

At Rocky Mountain Health Plans (RMHP), we are dedicated to working with you to help your patients and our Members receive the best care possible. Thank you for your commitment to providing quality care. We value your partnership and hope you find this monthly resource valuable

THIS MONTH'S CONTENT

1. Provider Perspective – Healthcare Burnout By Korrey Klein, MD, President/CEO Family Health West
2. Vaccine Counseling is Covered
3. Is Your Blood Pressure in Control?
4. Prescriber Tool Project (E-Prescriber Tool)
5. Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Benefits
6. Provider Credentialing



Provider Perspective by
Dr. Korrey Klein, MD, President/
CEO, Family Health West

Healthcare Burnout

Several recent surveys have noted that job satisfaction in healthcare is at an all-time low. One would think that the spread of an infectious disease worldwide would not only bring more health workers into the fold, but the support for nurses, aides, and doctors would be at historic highs. Instead, after the mask-sewing parties ended, the COVID-19 pandemic has fractured healthcare workers, turned medicine into a political football, and burned out even the most devoted employees.

Should we blame healthcare workers? Seasoned employees retired, reasonably assessing that the risks of going to work were truly not worth it, especially if at higher risk for injury or death from an infection. Nervous or part-time workers left in droves, forced away by child-care decisions, closed schools, jobs deemed “lower risk,” better pay, and less strenuous hours. The spiral of vacancies led to lucrative locum jobs, worsening the crisis as new graduates and even veteran employees began traveling for skyrocketing financial gain. Those that stayed were left to work longer hours, more shifts, and forced overtime, while somehow managing even sicker patients with increased lengths of stay and even greater suffering.

Trusted medical professionals are disbelieved and protested. The nuance and complexity of human life has been thrown out. In its place are self-propagating, simple-sounding memes used by conspiracy theorists, politicians, and social media lovers of all types to sell themselves and their cure-alls, denigrate caregivers, attack businesses, and mock the vulnerable, elderly, and infirm. Nurses that used to get gratification from a discharging, thankful patient are now relentlessly beaten down at work by the sufferings of the dying while being told on their social media that the whole thing is one gigantic hoax. Is it any wonder we have a burnout problem in healthcare?

SUBSCRIBE



Sign up for the digital
newsletter at
news.rmhp.org

How do we solve this burnout problem?

The temptation is to look inward. Self-preservation. When the world seems against you, tune it out, or commiserate in its negativity. The problem is that when a person burns out, they already have nothing left to give, not even to themselves. Looking inward at an empty storehouse does not refill it. I claim no expertise on employee burnout. Each day that I come to work, I feel the stress in myself, and I see it on the faces of our healthcare team.

But somehow, we have to solve burnout by continuing to do what brought us to healthcare in the first place – to serve others. Instead of wallowing in our own self-pity, we must serve our community.

My challenge is this: when you are feeling burned out and don't feel like you have anything left, consider the opposite of isolation, inwardness, and negativity. Refill your tank externally. Find something or someone positive. Find a friend that revives your energy, not drains it. Seek nature – with another who also loves nature. Enjoy some time and warmth from a supportive friend, partner, or spouse. Give back to your church, a nonprofit, or your favorite charity. Not just financially, but with your time.

I know it sounds counterintuitive to give after you feel that you have given so much and have nothing left. However, I suspect that in giving in a positive way to something rewarding, you may find that your own storehouses have been filled far faster, and deeper, than you ever expected.



Dr. Korrey Klein, MD
President/CEO
Family Health West

Before joining Family Health West in 2016, Dr. Klein practiced family medicine in Rifle and Grand Junction, Colorado. Today he serves as the President and CEO of Family Health West and Colorado Canyons Hospital & Medical Center based in Fruita, CO. He can be reached at kklein@fhw.org.

Vaccine Counseling is Covered

Rocky Mountain Health Plans (RMHP) encourages healthcare providers to talk to families about the importance of vaccinating children for the wellbeing of our Members and their families, including COVID-19 and routine vaccines. Centers for Medicare & Medicaid Services (CMS) requires coverage of COVID-19 vaccine counseling visits. RMHP will cover vaccine counseling for both COVID-19 vaccine visits and routine, pediatric vaccine visits for all Members.

If the provider provides counseling during a vaccination administration visit, they should bill Current Procedural Terminology (CPT) 90461.

Providers may bill CPT 99401 for counseling at a NON-vaccine visit. CPT 99401 may only be billed for one visit per Member per day, but there are no quantity limits for the number of times this education is provided to an individual Member.

Providers are encouraged to check the CMS website for National Correct Coding Initiative (NCCI) rules and guidelines. Please call your provider relations representative with questions.

Is Your Blood Pressure in Control?

Did you know that many people with uncontrolled high blood pressure are not aware that they have it? By implementing workflows to improve the capture of [accurate blood pressure readings](#) regularly, providing patient [self-management support](#), and creating a [medication management plan](#), practices can work to reduce the number of patients with uncontrolled high blood pressure. RMHP Clinical Quality Improvement team has seen significant improvement in [CMS 165 Controlling High Blood Pressure](#) eQPM performance when utilizing these strategies and can provide resources to help. Reach out to your Clinical Program Manager if you'd like more information.

Additional Resources:

[Team-Based Care to Improve Blood Pressure Control](#)

Prescriber Tool Project (E-Prescriber Tool)

In June 2021, EMR's should have been updated on the backend with The Department of Healthcare Policy and Financing's (HCPF) E-Prescriber Tool which is a real-time prescription benefit check tool for prescribers to utilize with their Medicaid patients. The goal of this tool is to decrease the administrative burden on prescribers while ensuring that Medicaid Members receive the covered medications they need to stay healthy in a timely manner. In the coming weeks, you may be contacted by Barb Bishop, Clinical Program Manager at Rocky Mountain Health Plans on the Clinical Quality Improvement Team, in regard to your access and the operability of HCPF's E-Prescriber Tool. In the meantime, if you have questions regarding the tool, please feel free to reach out to Barb Bishop at Barbara.bishop@rmhp.org.

For more information, please visit the HCPF Prescriber Tool Project website: [Prescriber Tool Project | Colorado Department of Health Care Policy & Financing](#)

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Benefits

At RMHP, we are dedicated to working with you to help our Members receive the best care possible. We are responsible for the education and outreach to Health First Colorado (Colorado's Medicaid Program) and PRIME members and providers regarding Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefits.

EPSDT is an important benefit for Health First Colorado Members. Those eligible for this benefit include: Health First Colorado children from birth through age 20 and adults who are pregnant, including RMHP Prime Members. This comprehensive benefit is designed to support early identification and treatment of developmental delays with the goal of improving long-term outcomes.

EPSDT provides for comprehensive well-child exams, which include:

- Health and developmental history;
- Immunizations;
- Vision and hearing screenings;
- Oral health assessment;
- Developmental and behavioral screenings;
- Anticipatory guidance;
- Lab tests (including elevated blood lead level).

Health First Colorado has adopted the [Bright Futures Periodicity Schedule](#), endorsed by the American Academy of Pediatrics (AAP).

A critical component of the EPSDT benefit is Diagnosis and Treatment. There is no lifetime limit in cost of care or number of units (such as the number of physical therapy visits). All treatment deemed medically necessary can be provided under EPSDT, even if the services are not specifically defined as a covered Health First Colorado benefit. Prior authorization is required for any services beyond those specifically defined as covered by Health First Colorado. With the EPSDT benefit, children can receive therapies and other care that meets the medically necessary criteria. Services do not have to be curative or restorative if they provide therapeutic value.

The responsibility of this work is great and the benefits to our Members advocating for vital screenings and assessments is an important component of community health.

For more information on the EPSDT benefit and other resources, please contact RMHP. The RMHP Provider EPSDT Guidebook is also available here <https://www.rmhp.org/i-am-a-provider/questions-faqs/hfc-overview>.

Call RMHP Customer Service at 888.282.8801

- Email RAESupport@rmhp.org
- Visit [Learn About our Benefits](#) to learn more about EPSDT.



PROVIDER CREDENTIALING

Colorado Revised Statutes has passed new standards for Provider Credentialing timelines and processes. Due to these revisions and to fully comply with the revised standards, Rocky Mountain Health Plans will no longer accept faxed or mailed applications for Credentialing.

Credentialing applications are available at <https://www.rmhp.org> or by calling or emailing your provider relations representatives. Beginning January 24, 2022, Credentialing forms will only be accepted and processed when the provider submits the form to our credentialing email address:

credentialing.applications@rmhp.org

Please use this email address for all future credentialing applications. Do not fax, mail, or email applications to any other address.

If you have any questions, please call, or contact your provider relations representative.