## Molina Healthcare of South Carolina

Important Information. Please Read.

## **HEDIS Medical Record Review Final Reminder**

April 2021

## Medical Record Deadlines: Risk Adjustment (RAD) (4/16), HEDIS (4/23)

We value our relationship with you, and appreciate the quality care you provide our Molina members. Molina is contractually required to collect and provide medical record documentation from our providers to fulfill SCDHHS, federal regulatory and accreditation regarding annual HEDIS (Healthcare Effectiveness Data and Information Set) and Risk Adjustment (RAD) quality reporting. The return of your medical records are vital to a successful review, and we are quickly approaching the medical record deadline. The return of your medical records are vital to a successful review.

## **Record Return Methods**

- Fax: (844) 305-0325
- Secure Email: RegionDHEDIS@MolinaHealthcare.Com
- Mail: Attention: Quality Improvement, 8300 NW 33rd St. Ste.100, Miami FL 33122
- We can provide Federal Express labels at no charge. Please email us at SCProvider.Services@MolinaHealthcare.com
  to see if a label is needed.

Let us do the heavy lifting. Contact us at SCProvider.Services@MolinaHealthcare.com for one of the options below

**EMR Remote Access:** Does your office use an EMR system? If yes, please contact us to arrange secure remote file access sharing access and Molina staff can download the records without inconveniencing your staff. If you use Eclinical works (ECW), we have a partnership with Healow Insights for a seamless data exchange. Only a Healow consent form is needed.

<u>On-Site Request</u>: We may be able to come on-site and pull medical records. On-site requests are handled on a case by case scenario depending upon COVID risk level. Please check <a href="https://covidactnow.org/">https://covidactnow.org/</a>.

The Health Insurance Portability and Accountability (HIPPA) regulation CFR 164.506 (c) (4) permits a covered entity, such as a physical practice, to disclose protected health information (PHI) to another covered entity, such as health plan, without obtaining authorization or consent for the purpose of facilitating health care operations.

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