# PROVIDER INSIDER plus

United Healthcare | ROCKY MOUNTAIN HEALTH PLANS®

## March 2023

## Rocky Mountain Health Plans Transition Updates

**IMPORTANT NOTICE: Authorization submission process for dates of service on or after April 1, 2023**

Rocky Mountain Health Plans (RMHP), a UnitedHealthcare company, appreciates your patience with the transition of our claims processing systems that began on January 1, 2023. Prior authorization is now required for payment of services delivered on or after April 1, 2023 that require prior authorization.

**What this means for you**

- You must submit all required prior authorizations for RMHP members for dates of service on or after April 1, 2023.
- If you have not submitted a required prior authorization for a service that is scheduled for a date of service on or after April 1, 2023, you must submit an authorization prior to rendering that service.
- Your claim may be denied if there is no required authorization on file.
- To determine if a service requires authorization, reference the Prior Authorization List.

Please review the RMHP Prior Authorization and Notification guide for instructions on how to submit a prior authorization on the UHC Provider Portal.

**Where to Submit a Prior Authorization or Notification**

| | |
|---|---|
| Durable medical equipment and supplies, outpatient services, outpatient services in a facility | • UHC Provider Portal |
| Radiology, cardiology, genetic and molecular testing | • UHC Provider Portal – you will be routed to eviCore Provider Portal |
| Physical health inpatient hospitalization | • Notification is automatically received via real time feed with Quality Health Network (QHN) and Contexture<br>• If you are not connected with QHN or Contexture call Provider Services (*See below Provider Services phone numbers*) |
| Physical health/medical non-participating providers | • Fax: 800-262-2567 or 970-255-5681 |
| Specialty pharmacy transactions | • Fax: 833-787-9448 or 970-248-5036 |
| Behavioral health services (participating and non-participating providers) | • Email: rmhpbhvm@uhc.com<br>• Fax: 800-262-2567 or 970-257-3986 |

**We are here to help**

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

**UnitedHealthcare Individual and Family Plans**
888-478-4760

**UnitedHealthcare D-SNP**
800-701-9054

**UnitedHealthcare Community Health Plans**
(CHP+)
877-668-5947

**UnitedHealthcare Community Health Plans**
(Medicaid PRIME/RAE)
877-421-6204

**UnitedHealthcare Medicare Advantage**
877-842-3210

If you continue to have issues and need assistance, please send an email to: RMHPPreAuthSupport@uhc.com

**Read all communications you receive from UHC and RMHP.** Read the most recent Frequently Asked Questions (FAQ). This FAQ will be updated regularly. Please bookmark and check this link often for new and updated information throughout the transition.

## Did You Know? DEA-X Waiver Dropped

The US Drug Enforcement Administration (DEA) no longer requires a provider to have an DEA-X waiver to provide buprenorphine products for opioid use disorder (OUD). Per the Substance Abuse and Mental Health Services Administration (SAMHSA), "Section 1262 of the Consolidated Appropriations Act, 2023 (also known as Omnibus bill), removes the federal requirement for practitioners to submit a Notice of Intent (have a waiver) to prescribe medications, like buprenorphine, for the treatment of opioid use disorder (OUD). With this provision, and effective immediately, SAMHSA will no longer be accepting NOIs (waiver applications). All practitioners who have a current DEA registration that includes Schedule III authority, may now prescribe buprenorphine for Opioid Use Disorder in their practice if permitted by applicable state law and SAMHSA encourages them to do so."

Read more here:
- American Society of Health-System Pharmacists – DEA and SAMHSA Eliminate X-Waiver Requirements-ASHP
- DEA Applauds the Repeal of the X-Waiver

## Care Angel Launching April 1st!

RMHP is excited to announce the launch of Care Angel on April 1, 2023. Care Angel is a diabetes program that uses an artificial intelligence (AI) and voice-enabled virtual nurse assistant to engage Members with diabetes. The program is designed to proactively provide education, offer resources, enhance engagement, and drive improvements in clinical quality metrics. Care Angel interacts with Members via phone and SMS messaging. The program can connect Members with a live nurse or RMHP care coordinator if needs are identified. Care Angel can also connect Members with their provider's office phone if they need to make an appointment. Providers will receive clinical alerts via Fax if needs or gaps are identified through the program.

Care Angel is launching for RMHP Members who have Type 1 or Type 2 Diabetes, excluding Members who are pregnant. This program is offered to Members with RMHP Medicaid (PRIME, RAE, CHP+), Individual and Family Plans, and DSNP.

For more information, please contact Doug Bolton at douglas.bolton@uhc.com

# Colorado Department of Healthcare Policy & Financing (HCPF) Corner

COLORADO
Department of Health Care
Policy & Financing

Please refer to the Colorado Department of [Health Care Policy & Financing Provider News & Resources](#) newsletter for any additional information.

## Public Health Emergency (PHE) Ending May 11, 2023

Health and Human Services Secretary Xavier Becerra has [formally ended the Public Health Emergency (PHE)](#). The end date is May 11, 2023. Visit the [Public Health Emergency Planning web page](#) for more information.

## Planning for the end of the COVID-19 Continuous Coverage Requirement
**Health First Colorado and CHP+ will return to normal renewal processes.**

- The Department of Health Care Policy & Financing (HCPF) will take **12 months** (14 months including noticing) to complete renewals for each of the approximately **1.7 million** people currently enrolled.
- It's essential that members update their contact information so we can reach them and respond to renewal packets to make sure they keep their Health First Colorado and CHP+ coverage if they are still eligible.
- Members can find out their renewal dates and access more information at hfcgo.com/renewals

**How You Can Help**

HCPF needs your partnership to ensure eligible members can keep their health coverage and those who no longer qualify know where they can go for affordable coverage resources.

Use and share the materials in the toolkits to:
1. Ask members to [update their contact information](#) so we can reach them.
2. [Educate yourselves](#) on the renewal process so you can effectively help members.
3. Inform members when they need to take action to keep coverage.

**Revalidation Reminder**
Providers are reminded of the requirement to submit revalidation applications according to their scheduled due date. Claims may be denied or suspended if revalidation has not been completed.

Visit the [revalidation web page](#) and refer to the Provider Revalidation Dates Spreadsheet to find your revalidation date.

## Enrollments Requiring Affiliated Practitioners
Billing provider enrollments that require an affiliated practitioner must submit a current copy of the practitioner's license with the group's revalidation application. Applications without the practitioner's license will be returned for corrections.

## New Provider Web Portal URL
**HCPF Claims Processing and Provider Services Call Center - Unavailable Friday, March 24, 2023**
The [Provider Web Portal](#) will be unavailable and the [Provider Services Call Center](#) will be closed due to infrastructure changes beginning Friday, March 24, 2023, and will resume on Monday, March 27, 2023. Note: Providers are reminded that eligibility will still be available on Friday, March 24, 2023. Providers who utilize the Provider Web Portal may submit claims before 5:00 p.m. MT on Thursday, March 23, 2023. Claims submitted after this time will be on the following week's remittance cycle.

Providers who utilize a billing agent or a clearinghouse may submit claims for the week one day early. Batch claims that are not processed before 5:00 p.m. MT on Thursday, March 23, 2023, will be on the following week's remittance cycle.

**How to Prepare**
- Submit any claims before 5:00 p.m. MT on Thursday, March 23, 2023.
- Complete any eligibility verifications before 5:00 p.m. MT on Friday, March 24, 2023.
- Bookmark the New Provider Web Portal URL now for use beginning Monday, March 27, 2023.

Contact the Provider Services Call Center with questions.

## New Opportunity to Enhance Behavioral Health Integration
**Healthcare Practice Transformation (HB 22-1302) legislation to enhance Behavioral Health Integration**
The Integrated Care Grant Program's Request for Applications (RFA) will open on March 22, 2023. House Bill (HB) 22-1302 was passed in May 2022 with the goal of supporting, improving and expanding integrated behavioral health services in Colorado. The legislation appropriated $31 million toward this task with a majority of these funds going directly to providers to expand access to integrated behavioral health services.

Funding for physical and behavioral health care providers is being offered through this grant program. These providers will expand access to care and treatment for mental health and substance use disorders using an evidence-based integrated care model. Visit the Integrated Care Grant web page for more information. The application will be live on the ARPA Grants Opportunity web page.

Contact hcpf_integratedcare@state.co.us with any questions.

**From the HCPF March 2023 Provider Bulletin (B2300491):**

## Therapy Providers
Electronic Visit Verification (EVV) Implementation for Outpatient Speech Therapy, Physical Therapy and Occupational Therapy Provided via Telehealth

Refer to the December 2022 Provider Bulletin (B2200487) located on the  bulletins web page,  where the Department stated that EVV would be required for outpatient therapies provided via telehealth beginning April 1, 2023. This change in policy will not occur. The policy will continue with the current exemption for EVV.

Contact hcpf_evv@state.co.us with any EVV questions.

## New Tool Assists Blind and Low-Vision Coloradans in Navigating State Locations & Online Services

Every Coloradan deserves equal access to essential state services. Which is why the State of Colorado is thrilled to offer a new service for blind and low-vision Coloradans called Aira. Lt. Governor Diane Primavera announced the launch of Aira last week and shared details about the technology and its benefits via this video

Through OIT's partnership with Aira, an app that provides live, on-demand visual interpreting through human-to-human assistance, Coloradans will get free access for up to 30 minutes per session while navigating state locations, websites and applications.

Please share this far and wide as we work to reduce barriers to services and create a more equitable Colorado!

## Colorado Broadband Mapping Hub is Here!

The Colorado Broadband Office (CBO) has launched a new Broadband Mapping Hub that is an easy-to-use, complete resource for providers, cities, schools and communities to assist in broadband planning, finding partnerships and applying for broadband funding. The Hub is also the place where Coloradans can access a wealth of broadband-related resources. Here are just a few of things you can find:

- A new broadband coverage map. Now with more information, like households served or internet speeds, the new map is searchable by your area of interest (county, municipality, school district, legislative district or region). Residents can enter their address to find available broadband service, information about grants in the area and typical speeds from nearby speed tests.
- A high-level look at broadband in Colorado. View the Hub dashboard for a quick look at the state's internet speeds, households served, grant awards and proposed broadband projects.
- Broadband projects funded by the state. The Grant Awards Dashboard provides an overview of CBO grants, awards and the progress made in awarded projects. It allows users to filter by funding program, project status and area of interest.
- Everything needed to apply for funding. Applicants can view program eligibility guidelines and find resources to prepare applications through the Grant Discovery Portal. It includes state and federal broadband grant layers, broadband coverage data and demographic data.
- Downloadable data sources. The Hub includes links to authoritative data sources used in Colorado's maps, including CBO data, FCC data, U.S. Census and demography data, and other mapping resources. A survey to share your internet experience. The CBO Broadband Survey & Speed Test allows Coloradans to test their home or business internet speed and share valuable information directly with the CBO. Share this resource with your friends and neighbors to help create better awareness as the state works to bring broadband to more than 99% of Coloradans by 2027.

# Primary Care RMHP Value Based Contracts: 2023 Updates

## PRIME Year 9 (CY2023) Shared Savings Eligibility – All Elements Below are Required

- CMS 137 Initiation and Engagement of Substance Use Disorder Treatment:
  - Quarterly reporting of CMS137a **and** CMS137b to RMHP
  - Achieving a suggested performance target of 30.50% for CMS137a in Q4 2023
  - Submission of clinical/data workflows (ie. policies, procedures, process maps, etc.) to demonstrate CMS137 process implementation
- CMS 122 Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)
  - Quarterly reporting of CMS122 to RMHP
  - Achieving a suggested performance target of 19.5% in Q4 CY2023
  - Submission of clinical/data workflows (ie. policies, procedures, process maps, etc.) to demonstrate CMS122 process implementation

Other pertinent information:
- PRIME shared savings dollars are only available when the practice and the PRIME region achieve performance targets. If the PRIME region does not meet the performance targets, no dollars are available.
- Google Form submission directly to HCPF is no longer required. PRIME practices will only report to RMHP via the RMHP eCQM reporting tool.
- Pediatric practices are excluded from the CMS122 measure.

## 2023 RMHP eCQM suite

The RMHP eCQM suite was finalized for 2023 and includes the following updates. Please reach out to your RMHP Clinical Program Manager for a copy of the suite.

- Measure specifications and targets have been updated for 2023
- CMS 117 Childhood Immunization Status has been added and is worth 6 points for the RAE and RMHP Advanced APM Annual Attestation
- WCV Child and Adolescent Well-Care Visits is worth 12 points for the RAE and RMHP Advanced APM Annual Attestation
- CMS 002 Preventive Care and Screening: Screening for Depression and Follow-Up Plan is worth 6 points for the RAE and RMHP Advanced APM Annual Attestation
- CMS 122 Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%) is a PRIME Year 9 requirement for Shared Savings eligibility and is worth 12 points for the RAE and RMHP Advanced APM Annual Attestation
- There is a tab in the suite that indicates how multi-part measures are calculated

## Quarter 1 2023 eCQM Reporting:
- Quarter 1 eCQMs are due **Friday, April 21, 2023** for PRIME, RAE, and RMHP Advanced APM Programs
- RMHP Clinical Program Managers will begin sending out reporting email instructions with the eCQM reporting tool the first week of April. If your practice is experiencing EMR barriers or reporting challenges, please respond back with your barriers and concerns ASAP.
- All PRIME practices must report on CMS 137 and CMS 122 (pediatric practice exclusion) every quarter to be eligible for PRIME shared savings.

# Clinical Update: Colorectal Cancer Screening

CMS has recently updated the clinical quality measure specifications for Colorectal Cancer Screening. Updates including lowering the minimum age from 50 to 45 years, expanding the definition of screening tests and updating billing instructions for colonoscopies. Additionally, this change will provide more opportunities to engage your patients in the discussion and screening of colorectal cancer.

Click here to read the full update: [MM13017 - Removal of a National Coverage Determination & Expansion of Coverage of Colorectal Cancer Screening (cms.gov)](cms.gov)

Colorectal cancer is the second leading cause of cancer deaths in the United States among cancers that affect both men and women. Regular colorectal cancer screening beginning at age 45 can reduce colorectal cancer mortality through the detection and treatment of early-stage cancer and the identification and removal of adenomatous polyps.

CMS provided further clarification on the types of appropriate screenings within the eCQM specifications for CMS130v10 which include:

- Fecal occult blood test (FOBT) during the measurement period
- FIT-DNA during the measurement period or two years prior to the measurement period
- Flexible sigmoidoscopy during the measurement period or the four years prior to the measurement period
- CT Colonography during the measurement period or the four years prior to the measurement period
- Colonoscopy during the measurement period or the nine years prior to the measurement period

 Please refer to the following Colorectal Cancer Screening measure specifications for more information: [Colorectal Cancer Screening | eCQI Resource Center (healthit.gov)](healthit.gov)

Check out these resources to improve colorectal cancer screening rates in your practice:
- [Colorectal Cancer Screening Toolkit](#)
- [Responses to Colorectal Cancer Screening Barriers](#)
- [You, Colorectal Cancer, and Screenings](#)

## RMHP Language Line Services Available

Annually, RMHP assesses the languages spoken by Members to meet the needs of people and communities who speak languages other than English. In 2022, RMHP identified Members who spoke: Albanian (Tosk), American Sign Language, Arabic, Armenian, Burmese, Chinese, Danish, Italian, Japanese, Korean, Persian, Polish, Portuguese, Romanian, French, German, Greek, Hebrew, Hindi, Hungarian, Indonesian, Russian, Samoan, Spanish, Tagalong, Thai, Turkish and Vietnamese. Of these languages, Spanish and Chinese were the most prevalent with an estimated 20,000 Members speaking Spanish and over 100 Members speaking Chinese in 2022 and similar estimates in 2021. These are estimates, and RMHP believes language may be under reported.

In an effort to ensure Members can communicate with their care teams and understand vital healthcare information, RHMP provides access to Language Line for providers caring for RMHP Members. If your office is unable to accommodate translation requests RMHP Language Line is available via translation services. To access this service, call Member Services at:

- Individual & Family Plans (Marketplace): 888-809-6539
- PRIME, RAE, CHP+: 800-426-6204
- Medicare Advantage: 800-980-5195
- Dual Special Needs Plan (DSNP): 855-495-3727

## Medicaid Dental Visit Coverage Reminder

To keep children's teeth healthy, the Medicaid program allows for certain preventive dental visits and treatments every year. These visits can be for checkups to keep a child's teeth and gums healthy or for treatment.

Health First Colorado Members have a dental benefit. Dental Services through DentaQuest include: Services include cleanings, fillings, root canals, crowns, and partial dentures. There are no co-pays applicable. There is no limit for children's services (21 years old and under). There are no exclusions. Sometimes a prior authorization is needed, check What is a Prior Authorization Request and why do I need one? - Health First Colorado to determine if a prior authorization is needed.

**Resources**
- Early and Periodic Screening, Diagnostic and Treatment (EPSDT) | Colorado Department of Health Care Policy & Financing
- Early Periodic Screening, Diagnostic, and Treatment (EPSDT) Guidebook
- Colorado State Dental Plans | Medicare, Medicaid, CHIP Dental Insurance - DentaQuest
- Colorado Health Plans | UnitedHealthcare Community Plan: Medicare & Medicaid Health Plans (uhccommunityplan.com)

## 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 here! Questions? Please reach out to Rachael Biller at Rachael.Biller@uhc.com.

## Gender Diverse Compassionate Cultural Awareness Training Series: Tentative 2023 Course Schedule

Due to the urgency of and need for safe, affirming care and access for LGBTQ+ people, these courses are available free of charge through the generous support of Rocky Mountain Health Plans & United Healthcare.

You must RSVP for the course. Classes are limited to 15 participants. If you have questions about which group/class you should register for, please reach out to Andi Tilmann or Dr. Jessie Smith directly (contact information below).

Tentative Class Offerings:

| Date | Location | Time | Class Name | Audience |
|------|----------|------|------------|----------|
| 3/31/2023 | Grand Junction | 8:30am-3:00pm | 101/201 Combined: Foundations of Relating: A Compassionate Exploration of Gender, Orientation, Intersectionality, and Self (5 CEUs) | General foundational awareness of gender, orientation & cultural socialization, specific for case-workers, mental health clinicians, social workers, and medical health professionals |
| 4/1/2023 | Grand Junction | 8:30am-3:00pm | 101/201 Combined: Foundations of Relating: A Compassionate Exploration of Gender, Orientation, Intersectionality, and Self (5 CEUs) | General foundational awareness of gender, orientation & cultural socialization, excellent for all audiences, parents, and community members |
| 4/29/2023 | Grand Junction | 8:30am-3:00pm | 301: We Don't Know What We Don't Know: Developing Cultural Awareness for More LGBTQ+ Affirmative Environments (5 CEUs) | Specific context for Medical & Mental Health Providers; Parents & Foster Parents relating with Gender-diverse people |
| 5/19/2023 | Grand Junction | 8:30am-3:00pm | 301: We Don't Know What We Don't Know: Developing Cultural Awareness for More LGBTQ+ Affirmative Environments (5 CEUs) | Specific context for Medical & Mental Health Providers; Parents & Foster Parents relating with Gender-diverse people |
| 5/20/2023 | Grand Junction | 8:30am-3:00pm | 101/201 Combined: Foundations of Relating: A Compassionate Exploration of Gender, Orientation, Intersectionality, and Self (5 CEUs) | General foundational awareness of gender, orientation & cultural socialization, specific for case-workers, mental health clinicians, social workers, and medical health professionals |
| 6/16/2023 | Rifle | TBD | TBD | TBD |
| 6/17/2023 | Paonia | TBD | TBD | TBD |
| 7/28/2023 | Grand Junction | 8:30am-3:00pm | 401: Models of LGBTQ+ Clinical Care: Deepening Competence in Practice (5 CEUs) | For Medical & Mental Health Providers treating gender-diverse people |
| 7/29/2023 | Rifle | 8:30am-3:00pm | 301: We Don't Know What We Don't Know: Developing Cultural Awareness for More LGBTQ+ Affirmative Environments (5 CEUs) | Specific context for Medical & Mental Health Providers; Parents & Foster Parents relating with Gender-diverse people |

NOTE: Stand-alone modules, Reducing Barriers: Clinical Letter Writing for Gender Affirming Access, Care, and Surgeries (4 hrs online, 4 CEUs) and "The Talk" That Never Happened: LGBTQ+ Sexual Health & Comprehensive Sex Education (4 hrs online, 4 CEUs) can be scheduled at any time, independent of the 101-301 series, depending upon need and demand.

Additional courses may be scheduled in other Colorado locations, or for specific agencies, upon request. For more information or to enroll contact:

- Andi Tilmann, MA (andi.triunity@gmail.com or LovingBeyondUnderstanding@gmail.com)
- Dr. Jessie Smith (Drjessiensmith@gmail.com)

## Chronic Kidney Disease ECHO® Series

Join a free webinar series to learn more about chronic kidney disease. Participants can earn 1.0 CME/CEUs per session.

Curriculum topics will include:



- Screening and diagnosis of chronic kidney disease (CKD), overview of diagnosis, disparities at local level
- SGLT2 inhibitors and GLP-1 agonists in CKD and diabetes
- Hypertension screening and management and its relationship to CKD
- Diabetes management: education and support
- When and how: referral to nephrology and how to co-manage patients
- Insulin management in patients with CKD and diabetes
- Management of CKD complications and dialysis patients
- Lifestyle management in chronic disease
- Patient activation and health literacy

Kicks off Tuesday, April 25, 2023 at 12-1 p.m. CST. Sessions will take place every other Tuesday at 12-1 p.m. CST or Thursday at 1-2 p.m. CST. Register here.

## Text Tips!

Optum has a new program that allows you to receive text tips related to coding, quality, and documentation on your mobile device. You will receive 2-3 texts per week on Tuesday-Thursday. Standard text messaging rates apply based on your mobile plan. You may choose to opt out of the program at any time by texting back the word Stop. If you need assistance, please email Risk.Education@optum.com   For questions and/or assistance on the program please contact CDQ.Tips@optum.com. Click here to register.

## Provider Role in Consumer Assessment of Healthcare Providers and Systems (CAHPS®) and Health Outcome Survey (HOS) Results

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.

This checklist contains suggestions on discussing key topics with patients. Implement today to help improve patient experience! **As a reminder, if you are a primary care practice with a RMHP RAE or RMHP Advanced Payment Model (APM) value-based contract, CAHPS scores impact your payment tier. Connect with your RMHP Clinical Program Manager for more tips on improving patient experience.**

## COVID-19 Provider Resources

- Check out this quick tips on long COVID. This resource provides a list of COVID-19 associated ICD-10-CM codes and best practices for documentation and coding.
- Paxlovid Information



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 here!

## 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 21, 2023 from 12:00-1:00 PM. View the January newsletter here where you will find questions from peers, education and resources on a chosen measure of the month. To register, email Shanteal.Bucholz@uhc.com.

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

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.

Documenting cancer can often cause frustration for clinicians. Understanding the difference between when a cancer should be documented as "active" vs. "history of" is critical. Making cancer documentation as specific and accurate as possible can help clinicians avoid pitfalls, decrease frustration and minimize insufficiencies.

| Heart failure documentation: <br> • Cancer Documentation <br> • Cancer Metastatic Documentation <br> • Blood Cancer Documentation | Cancer Codes | Cancer Podcast | Presentation Slide Deck: <br><br> Cancer Diagnosis and Documentation |
|---|---|---|---|
| A quick educational reference to assist clinicians in documenting cancer. | Handout with common ICD-10-CM codes related to cancer. | A podcast covering common questions related to cancer documentation. | Slide deck reviews diagnosis and documentation of cancer for clinicians |

| Cancer Diagnosis and Documentation Webinar | Optum Risk Adjustment Coding Standards | Risk Adjustment Presentation Recording | |
|---|---|---|---|
| Earn 1 FREE CEU credit by attending this webinar. Documenting cancer can often cause frustration for health care professionals (HCPs). Understanding the difference between when a cancer should be documented as "active" vs. "history of" is critical. Making cancer documentation as specific and accurate as possible can help HCPs avoid pitfalls, decrease frustration and minimize insufficiencies. | This extensive resource provides a summary of coding standards for the Medicare Advantage population. | This 14-minute video reviews risk adjustment, HCC and the importance of accurate documentation. | |

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