

## 1<sup>st</sup> Quarter Provider Forum

March 18, 2021

# Agenda



#### Operation Updates – Adrienne Bennett, Sr. Director, Provider Management Lashobie Avery, Provider Relations Manager

- What new on the Web Portal?
- Authorization Code Checker
- Appeal Request Form
- Physical Therapy
- Provider Data Integrity
- E-Prep

#### **Quality Improvement /HEDIS Outreach – Sammi Turner, Quality Improvement Manager**

- MPC Member communication strategy
- MPC interventions
- Outreach events and campaigns

Pharmacy Updates – Dr. Jonathan Keyser, Director of Pharmacy

**COVID 19 Vaccinations & Asthma – Dr. Bruce Vanderver, Chief Medical Officer** 



**Operation Updates** 

# What's New on the Web Portal physic Mariana

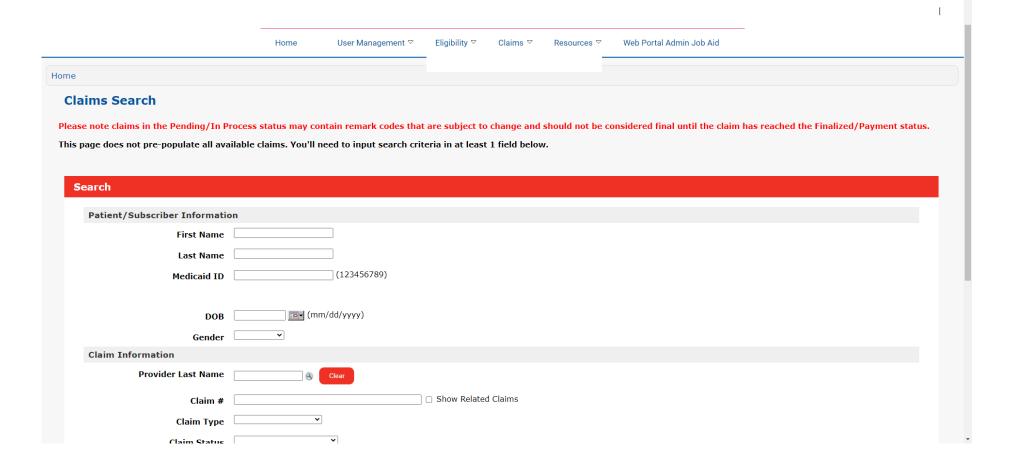


- Print EOB
- Print Member Rosters
- Submit /Check Authorizations



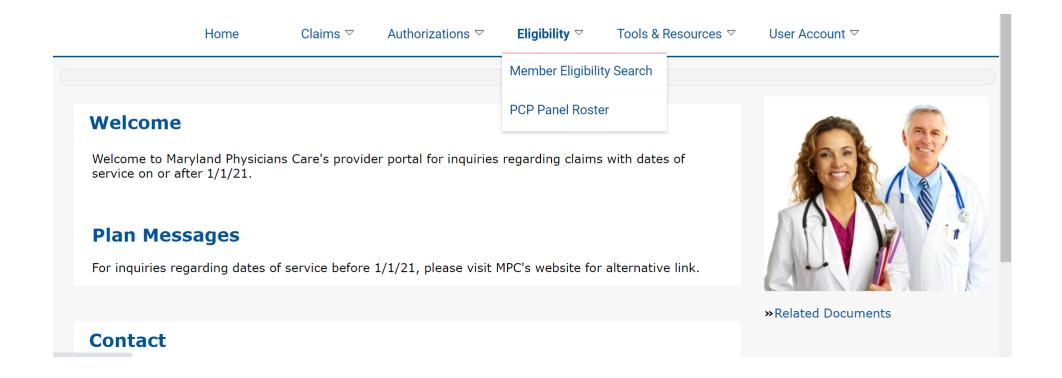
# **Printing EOBs**







## **Printing Member Rosters**



#### **Submit/Check Authorizations**



#### **Authorizations Drop-down Submit/Check Auths** This feature will direct you to the prior authorization submission tool, Identifi, where you can submit prior authorizations and review the status of existing prior authorizations. Elig Submit/Check Auths

#### **Authorization Code Checker**



We are currently updating the MPC Medicaid Pre-Authorization Tool. Therefore, a small amount of codes are not in the tracker. Please contact Clinical Review at 800-953-8854 option 2 then 4, if the code is not found.

# MPC Medicaid Pre-Authorization Tool

Code	Check

Non-participating providers require prior authorization for *all* services except for emergent and self-referred services. For non-participating providers, learn how you can <u>become an MPC provider</u>.

Disclaimer: All attempts are made to provide the most current information on the Pre-Auth Needed Tool. However, this does NOT guarantee payment. Payment of claims is dependent on eligibility, covered benefits, provider contracts, correct coding, and billing practices. If you are uncertain that prior authorization is needed, please submit a request for an accurate response.

For specific details about authorization requirements, please refer to our <u>Quick</u> Reference Guide.

# Prior Authorization Request Form



Effective 4/1/2021, the following Prior Authorization Form will be required for all prior authorization submission. Request received without the form will be rejected.

MARYLAND physicians ca	ATTON Scheduled Inpatient & Outpatie	UM Department Phone #: 800-953-8854 Inpatient Admission Notification Fax #: 1-800-385-4169 Post Discharge Services UM Fax #: 1-833-424-8013 ant Services & Transplant Request Fax #: 1-800-953-8856		
Requestor's Contact Name: Requestor's Phone #:				
	Patient Information:			
*Name:	*DOB:			
*Patient ID #:	*Patient Phone #:			
*Service Is:   Elective / Routi				
	t serious deterioration in health or jeopardize a			
	ion Denial, please submit an Appeal through Cu			
	be Requested: Please review plans benefit pr			
Inpatient	Outpatient	Other		
☐ Emergent Inpatient	☐ Surgical Procedure			
☐ Concurrent Review	☐ Chiropractic Services	☐ Home Health /Home Infusion/ IVT		
☐ Surgical Procedures	☐ Cochlear Implants	☐ Private Duty Nursing		
☐ Elective Admission	□ Hyperbaric Oxygen Therapy	☐ Hospice Care		
☐ Skilled Nursing Facility	☐ Intensive Cardiac & Pulmonary Rehab	☐ Hearing Aids/ Cochlear Implants		
☐ Acute Rehab	☐ Podiatry Services	☐ DME/Prosthetics/Orthotics		
☐ Maternity	☐ Sleep Study	☐ High Cost Medication		
□ NICU Stay	☐ Transplant Evaluations	☐ Voluntary Sterilization		
☐ Transplant	□ Bariatric Surgery			
		Other:		
	Procedure Information:			
*ICD 10 Diagnosis:	Diagnosis Description:			
*CPT/HCPC Code & Description (Include U	nit of Measure / Frequency for supplies):			
*Date(s) of Service:	# of Units or Visits:			
	Provider Information:			
Requesting Provider	Is this the patient's Primary Care Ph			
*Name:	*NPI	TIN:		
*Phone:	*Fax			
*Address:	Come as the Day	avesting Provider		
Rendering Provider  If Requesting and Rendering providers differ, complete	☐ Same as the Rec	questing Provider		
*Name:	*NPI	*TIN:		
*Phone:	*Fax			
*Address:				
Facility	□ N/A	4711		
*Name: *Phone:	*NPI *Fax	*TIN:		
riiolie.	FdX			

#### **Physical Medicine – Chiro**



Physical therapy services rendered by chiropractors on or after March 1, 2021 will require authorization.

Prior authorization can be initiated through the website www.RadMD.com or calling NIA's Call Center at 888-424-4836.



## **Provider Data Integrity**

Accurate online directories are key to ensuring members have access to accurate information about network providers. The Provider Directory is your free advertisement, it allows members to search for unique data elements such as languages spoken, ethnicity, office hours and handicap accessibility.

REMINDER: Contact us with any changes to your demographic information or provider group composition within ten days of the change.





Not Enrolled in ePREP? Here's What to Do

Visit the MDH ePREP website and do the following:

- 1. Create a user profile
- 2. Create and/or join a business profile
- 3. Confirm provider type and association with MPC
- 4. Complete the ePREP application
- 5. Complete ePREP revalidation every 5 years



**Quality Improvement/HEDIS Outreach** 

# Value-Based Purchasing 2021

Value -based purchasing is a Pay for Performance Model of care. The state of Maryland uses HEDIS measures as well a custom measure to monitor the performances of the Maryland Medicaid MCO's

VPDM	2021 Benchmarks		Variance from 2020 to 2021	
2021 VBP Measure	Neutral	Incentive	Neutral	Incentive
SSI Adult	84%	87%	No change	No change
SSI Child	84%	87%	No change	No change
Asthma Medication Ratio	66%	71%	No change	No change
Breast Cancer Screening	71%	75%	<b>†1%</b>	<b>†1%</b>
CDC - HbA1c Control (<8%)	57%	64%	↑3%	↑2%
Lead Screening	67%	72%	<b>†1%</b>	No change
Prenatal and Postpartum Care	80%	83%	N/A	N/A
	No Bend	hmarks for 2021 refer to	2020	
Adolescent Well-Care (age 12- 21 years)	66%	71%	NA	NA
Well-Child 15 months (6+ visits)	71%	76%	NA	NA
Controlling Blood Pressure	60%	66%	NA	NA

## Value-Based Purchasing



Information reflects NCQA HEDIS Measure Year (MY) 2020 Technical Specification and is used only as a reference to assist in improving your practice's HEDIS/VBP rates. For additional measures and information, please go to https://www.marylandphysicianscare.com/providers/resources/#hedis-tip-library

Measure	Requirement	СРТ
Breast Cancer Screening (BCS)	Women 52 - 74 years of age as of December 31, 2021, who had at least one mammogram between October 1, 2019 and December 31, 2021 Exclusion: Bilateral Mastectomy	77055-77057, 77061-77063, 77065-77067
Lead Screening	All members born in 2020 (not based on risk), must complete a lead test before the end of 2021. Testing can occur as early as 9 months of age	Only one code will meet compliance 83655
SSI Child- Birth to age 20 SSI Adult- 21-64	All members receiving Social Security Income should complete at least one Ambulatory Care Visit with PCP. This can be sick or well. No substance abuse, ED visits count	Any Ambulatory Care visit code or well visit code. Also Urgent Care \$9083, \$9088
Asthma Medication Ratio	Members must fill controller medication routinely (encourage 90-day fill). Ratio of controller to reliever medication of ≥ 0.50 is required.	Pharmacy claim based
Postpartum	Deliveries that had a postpartum visit on or between 7 days and 84 days after delivery	57170, 58300, 59430, 99501
HbA1c Control	The last reading in the measurement year must have value of <8	Lab based

#### **MPC Interventions**



Interventions	Details
Text messaging/letter/calls	Multi-modal communication platform to engage membership into care- First quarter outreach includes: Postpartum, Breast Cancer Screening, and W15 (Lead and immunizations)
Alegis Telehealth	Alegis is currently providing outreach to members who have not engaged with PCP or Health Care in 2020 (Approximately 2,000 members). Alegis provides telephonic outreach to include scheduling for a telehealth well assessment visit.
Remote Access Scheduling-Providers who grant MPC remote access scheduling	MPC will provide targeted outreach for Value-based purchasing Gaps in Care. Outreach includes telephonic/text/calls and scheduling directly to PCP office. Scheduled to resume in March
Clinic Days	MPC works with participating radiology centers to close gaps in care for Breast Cancer Screenings. Currently MPC has 51 events scheduled through out areas in Maryland for the 2021 CY. Members who attend are offered-round trip transportation and a gift card. Members are eligible for gift card if they go on their own and complete as well. This is claim based and gift cards will be mailed. BCS=\$150.00 VISA card
Health Fairs	Events are currently on hold. MPC will continue to collaborate with Community Stakeholders and will resume events when safe to do so

# Clinic day Schedule February-June maryland physicians care Medicaid with a Heart



February				
American Radiology (Fleet St- Baltimore City)	Saturday	2/27	8a – 1:30	25
	March			
Advanced Radiology (Dundalk- Baltimore County)	Thursday	3/11	IP – 4P	15
American Radiology (Fleet St-Baltimore City)	Saturday	3/27	8a – 1:30	25
	April			
Hagerstown Diagnostic Imaging (Washington	Tuesday	4/6	3:30 – 7:30	22
County)				
Seton Imaging (Baltimore City)	Saturday	4/10	9a – 12:45p	12
(mini) Seton Imaging (Baltimore City)	Wednesday	4/14	8:30a – 10a	7
Medical Park Community Radiology (Silver Spring)	Saturday	4/17	8a – 12:15	18
American Radiology (Fleet St-Baltimore City)	Saturday	4/24	8a – 1:30	25
	Мау			
JH White Marsh (Baltimore County)	Tuesday	5/4	IP – 3:45P	12
Rockville Community Radiology (PG County)	Saturday	5/8	8:30a – 12:15	16
(mini) Seton Imaging (Baltimore City)	Wednesday	5/12	8:30a – 10a	7
Seton Imaging (Baltimore City)	Saturday	5/15	9a – 12:45p	12
American Radiology (Fleet St- Baltimore City)	Saturday	5/22	8a – 1:30	25
	June			
Hagerstown Diagnostic Imaging (Washington	Tuesday	6/8	3:30 – 7:30	22
County)				
Seton Imaging (Baltimore City)	Saturday	6/12	9a – 12:45p	12
(mini) Seton Imaging (Baltimore City)	Wednesday	6/16	8:30a – 10a	7
Greenbelt Community Radiology (PG County)	Saturday	6/19	8:30a – 11:45	14
American Radiology (Fleet St-Baltimore City)	Saturday	6/26	8a – 1:30	25

#### **Contact Information**



Any Questions regarding HEDIS/Member Outreach, please feel free to contact:

Sammi Turner M.B.A., D.H.A Quality HEDIS Manager MCI-MCMI for Maryland Physicians Care

Email: Sturner@MPCmedicaid.com

Office: 443-412-8287

Cell 410-412-0394

# **HEDIS Annual Project**



- Why is it important to plans and providers
  - Effectiveness of Care
  - Access/Availability of Care
  - Experience of Care
  - Utilization and Risk Adjusted Utilization
  - Measures Collected Using Electronic Data Systems

# How can Provider Sites Help



- Medical records are collected by Maryland Medicaid Plans 2/01/2021-05/07/2021
- Medical Records are requested for CY 2020 Dates of Service
- MPC will fax request to practice sites- Fax will include directions and member identification.
- Please include Patient Identifier- to include name and DOB. The recommendation is to have patient identifier on all pages. If this is not possible name and DOB on first page, all other pages must include name.
- All Medical Records must be received and reviewed by 05/07/21. Please send the records as soon as fax is received. Any delays could result in a failure to the project
- Medical Records can be faxed, mailed, or MPC can arrange for pick up at site location

#### **Contact Information**



**Secure Fax Line-** 855-946-1758

HEDIS Manager

Coordinator (Medical Records)

Denise Redding

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Dredding@mpcmedicaid.com
Ahart@mpcmedicaid.com

**HEDIS Project** 

Amanda Hart

410-412-9718

# maryland physicians care Help is Here

# Pharmacy Updates

Jonathan Keyser, PharmD, MBA Director of Pharmacy

# Pharmacy Overview



I. P&T Formulary Updates

2. Website Updates

3. 90-Day Prescription Fills

# Pharmacy Update - Formulary



#### I. P&T Formulary Updates:

- A. Medications added to formulary from 02/2021 P&T Committee Meeting:
  - a) Adakveo (crizanlizumab): added to formulary w/PA
    - Indicated for the reduction in frequency of vaso-occlusive crises in sickle cell disease
  - b) Sevenfact (Factor VIIa): added to formulary w/PA
    - a) Indicated for the treatment and control of bleeding episodes in hemophilia A and B with inhibitors
  - c) Ztlido (lidocaine) I.8%: added to formulary
    - o Indicated for the treatment of post-herpetic neuralgia (PHN)

# Pharmacy Update - Website



#### I. Approved Drug Benefits - Prior Authorization

#### A. Pharmacy PA Fax Forms

a) Searchable database for pharmacy benefit medications that are reviewed by our pharmacy benefit manager (PBM), Express Scripts (ESI)

#### A. MPC Medical Drug Benefit (Buy & Bill)

a) Searchable database for the clinical criteria for the medications that are reviewed by MPC under the medical benefit

# Pharmacy Update – 90-Day Benefit



I. 90-Day Prescription Fills: Asthma Management

- A. MPC offers 90-day supplies for asthma controller medications
- B. Providers are encouraged to write 90-day supply prescriptions for our formulary controller medications
- C. Many of our formulary controller medications do not require prior authorization

# Pharmacy Update – 90-Day Benefit



#### **Preferred Asthma Controller Medication List**

Brand Name	Generic Name	Available Strengths	Dosage Forms	Prior Auth Needed?		
INHALED CORTICOSTEROIDS **ONLY**						
budesonide	(budesonide)	0.25 mg/2 ml; 0.5mg/2 ml; 1mg/2 ml	nebulizer solution	No		
ARNUITY ELLIPTA	(fluticasone furoate)	50 mcg, 100 mcg, 200 mcg	inhaler	No		
QVAR	(beclomethasone diproprionate)	40 mcg, 80 mcg	inhaler	No		
FLOVENT HFA	(fluticasone propionate)	44 mcg, 110 mcg, 220mcg	inhaler	Age restriction; for ages 1 – 7		
INHALED CORTICOSTEROIDS COMBINATION						
fluticasone-salmeterol	(fluticasone-salmeterol)	55-14; 113-14; 232-14 mcg, 100-50; 250-50; 500-50 mcg	inhaler	No		
WIXELA INHUB	(fluticasone propionate/salmeterol)	100-50; 250-50; 500-50 mcg	inhaler	No		
LEUKOTRIENE RECEPTOR ANTAGONIST (LTRA)						
montelukast	(montelukast sodium)	4 mg, 5mg, 10 mg	chewable tab, tablet, granule	No		
zafirlukast	(zafirlukast)	10 mg, 20 mg	tablet	No		



Covid-19 Vaccinations

#### **COVID Vaccinations**

# 3 COVID Vaccinations have received FDA Emergency Use Authorization

Manufacturer	Type of Vaccine	Administration	Approved Ages
Pfizer	mRNA	2 doses, 3 weeks apart	16+
Moderna	mRNA	2 doses, 4 weeks apart	18+
Johnson and Johnson	Modified-Adenovirus	1 dose	18+



All three vaccines show high efficacy, even against COVID variants

Side effects and adverse reactions on par with Flu vaccination

None of the vaccines can cause Covid infection

Patients cannot spread Covid from a vaccine

Vaccinated patients can still get COVID, so they should continue to take precautions



The best predictor of a patient's likelihood of getting vaccinated is a healthcare provider's recommendation.

This is true for all vaccines!

#### **IMMUNET**



A reminder: All vaccinations MUST be recorded in Immunet.

This includes Covid-I9 vaccinations.

There is no option for patients to opt-out.

Information on registering for Immunet is available on the MPC Coronavirus webpage:

https://mk0marylandphyssm4I8.kinstacdn.com/wp-content/uploads/2021/03/ImmuNet\_COVIDI9-Vaccine-Registration-Guide-02112021-I.pdf



# Please encourage your patients to get vaccinated as soon as they are eligible.

Maryland is vaccinating group <u>IC</u> currently. Current status is available at:

https://covidlink.maryland.gov/content/vaccine/



Asthma Update

# Asthma Guideline Update



Guidelines for the Diagnosis and Management of Asthma (EPR-3) was released in 2007 by the NHLBI

Asthma Management Guidelines: Focused Updates 2020 was released in December 2020 First major update to the guidelines in 13 years!



- I. Reinforce use of inhaled corticosteroids (ICS)
- 2. Long term asthma management: Long actingantimuscarinic agents (LAMA) with ICS
- 3. Reduce indoor asthma triggers with one or more methods
- 4. Immunotherapy for those with allergic asthma
- 5. Fractional exhaled nitric oxide (FeNO) test when asthma diagnosis is unclear
- 6. Bronchial Thermoplasty (BT) for selected adults with persistent asthma



Full Guidelines are found at:

https://www.nhlbi.nih.gov/health-topics/all-publications-and-resources/2020-focused-updates-asthma-management-guidelines

MDH has condensed the recommendations:

https://mk0marylandphyssm418.kinstacdn.com/wp-content/uploads/2021/03/2020-NIH-Asthma-Update-Summary.pdf



Reminder: Can write for 90-day scripts for formulary asthma controller medications.

90-day asthma scripts have been associated with increased compliance.

Increased compliance has been associated with improved outcomes.



Thank you for joining!