprovider.com</u>, please review the tutorial by clicking <u>here</u>.

If you have questions, please reach out to your RMHP Provider Relations Representative, or call the following Provider Services phone number based upon the specific plan in question:

UnitedHealthcare Individual and Family Plans 888-478-4760 UnitedHealthcare D-SNP 800-701-9054

UnitedHealthcare Medicare Advantage 877-842-3210

UnitedHealthcare Community Health Plans 877-668-5947

Growing the Health Care Workforce

Help build the health & childcare workforce by spreading the word to your patients, community, and staff about these once-in-a-lifetime educational opportunities!

Please help us grow the health care and childcare workforce. Please print and display these timelimited training opportunity communications in your patient waiting rooms, exam rooms, staff break rooms and other related areas. The links below include a poster that can be printed and a digital display that can go on TV screens in patient or staff areas. <u>Print and digital resources are online</u>.

These free education opportunities are essential to revitalizing the health care workforce, while offering upward mobility for low-income Coloradans seeking new career paths. If these communications get to the right people, they can be life-changing and give people a once-in-a-life-time opportunity for free certifications that create a meaningfully different income trajectory. Please help fully leverage these unique educational and career advancement opportunities by displaying these important communications today!



Update: Clinical Practice Guidelines

RMHP reviews, adopts and develops evidence-based clinical practice guidelines to assist practitioners with clinical decisions. Clinical practice guidelines are available to Members upon request. Clinical Practice Guidelines can be found on the RMHP website or obtained by contacting the Clinical Quality Improvement Department at (970) 263-5552 or (855) 830-1565. Or, email Aubrey Blythe at <u>Aubrey.Blythe@uhc.com</u>. Below is a list of the approved 2023 clinical practice guidelines.

GUIDELINE	SOURCE		
Adult Preventive Care	U.S. Preventive Services Task Force (USPSTF), Centers for Disease Control (CDC)		
After a Heart Attack	American Heart Association (AHA), American College of Cardiology (ACC), American College of Cardiology Foundation (ACCF)		
Asthma	National Heart, Lung and Blood Institute (NHLBI), National Asthma Education and Prevention Program (NAEPP), Global Initiative for Asthma (GINA)		
Atrial Fibrillation	American Heart Association (AHA), American College of Cardiology (ACC), Heart Rhythm Society (HRS)		
Attention Deficit Hyperactivity Disorder	American Academy of Child and Adolescent Psychiatry (AACAP)		
Behavioral Health	American Academy of Child and Adolescent Psychiatry (AACAP), American Academy of Pediatrics (AAP), American Psychiatric Association (APA), American Society of Addiction Medicine (ASAM), American Psychological Association (APA)		
Cardiovascular Disease	American Heart Association (AHA), American College of Cardiology (ACC)		
Cholesterol Management	American Heart Association (AHA), American College of Cardiology (ACC)		
Chronic Obstructive Lung Disease	Global Initiative for Chronic Obstructive Lung Disease (GOLD)		
Dementia	American Academy of Family Physicians (AAFP)		
Diabetes	American Diabetes Association (ADA)		
Dietary Guidelines	U.S. Dietary Guidelines for Americans (USDA)		
Heart Failure	American College of Cardiology (ACC), American Heart Association (AHA), Heart Failure Society of America (HFSA)		
Human Immunodeficiency Virus (HIV)	U.S. Department of Health and Human Services, HIV Medical Association of the Infectious Diseases Society of America		
Hypertension	American Heart Association (AHA), American College of Cardiology (ACC)		
Kidney Disease	National Kidney Foundation (NKF)		
Major Depression	American Psychiatric Association (APA)		
Obesity	U.S. Department of Veterans Affairs (VA)/Department of Defense (DoD), American Academy of Pediatrics (AAP)		
Pediatric Preventive Care	American Academy of Pediatrics (AAP), Centers for Disease Control (CDC), U.S. Preventive Services Task Force (USPSTF)		
Perinatal Care	Rocky Mountain Health Plans (RMHP)		
Physical Activity	U.S. Department of Health and Human Services		
Special Healthcare Needs Adult	Rocky Mountain Health Plans (RMHP), American Psychological Association (APA)		
Special Healthcare Needs Children	American Academy of Pediatrics (AAP), The Association of Maternal & Child Health Programs (AMCHP)		
Tobacco Use	American College of Cardiology (ACC)		
Violence and Abuse	American Medical Association (AMA)		







Health Outcomes Survey: Mental and Physical Health for Medicare Patients

The <u>Medicare Health Outcomes Survey</u> is administered to a random pool of eligible Medicare Members to assess their memory recall of conversations they have had with their providers around key aspects of changes in health with aging and their perception of their physical and mental health status. Then, the same members are re-surveyed after two years to assess if the member's mental and physical health have improved, maintained, or declined. As their primary care provider, you can utilize health care encounters to address the importance of improving and



maintaining a healthy physical activity lifestyle that is inclusive of mental health. When it comes to physical activity and mental health, the two work together to create a positive outcome in a person's well-being. Here is a link to the <u>Medicare</u> <u>Health Outcomes Survey Provider Toolkit</u> that includes links to YouTube exercise channels, links to podcasts, and many more resources that are vetted and can be shared with your older patients.

Care for Older Adults (COA) Measure

As individuals age, physical and cognitive function can begin to decline, and pain can start to intensify throughout the body. The Care for Older Adults measure ensures adults 66 years and older receive the care they need to optimize the quality of their life. This includes review of medications and assessing functional and pain status. Coding and documentation is an important aspect in this measure. <u>Click here</u> for more information regarding the COA measure, documentation, and coding tips and to review best practices.

Colorado Department of Healthcare Policy & Financing (HCPF) Corner



COLORADO

Department of Health Care Policy & Financing

From the January 2023 Provider News & Resources Issue 60:

Information to Prepare for End of the Public Health Emergency

Public Health Emergency Overview

In January 2020, the U.S. Department of Health and Human Services (HHS) declared a public health emergency (PHE) in response to the outbreak of COVID-19. Congress subsequently passed legislation that ensured anyone enrolled in Health First Colorado was guaranteed to keep their health coverage during the PHE. This also applies to children and pregnant people covered by Child Health Plan Plus (CHP+).

Once the PHE ends, it will take 12 months (14 months including noticing) for the Department of Health Care Policy & Financing (the Department) to complete the renewal process for each of the approximately 1.7 million people currently enrolled. It is essential that members pay attention to renewal notices and fill out the necessary forms to enable them to keep Health First Colorado and CHP+ coverage, if still eligible. Visit the Public Health Emergency Planning web page for the latest information on PHE planning.

Update Your Address Campaign

Continue to help spread the word to Health First Colorado and CHP+ members to update contact information. Many members have moved over the past few years, and it is crucial to have correct addresses so that members get the information needed to keep or change coverage. Use the following resources to spread the word: <u>Update Your Address</u> <u>outreach materials</u> (available in the top 11 languages).







Behavioral Health Providers

Health First Colorado Member Rights to Timely Access to Behavioral Health Services

All members of Health First Colorado have the right to receive services in a timely and coordinated manner. If a provider is unable to offer a member medically necessary behavioral health services within seven days, the provider should educate the member on their rights to receive a service in a timely fashion, and either:

- 1) Refer the member to the Regional Accountable Entity (RAE) for access and coordination of services. Referring a member to the RAE is not considered "dismissing" or "termination" of a member. The fee-for-service dismissal policy does not apply to timely access issues. Health First Colorado managed care contracts specify the RAE's duties in responding to wait time issues and taking actions necessary to ensure that all covered mental health and substance use disorder services are provided to members with reasonable promptness (9.4.14., 14.5.1.). Every RAE has the responsibility of ensuring their network is sufficient so that members are provided non-urgent, symptomatic behavioral health services within seven (7) days of a member's request (9.4.13.5.2.1).
- 2) Schedule an appointment outside the seven-day timeframe, based on the Member's right to choose a provider and if the member consents. When the member exercises the right to wait for services from a provider of choice, provision of service delivery is allowable.

Providers should contact the RAEs for more information. Visit the <u>Accountable Care Collaborative web page for the RAE</u> <u>contact information</u>.

Durable Medical Equipment (DME) Providers

Multi-User Breast Pump Loaner Benefit

Procedure code E0604 with modifier RR should be used when billing for multi-user breast pumps. Effective January 1, 2023, the reimbursement rate for E0604RR is \$219.67. There has been an update for the rate and code combination. This is a continuous rental item that will not be converted to purchase. Prior Authorization Requests (PARs) are required. Prescriptions should include information on why a single-user pump is not sufficient for the member.

Multi-user pumps may be rented for up to two years. Providers are required to supply members with any necessary material and training on appropriate cleaning, storage, and use. A single-user collection kit specifically made for the corresponding pump must also be provided to each user and is not billed separately. Additional accessories and supplies needed during the usage period, including replacement parts, are inclusive of the monthly rate and should not be billed separately.

All rented pumps must be approved by the Food and Drug Administration (FDA) as a multi-user breast pump. Single-user breast pumps (electric and manual) remain a covered benefit, and PARs are not required. Members may receive a breast pump as early as the 28th week of pregnancy. Per Early and Periodic Screening, Diagnostic and Treatment (EPSDT) policy, deliveries prior to 28 weeks qualify for a breast pump immediately following the birth. Contact Haylee Rodgers at Haylee.Rodgers@state.co.us with questions.

Authenticating When Contacting the Provider Services Call Center

An additional verification will soon be required when a provider contacts the <u>Provider Services Call Center</u>. The fiscal agent will require the caller to provide an 8- to 10-digit Health First Colorado (Colorado's Medicaid program) ID and the National Provider Identification (NPI) (if applicable) to release Health Insurance Portability and Accountability Act (HIPPA) protected information. Ensure any billing companies used have both the NPI and the specific provider ID for each location and provider type. Refer to <u>the December 2022 Provider Bulletin (B2200487)</u> for more information.







HCPF ePrescriber Tool

HCPF is requesting that PCMPs and Hospitals that have not attested to their utilization or need to update HCPF on the status of their Real Time Benefit Inquiry tool utilization, please complete a new attestation form at the following links:

- Hospitals: <u>Hospital Attestation Link</u>
- PCMPs: <u>RAE/PCMP Attestation Link</u>

PCMPs and Hospitals that have full utilization of the HCPF Real Time Benefits Inquiry tool within the ePrescriber system will be automatically enrolled in an incentivized APM Program that is set to begin in July 2023. You will receive communication with program details as it is received from HCPF. Please refer to the <u>HCPF ePrescriber website</u>, or contact Lauren Hussey at: <u>lauren.hussey@state.co.us</u> for more information.

HCPF Alternative Payment Model (APM) PY2022

End of Program Year Reporting Notification

- Structural Measures As a reminder, if your practice selected Structural Measures in the HCPF APM PY2022, please send your completed documents to your Clinical Program Manager on or before January 31, 2023.
- eCQMs Your eCQMs, if selected, will be collected by your Health Data Colorado (HDCo) organization, either QHN or Contexture in Q1 of 2023. Please watch your email for further communication from your HDCo contact.
- Administrative Measures If your practice selected Administrative Measures (Claims measures), your progress in those selected measures can by tracked within the Colorado Data Analytics Portal (DAP). Please reach out to your Clinical Program Manager for assistance in signing up for access to the DAP.

HCPF Alternative Payment Model (APM) - PY2023

New Program Year Information

The HCPF APM PY2023 Program Resources are now available on the <u>HCPF APM website</u>. You should have already received notification from your Clinical Program Manager about your enrollment in the HCPF APM PY2023. As a reminder, Primary Care Medical Providers who serve at least 500 attributed enrollees are automatically enrolled in the APM program. The deadline for Measure selection for PY2023 is **January 31**, **2023**. Once the final 2023 APM 1 Measure Selection Workbook and Measure Selection Survey for 2023 are updated and made available on the HCPF website, you should set up a meeting with your Clinical Program Manager to assist you in your measure selection. Final Measure Selection documents will be available the first week of January 2023.

For more information, please contact your Clinical Program Manager or refer to the HCPF APM website.

New websites for RMHP RAE, PRIME and CHP+ are now available!

Introducing the new RMHP webpages for Medicaid Members that include plan information! Below are the specific page links for the Regional Accountable Entity (RAE), PRIME and Child Health Plus (CHP+). Bookmark for direct access.

- https://www.uhccommunityplan.com/co/medicaid/rmhp-rae
- <u>https://www.uhccommunityplan.com/co/medicaid/rmhp-prime</u>
- <u>https://www.uhccommunityplan.com/co/chp/rmhp-chp</u>









Child Health Plus (CHP+) Primary Care Shared Savings Announcement

RMHP is excited to announce the CHP+ Shared Savings Program. If funds are available, dollars will be passed through to select <u>primary care practices</u> who meet the following criteria:

Measurement Year	Criteria to be Eligible for Shared Savings
1/1/2022-12/31/2022	 Must be RAE Tier 1 or Tier 2 for the measurement period (CY) AND Must have 100 attributed Member Months AND eCQM Performance Must report quarterly eCQMs to RMHP and meet or exceed the eCQM benchmarks per the practice's RAE Tier requirements
1/1/2023-12/31/2023	 Must be RAE Tier 1 or Tier 2 for the measurement period (CY) AND Must have at least 100 attributed Member Months AND Must report quarterly eCQMs to RMHP and all the following eCQMs/NQF measures must be reported: W30a/b: Well Child Checks in the first 15 and 30 months of life WCV: Child and Adolescent Well-Care Visits CMS 117: Childhood Immunization Status CMS 2: Depression Screening and Follow Up

We appreciate your commitment to serving and delivering advanced primary care to your patients. If you have questions, please reach out to your RMHP Clinical Program Manager.

Education & Training

Register today for the 2023 Monthly Webinar!

The RMHP Quality Department hosts monthly webinars for primary care practices and providers. Topics for this monthly informational webinar, *Clinical Quality Improvement Newsroom*, includes value-based contracting updates and discussion, clinical topics, RMHP program updates, & more! Join us monthly on the 4th Thursdays from 12:15-1:00PM. Register <u>here!</u> Questions? Please reach out to Rachael Biller at <u>Rachael.Biller@uhc.com</u>.

RMHP Health Equity Training

RMHP invites you to join us for our Health Equity virtual training on February 10th, 2023. This full-day event will feature Coloradobased and national experts that is free of cost to attendees. This training is designed for clinical and administrative staff working in



primary care, behavioral health, and community organizations. All levels of staff will benefit from the content presented and leave feeling confident in providing equitable care to all patients from the time they check-in for their appointment to the time they leave.

Click <u>here</u> to see the agenda & <u>here</u> to register! See you there!

Take the Patient Experience Self-Paced Course!

Your interactions with your patients play a key role in their experience and overall health. And your guidance helps them navigate the complex world of health care so they can get timely treatment.

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey and Health Outcomes Survey (HOS) help provide feedback on your patients' experience. CAHPS® surveys will be sent to select patients starting in **February 2023** reflecting on their experiences with the health care system in 2022. Using the information from these health care surveys, we can work together to help improve the overall experience for your patients. <u>Click here</u> to take a free self-paced course and access additional resources!







RMHP Coder Biller Networking Group

Do you want to benefit from combined knowledge and experience through support and education? RMHP is providing a virtual space for you to network, learn and share best practices. Meetings are being held quarterly and with monthly newsletter distribution. The next meeting is scheduled for March 21st, 2023 from 12:00-1:00 PM. View the November newsletter <u>here</u> where you will find questions from peers, education and resources on a chosen measure of the month. To register, email <u>Shanteal.Bucholz@uhc.com.</u>

Risk Adjustment and Hierarchical Condition Coding (HCC) Resource For You: Depression

Accurate and complete documentation of chronic condition diagnoses by clinicians is an essential component of the risk adjustment and the hierarchical condition category (HCC) process. Providers are required to document all conditions they evaluated during every face-to-face visit. It is also imperative that the documentation of a disease/condition be as specific as possible. Specificity can make a difference in the patient's treatment plans and reimbursement. Each month, Rocky Mountain Health Plans will provide a list of resources for providers to review at their pace. The goal is to improve education and understanding around risk adjustment, HCC coding and how RMHP can support you.

<u>Major Depressive Disorder</u> (MDD) Diagnosis and Documentation	<u>Major Depressive</u> <u>Disorder (MMD)</u> <u>Documentation Tips</u>	<u>Major Depressive</u> <u>Disorder (MMD)</u> <u>Diagnosis Codes</u>	<u>Major Depressive Disorder</u> (MDD) in Children and Adolescents
This PowerPoint major depressive disorder and related conditions and how to document these conditions. MDD, Depression, Unipolar, Dysthymia	A quick educational reference to assist clinicians in diagnosing and documenting MDD.	This form provides the most common MDD and related codes. MDD, Depression, Unipolar, Dysthymia	This free 40-minute webinar for Providers provides a comprehensive overview of MDD. This webinar is on demand and provides 0.75 CEU credits.
<u>Major Depressive Disorder</u> (MMD) Diagnosis and Documentation	<u>Optum Risk Adjustment</u> <u>Coding Standards</u>	<u>Provider Query Script</u> Depression Screening	<u>Risk Adjustment Presentation</u> <u>Recording</u>

COVID-19 Provider Resources – FREE CMEs available!

<u>OptumHealth Education</u>[™] has resources and training available addressing COVID-19. This includes topics such as Long COVID Syndrome, The Relationship Between Obesity and COVID-19, and the impacts of COVID-19 on behavioral health. Click <u>here</u> to view the COVID-19 on-demand trainings and clinical protocols.

Optum Health Education™

Did you know that OptumHealth Education[™] offers free clinical education and CMEs? There are on-demand courses and live sessions. Create a free account and get started today by clicking <u>here!</u>









Engage on LinkedIn!

Follow Rocky Mountain Health Plans on LinkedIn where we will be sharing clinical resources (coding & webinars), health-focused blog content, emergency department utilization information, open enrollment educational resources, & company updates! Click <u>here</u> or scan the QR code!



At RMHP, we are dedicated to working with you to help our Members receive the best care possible. Thank you for your commitment to providing quality care. We value your partnership, and hope you enjoy this monthly resource!

www.rmhp.org



