

Well Visits

For all providers in our network.

Start the new year off right by improving well visits:

- Make every office visit count.
- Avoid missed opportunities. Take advantage of every office visit (including sick visits) to provide a well visit, immunizations, lead testing and BMI calculations.
- Make sports physicals and daycare physicals into well-care visits by performing the required services and submitting the appropriate codes.
- Use standardized templates in charts and in EMR that allow checkboxes for standard counseling activities.

All well-child visits must include: A health history, physical developmental history, mental developmental history, physical exam, health education and anticipatory guidance.

CPTII Codes for HbA1c Results

By submitting HbA1c results in the form of CPTII codes on claims, Molina can identify providers with a high volume of poorly controlled diabetic members. With that information, Molina can support providers in helping Molina patients control their diabetes.

By submitting CPTII codes, providers also benefit from fewer medical record requests during HEDIS season, and may receive a higher risk-adjusted payment for their patients.

Submitting CPTII codes allows Molina to identify members who have poorly controlled diabetes. Once a member is identified, Molina can put the appropriate interventions in place to help members control their diabetes and overall health.

Medication Reconciliation

Getting patients to take medications as prescribed (including the correct medication, dose and frequency) can be an ongoing challenge to assure quality of care and patient safety. When a patient has recently been discharged from inpatient care, the challenge can be even more complicated.

Medication reconciliation within 30 days of an inpatient discharge can ensure medications started during an inpatient admission, and home medications continued or temporarily stopped during an admission, are continued as indicated after a patient is discharged. Medication reconciliation also prevents duplicate medication orders.

Documentation in the outpatient medical record should include evidence of medication reconciliation and the date it was performed.

Any of the following would meet HEDIS®* criteria to help track and document the most current medications after an inpatient discharge:

- Current medications with a notation that they were reconciled with the current and discharge medications
- Current medications with a notation that references the discharge medications (e.g., no changes in medications since discharge, same medications at discharge, discontinue all discharge medications)
- Current medications with a notation that the discharge medications were reviewed
- Current medication list, a discharge medication list, and notation that both lists were reviewed on the same date
- Current medications with notation that the member was seen for post-discharge hospital follow-up and that medication reconciliation/review was completed
- Document in the discharge summary that the discharge medications were reconciled with the most recent medication list in the outpatient medical record. File the discharge summary in the outpatient chart within 30 days after discharge.
- Document that no medications were prescribed or ordered upon discharge

Molina Healthcare of Ohio's Quality Improvement Department strives to ensure that members have access to quality care that is aligned with nationally recognized practice and treatment standards. If you have any questions, please contact JoAnne.Camiola@MolinaHealthcare.com.

**HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA)*

Quality Behavioral Health: ECHO Project

Introducing the ECHO Project.

What is the ECHO Project? It is a learning collaborative developed by National Children's Hospital and PFK to address the shortage of behavioral health specialists and to address the use of primary care providers for behavioral health management. ECHO can help providers acquire the skills to manage kids with behavioral health conditions presenting in primary care.

The ECHO Project is interactive case-based learning conducted during lunch. The provider can earn CME credits. There is an overview session and advanced cohorts will be held throughout the year. Even though we are past the starting date, there may be a few spots open for the next session. For more information, see below:

To register, please email ProjectECHO@Nationwidechildrens.org or use the online registration link: https://is.qd/NCH_ECHO.

For more information, visit <https://www.nationwidechildrens.org/for-medical-professionals/education-and-training/echo>.

Mammogram Screenings

Need a little extra support encouraging Molina members ages 50-74 to get their breast cancer screenings (mammograms)?

Eligible Molina members who complete their needed breast cancer screening before **June 30, 2020** will receive a \$25 gift card by mail after the screening is confirmed.

Molina can provide your office with a list of eligible members in need of a breast cancer screening. Calling your patients and proactively scheduling visits has proven to help them get needed health services. If you would like a list of eligible Molina members who are missing a breast cancer screening, email GretchenConturo@MolinaHealthcare.com.

Members can schedule no-cost transportation to their screening by calling (866) 642-9279. They must call at least two business days before their appointment. Transportation can be scheduled up to 30 days prior to the appointment.

Regular mammograms are the best prevention in early detection of breast cancer.

Did you know?

- 1 in 8 women will develop invasive breast cancer in her lifetime.
- 87% of women diagnosed with breast cancer have no family history.
- 99% of women who receive treatment of early stage breast cancer have a 5-year survival rate. Early detection saves lives!

Questions? Call our Women's Health Appointment Education Line at (866) 692-1325 or TTY/Ohio Relay (800) 750-0750 or 711 from 7 a.m. to 7 p.m., Monday through Friday.

Questions?

Provider Services – (855) 322-4079
8 a.m. to 5 p.m., Monday to Friday
(MyCare Ohio available until 6 p.m.)

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