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The PHW Provider Newsletter for healthcare providers, physicians, and office staff provides important and timely information to support providing quality healthcare to your patients.



## Comprehensive **Diabetes Care**

According to the American Diabetes Association, evidence shows how COVID-19 puts people with diabetes at a greater risk of serious disease (1). Risk for hospitalization due to COVID-19 is 3x higher for diabetics compared to those without the condition (2). An important cause of serious complications and death is that high blood sugar weakens the immune system and is less effective in fighting infections. This is especially true for T2DM, who on average are older, often over the age of 65 and usually have additional complications of heart, lung, kidney and other comorbidities (3).

A well-managed diabetes care program is paramount during these unprecedented pandemic times, which has reduced health care utilization across the United States. The National Committee for Quality Assurance (NCQA) collects Healthcare Effectiveness Data and Information Set (HEDIS) measurements for participants 18-75 diagnosed with diabetes. PA Health & Wellness supports the initiative set forth to ensure quality care of its diabetic population, and then collects this data from providers who monitor several factors from diabetic testing. Early testing ensures that our participants are not at risk for developing complications that can be detrimental to their health.

These diabetic care measures pertain to patients between the ages 18-75 with Type 1 or Type 2 Diabetes and include:

- Retinopathy (retinal eye exam)
- Nephropathy (kidney disease exam)
- Controlling HgbA1C (< 8%)
- Controlling blood pressure (< 140/90)

These measures are not only difficult to complete, but they can also be quite challenging to manage over the course of a given year. While the kidney and eye exams are critical in identifying potential long-term issues, A1C and Blood Pressure control require monitoring through appropriate medications, weight loss programs, and exercise, to name a few. Above

all, we encourage you to stay in touch with your diabetic patients and continue to educate them. It is paramount for patients to obtain regular tests to detect potential issues early and appropriately manage their health to prevent injurious situations to their long-term wellbeing. Furthermore, the NCQA's allowance of telemedicine visits toward the compliance of 40 HEDIS measures starting in 2021 includes diabetes care, which we hope will enable added flexibility in the member-provider relationship.

PA Health & Wellness understands the difficulty of managing and monitoring the critical nature of comprehensive diabetes care during COVID. However, we are here to support you in any way we can. If you would like to collaborate with us on how to manage your challenges with providing effective diabetic care during this time, please reach out to your Provider Relations representative, who can then put you in touch with our clinical experts within Care Management, HEDIS, and Service Coordination.

- (1) Article Title: Coronavirus COVID-19 FAQ  
URL: <https://www.diabetes.org/covid-19-faq>  
Website Title: Coronavirus COVID-19 FAQ | ADA  
Date Accessed: August 07, 2020
- (2) Article Title: COVID-19 Associated Hospitalization Related to Underlying Medical Condition  
URL: <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-underlying-medical-conditions.html>  
Website Title: Centers for Disease Control and Prevention  
Date Accessed: August 07, 2020  
Source: Ko Jy, Danielson ML, Town M, et al 2020
- (3) Article Title: COVID-19 and diabetes: Knowledge in progress  
URL: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7144611/>  
Website Title: Diabetes research and clinical practice  
Date Accessed: August 07, 2020  
Source: Hussain A, Bhowmik B, Moreira NC  
Published: 2020 Apr 9



## Annual Wellness Visit for **Older Adults**

In 2011, the Centers for Medicare and Medicaid introduced the annual wellness visit for older adults who are receiving Medicare. Wellness visits are equally important for our Medicaid and Marketplace members. The purpose of the annual wellness visit (AWV) is for the provider to focus on health promotion, disease prevention and the early recognition of disease instead of attempting to manage acute and chronic medical conditions, such as diabetes, obesity, and hypertension. Managing a patient's well care ties into PHW's P4P program along with the Medicare Annual Wellness Visit Provider Incentive Program.

Across the country, providers have had many challenges this year because of the COVID-19 pandemic. Despite taking precautions, like equipping staff with PPE, increasing the availability of hand sanitizer and making changes to the layout of the facility, patients are still reluctant to come into the office for fear of exposure.

PA Health & Wellness understands that it has been difficult to manage preventive care during this time. We are encouraging our provider partners to make use of telemedicine as a way to keep tabs on a patient's wellbeing. Previously, the Department of Health and Human Services (HHS) had limitations on reimbursement, which stifled

widespread use of this technology. However, during the COVID-19 pandemic, HHS has expanded reimbursement for telemedicine visits for all patients via phone or video calls. Additionally, the NCQA will allow telemedicine visits toward compliance of 40 HEDIS measures in 2021, including diabetes and hypertension.

Partnering with PHW's Care Management and Service Coordination teams is an excellent way to add additional oversight to your patients' care. We can assist with making connections to care resources when needed.

We recognize that telemedicine is not an ideal way to monitor the health of your patients. If you would like to collaborate with us on how to manage your challenges with providing wellness visits during this time, please reach out to your Provider Relations representative.

Sources:

[https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/AWV\\_Chart\\_ICN905706.pdf](https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/AWV_Chart_ICN905706.pdf)

<https://www.ncqa.org/hedis/>



# PHW's EMR Access Program: Prioritizing Patients Over Paperwork



We understand that providers handles multiple requests for medical records throughout the year. Requests to return paperwork increase your administrative burden and take away from the time you spend with your patients. COVID has further complicated matters.

Unfortunately, a pandemic doesn't negate PHW's need to review medical records to stay in compliance with standard business practices. A lack of medical records will impact HEDIS rates, risk adjustment, and Pay For Performance (P4P) incentives.

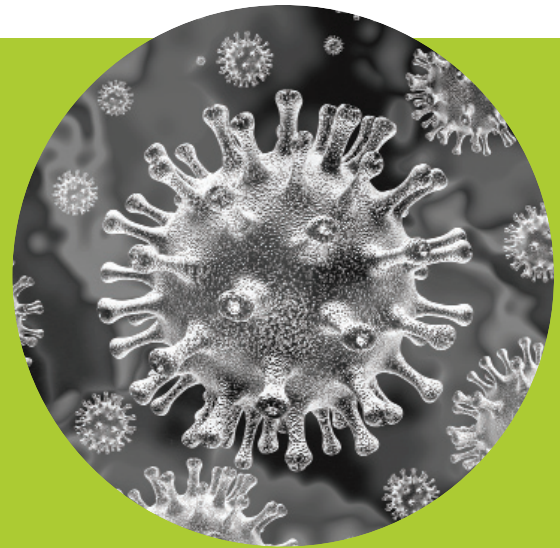
PHW wants to help. We are inviting you to opt-in to our EMR Access Program.

When we need medical records to complete a clinical review or process claims, we will access your EMR system via a secure login that you will provide. We will securely print the information needed for review to a secure repository, where our medical requesters will review the records. All of this work will be done in a way that is compliant with HIPAA and privacy regulations. Remote access to your EMR system is ideal, as it minimizes the need for onsite visits, protecting all staff members from possible exposure to COVID.

Your staff will be free from manual work to pull medical records together to return to PHW. You will be able to prioritize patient care over paperwork.

To join the PHW EMR Access program, we'll ask you to provide PHW with access to your EMR system by providing logins. Our Provider Relations department can walk you through the information we need in order to set up access. They can set up a brief call with the PHW program team, who can provide additional information and answer any questions you may have.

We look forward to partnering with you to work smarter, not harder, during these uncertain times.



## HEDIS 2021: Quality in the Time of COVID

At the beginning of July, the NCQA (National Committee for Quality Assurance) released the HEDIS 2021 specifications. The PHW HEDIS Operations team is currently reviewing the specifications to prepare for the coming year. There are a number of noteworthy changes to the specifications that we'd like to bring to your attention, all of which take patient care during a pandemic under consideration.

- Telemedicine visits are now allowed to count towards HEDIS compliance in 40 measures, including Comprehensive Diabetes Care, Controlling High Blood Pressure, Care for Older Adults, Transitions of Care and Antidepressant Medication Management.
- The Adult BMI Assessment measure has been retired.
- The Controlling Blood Pressure measure has been modified to allow blood pressures that were taken by the patient to count towards compliance, as long as the member uses a digital device. The blood pressure value should be recorded in the member's medical record.

PHW will have HEDIS 2021 documentation available for your staff in the fall of 2020. In the meantime, if you have questions about HEDIS, please get in touch with your Provider Relations representative, who will put you in contact with our HEDIS Operations team.

Source: <https://www.ncqa.org/hedis/>



## Meeting **appointment accessibility** standards

**Are your patients able to obtain services when they are needed?** PA Health & Wellness monitors the availability of our network practitioners. Availability is key to participant care and treatment outcomes.

PA Health & Wellness follows the accessibility requirements set forth by applicable regulatory and accrediting agencies. We monitor compliance with these standards annually and use the results of monitoring to ensure adequate appointment availability and reduce the unnecessary use of emergency rooms.

Please review the appointment availability standards in the Provider Manual.

## After-hours requirements

Participants need to know who to contact after business hours. Providers are required to offer arrangements for access to a covering physician after business hours, or they must have an answering voice, triage services or voice message that explains to participants how to access urgent and emergency care. This helps ensure our participants get the best possible healthcare.

The requirements below ensure that our participants have adequate access to needed healthcare services and can access their providers after normal business hours and on weekends.

### Offices using an answering service must:

- Provide a message directing participants to call 911 or go to the nearest emergency room if they think it is too urgent to wait for a doctor to call back.
- Provide instructions on how to contact the doctor if the situation is urgent.

### Offices using an answering service must:

- Direct participants to call 911 or go to the nearest emergency room if they think it is too urgent to wait for a doctor to call back.
- Provide an option to contact the provider on call with the participant's contact information. When possible, the provider must return the call within 30 minutes.



## Who should get a **flu shot**?

According to the Centers for Disease Control and Prevention (CDC), almost everyone ages 6 months and older should get a flu vaccine. However, participants with severe, life-threatening allergies to ingredients in the vaccine - such as certain antibiotics and gelatin - and participants under 6 months of age cannot get a flu shot. Providers should also discuss risks with participants who have egg allergies, are sick, have weakened immune systems or have Guillain-Barré syndrome.

If there is a shortage of flu shots, the CDC recommends that providers prioritize getting the vaccine to people in the following groups:

- People ages 50 and older
- People with chronic pulmonary or cardiovascular disorders
- People who are immunosuppressed
- Women who will be pregnant during flu season
- Residents of nursing homes and chronic care facilities
- American Indians and Native Alaskans
- People with a BMI greater than 40
- Healthcare personnel

Go to the [CDC website](#) to learn more about flu shot guidelines. For Medicaid participants, [HEDIS measures evaluate how many adults ages 18 to 64 receive the flu vaccine.](#)



## Care for Older Adults: Pain Assessments

The Care for Older Adult (COA) HEDIS measure ensures that older adults receive the care they need to optimize their quality of life. Specifically, COA takes into account whether providers are evaluating four elements in their older patients: completing an assessment of the members' physical and cognitive functions, a pain screen, a medication review, and having end-of-life plan discussions. Screening our elderly members is effective in identifying functional decline and implementing strategies to mitigate negative effects and outcomes.

The pain assessment element of the COA measure evaluates the percentage of adult members age 66 and older who were assessed for pain during the calendar year. Pain assessments using standardized pain assessment tools, or documentation in the member's medical record is acceptable. Medical records should include evidence of the assessment. Any type of documentation used by the provider must include clear documentation of the date of the pain assessment. Some examples of standardized pain assessments include a pain thermometer, the PROMIS Pain Intensity Scale, and the Pain Assessment in Advanced Dementia (PAINAD) Scale.

The use of CPT Category II codes helps identify clinical outcomes such as pain assessment. The CPT Category II codes for pain assessment are 1125F and 1126F.

To our members, and your patients, a pain assessment is an essential component of care. We understand that COVID-19 has affected members' ability and willingness to come into your office for regularly scheduled visits. Earlier in 2020, the NCQA and CMS worked together to develop a mitigation strategy to ensure members continue to receive the care they need and deserve, while taking public health and safety into consideration.

COA assessments rendered in calendar year 2020 during a telephone visit, e-visit or virtual check-in will meet the HEDIS criteria for the measure. You will continue to be compliant with HEDIS, Medicare Stars and P4P by capturing this information virtually.

If you would like more information about HEDIS, Care for Older Adult, or anything related to pain assessments, please reach out to your Provider Relations representative, who will connect you with one of our clinical staff members.



### Community Connect

#### Aunt Bertha

This summer, PA Health & Wellness partnered with Aunt Bertha to launch a unique and targeted search portal for community members in need of resources. **PHW Community Connect** is housed on the PA Health & Wellness website, under the Community tab, and is available for anyone to use.

#### Why Aunt Bertha?

Aunt Bertha's network connects people seeking help and verified social care providers that serve them. Thousands of nonprofits and social care providers serve their communities. But for most people, navigating the system to get help has been difficult, time consuming, and frustrating. Too many Americans are suffering, and they don't need to.

So Aunt Bertha created a social care network that connects people and programs — making it easy for people to find social services in their communities, for nonprofits to coordinate their efforts, and for customers to integrate social care into the work they already do.

Please visit PHW Community Connect (<https://www.pahealthwellness.com/community/community-connect.html>) to find important community resources you can use!