



# MPM Provider Quality Newsletter

To access the materials referenced in this newsletter, go to:  
[www.medpointmanagement.com/provider-resources](http://www.medpointmanagement.com/provider-resources)

- > Click on "Quality Management Information" and then "2020 Quality Newsletters."
- > All materials are listed in one PDF document.
- > Please also note that MedPOINT's Reference Guides are available under "HEDIS Documents."

## QM Bulletin Board Question of the month -

Have a question and need input from other health centers in the MedPOINT network?

Post your question at <https://qualitypoint.medpointmanagement.com> and check out the other resources available to you!

## Interpreta

Interpreta Member Gap Reports are your guide to improve preventive and chronic care HEDIS measures. It includes all your health plans rolled into one report and makes it easy to do outreach. For help downloading member reports, please contact us at [qualitymeasures@medpointmanagement.com](mailto:qualitymeasures@medpointmanagement.com), (818) 702-0100, ext. 1353, or contact your dedicated HEDIS/Stars Specialist.

## Changes in Diabetic Nephropathy Measure

In 2021, the Comprehensive Diabetes Care (CDC) Nephropathy measure is being tracked for the Medicare line of business only so the denominator in Interpreta is lower than the other diabetic measures. A microalbumin urine test, or visit to a nephrologist, or at least one ACE inhibitor or ARB prescription will make the member compliant.

A new first-year measure called Kidney Health Evaluation for Patients with Diabetes (KED) is included in the 2020-2021 NCQA Technical Specifications for the Commercial, Medi-Cal and Medicare lines of business. It requires that members 18-85 years with diabetes have an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR) during the measurement year. Prescriptions will not count toward this measure.

KED will become a publicly reported measure in 2022 for Medi-Cal and Commercial but will not be publicly reported for Medicare Stars until 2023 (this information is subject to change). Data for this measure is displayed in Interpreta so if your score is low, review your current workflows to ensure processes are in place to meet this measure.

## Pediatric Measure Coding

Medical record documentation must reflect the description of the codes submitted on your encounters. The description for the age-specific CPT codes have changed for the HEDIS pediatric measures: Well-Child Visits in the First 30 Months of Life (W30) and Child and Adolescent Well-Care Visits (WCV).

These routine health exams should include an ICD-10 routine health exam code and the age-specific CPT codes. The CPT code definition includes the following:

- **Comprehensive preventive medicine evaluation**
- **Management of an individual including an age and gender appropriate history**
- **Examination**
- **Counseling/anticipatory guidance/risk factor reduction interventions**
- **Ordering of laboratory/diagnostic procedures.**

If labs or diagnostic procedures are not ordered during the visit, the medical records must clearly state no labs/diagnostic test ordered. If this information is not clearly documented, your supplemental records will not meet criteria to make the member measure compliant for the specific measure. Please ensure that your wellness templates include all components to be compliant.

## **New Internet Service Program**

The FCC (Federal Communications Commission) is offering a new Emergency Broadband Benefit program to help eligible low-income families and households struggling to afford internet service during the COVID-19 pandemic. The program also provides a one-time discount to purchase a laptop, desktop computer, or tablet from participating providers. For details, please see <https://www.fcc.gov/broadbandbenefit> and share this information with your patients.

## **Colorectal Cancer Flyer**

Please display or distribute the attached colorectal cancer flyers (English & Spanish) from the American Cancer Society to educate your patients on this important screening.

## **Resources:**

- **Implicit Bias Training – March of Dimes**  
See the attached flyer from Anthem regarding an eLearning course for healthcare providers on “Breaking Through Bias in Maternity Care.”
- **Healthier Communities Flyer – Anthem**  
This flyer has great information about the programs and community partnerships that Anthem has created to address social needs and provider resources.

- **Interpreting Quick Guide – LA Care**

This is a great resource for staff to have on hand when interpretation is needed in specific languages.

- **2021 HEDIS Provider Pocket Guide – Health Net**

This 92-page Guide contains detailed coding and includes behavioral health measures. Please download this guide on the MedPOINT website at under Quality Management Information.

- **Cultural and Linguistic Provider Toolkit – LA Care**

This 81-page guide includes information, resources and useful instruments to help with effective and compassionate communication with diverse patient populations and tips for working with language barriers. Please download this guide on the MedPOINT website at under Quality Management Information.

## **Coming Up in June**

### **Men’s Health Month & Week (June 14-20) –**

Did you know, that men are at greater risk of death in every age group? Men also have a higher suicide death rate than women. National Men’s Health Week is June 14-20, the week leading up to Father’s Day, because what better way to celebrate dad than to encourage him to take care of his health? The week is all about healthy bodies, hard exercise, good diet and regular visits to the doctor. It’s part of National Men’s Health Month, a month-long recognition of men’s health with activities and events to remind men to take care of their bodies. So encourage your male patients to come in for their routine care and preventive screenings.

### **National Cancer Survivors Day (June 6) –**

National Cancer Survivors Day is a Celebration for those who have survived, an inspiration for those recently diagnosed, a gathering of support for families, and an outreach to the community. Share this information with your patients and encourage them to visit the official website of National Cancer Survivors Day at [www.ncsd.org](http://www.ncsd.org) for more information.

# Working together for healthier communities



Social determinants of health are a wide range of factors that significantly influence a person's quality of life. Equal access to resources and opportunities that include safe and affordable housing, healthy food, education and employment are vital to overall wellbeing.

Anthem Blue Cross (Anthem) has created programs and community partnerships to address the social needs of our members and connect them to available resources. With your collaboration, we can work together to create healthier and more vibrant communities.



## Creating housing solutions together

We welcome the opportunity to collaborate with additional community-based organizations skilled in providing local housing supports to help more Californians enjoy secure, stable housing.

### Current efforts include:

#### Voucher Pilot Programs

Collaborations with local housing authorities and community organizations in Tulare, Pomona and Fresno

Partners provide housing supports and housing vouchers; Anthem provides wraparound supports

#### Anthem's Housing Flex Fund

Covers a range of expenses like security deposits and move-in costs that result in greater housing stability for members in select counties

#### Medical Respite Services

Supports members who are homeless and recovering from illness but not ill enough to be hospitalized

Provides a safe environment in which to recover while receiving medical oversight and supportive social services

#### Health Homes Housing Transition Services

Supports Health Homes enrollees with obtaining housing, including a personalized support plan

Sustaining services provide education and coaching to maintain tenancy

#### Anthem's Housing Problem-Solving Pilot

Supports members to eliminate housing barriers and provides housing case management for up to six months through a network of community-based organizations

<https://mediproviders.anthem.com/ca>

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ACAPEC-2573-20



## Partnerships that expand the reach of food programs

Anthem works with community partners on innovative programs that provide more Californians with healthy food while decreasing food insecurity.

### Food is Medicine Pilot

Members diagnosed with one of the following conditions — congestive heart failure (CHF), high blood pressure, gestational diabetes and end-stage renal disease (ESRD) — receive:

- 13 weeks of two medically tailored meals per day.
- Meals delivered weekly.
- Registered dietitian consults and wellness check-ins upon weekly meal delivery as part of the Project Open Hand program.

### Food Security for the Recently Housed

- Provides eight weeks of food for individuals recently housed, along with registered dietician sessions.
- Fosters independence by first providing prepared meals and then progressing to the delivery of cooking supplies and boxes of food that individuals prepare themselves.

### Double Up Food Bucks California

- Anthem works with SPUR to expand their pilot model of healthy food incentives with Double Up Food Bucks California.
- Provides a dollar-for-dollar match of California-grown produce for families making purchases with their food assistance dollars.



## Improving access to care and services for Anthem members

**The Doula Pilot Program** offers prenatal education with birth, delivery and postpartum support. Members receive comprehensive doula services, including prenatal visits, childbirth education classes, full labor and delivery support, and postpartum visits.

**Community health workers (CHWs)** assess members' needs and help identify resources and social services that educate, motivate and help improve self-care management.

**LiveHealth Online\*** provides access to board-certified doctors, therapists, psychologists and psychiatrists. Members may receive a treatment plan, a diagnosis and prescription as appropriate.

**Additional transportation services** for food pick-up at grocery stores, food pantries and farmers' markets as well as for homeless and housing services

**Anthem's Community Resource Link** is an online tool members use to locate free and low-cost services related to housing, employment, education and more.

**Bright Heart Health Medication-Assisted Treatment (MAT) Program** provides telehealth for substance use disorders (SUDs) through a team of doctors, counselors, care managers and recovery specialists. MAT uses medications combined with counseling and behavioral therapies to treat opioid-use disorder and SUD.

\* LiveHealth Online is the trade name of Health Management Corporation, an independent company, providing telehealth services on behalf of Anthem Blue Cross.



## Partners in local capacity building

Anthem supports various partners with expanding their local capacity for meeting community needs. Partner examples include:

- City of Sacramento
- Women's Empowerment
- Lutheran Social Services of Northern California
- Kings/Tulare Homeless Alliance
- FoodLink for Tulare County
- Los Angeles Regional Foodbank
- Food Forward
- Valley High School Health Tech Academy

**“Together, we can empower our communities to effectively accomplish more, better, faster, and we are grateful to Anthem for stepping up and demonstrating their commitment to making a positive difference.”**

Machael Smith, Executive Director of the Kings/Tulare Homeless Alliance

**Let's work together:**

If you're interested in partnering with Anthem to enhance your impact in the community, contact us at [CASpecialPrograms@anthem.com](mailto:CASpecialPrograms@anthem.com).

# Interpreting Services (PPGs)

No-cost interpreting services including American Sign Language are available to L.A. Care members 24 hours a day, 7 days a week.

## Provider Responsibilities - Important Regulatory Things to Remember

- Post translated signage (interpret poster) about no-cost interpreting services at all key points of contact.
- Offer no-cost face-to-face and telephonic interpreting services to patients.
- Never imply, request, or require patients to provide their own interpreters.
- Strongly discourage using friends, family members, and especially minors as interpreters, except in emergency situations.
- Document patient's preferred spoken and written language as well as request or refusal of interpreting services in their medical record.
- Maintain appropriate documentation on file for bilingual practitioners and office staff who communicate with limited English proficient (LEP) patients in a language other than English.
  - Use the no-cost interpreting services offered by L.A. Care if their language proficiency is not assessed, and they are not qualified.
- Ensure that the answering machine informs patients on how to access interpreting services after-hours.

## Telephonic Interpreting Services

1. Dial **1.855.322.4022**
2. Press:
  - 1 for Spanish
  - 2 for Other Languages
  - 3 for Operator
3. Provide:
  - Independent Physician Association (IPA) name
  - L.A. Care member ID number
4. Document the interpreter name and ID # for reference.
5. Brief the interpreter, and give any special instructions.
6. Dial the patient into the call.



## Face-to-Face Interpreting Services

1. Call the phone numbers below to request an interpreter at least 10 business days prior to a patient's medical appointment. American Sign Language is also available for deaf and hard of hearing patients.

**IMPORTANT:** Call L.A. Care immediately if there are any changes to a patient's appointment.

L.A. Care		Plan Partners	
Medi-Cal	1.888.839.9909	Anthem Blue Cross	1.888.285.7801
Cal MediConnect	1.888.522.1298	Care1st	1.800.605.2556
L.A. Care Covered	1.855.270.2327	Kaiser Permanente	1.800.464.4000
PASC-SEIU	1.844.854.7272		

2. Provide the following information:

### Patient Information

- Patient's name
- L.A. Care member ID number
- Language requested
- Preferred gender of interpreter

### Appointment Information

- Date, time and duration of appointment
- Doctor's name
- Address and phone number
- Purpose of appointment

## Limited English Proficient (LEP) Patients

Offer no-cost interpreting services to the patient in a respectful manner when you notice:

- Patient is quiet or does not respond to questions.
- Patient simply says "yes" or "no", or gives inappropriate or inconsistent answers to your questions.
- Patient may have trouble communicating in English or you may have a very difficult time understanding what they are trying to communicate.
- Patient self identifies as LEP by requesting language assistance.

## How to Work Effectively with Interpreters

- Plan more time for a medical appointment or a call that will require an interpreter.
- Brief the interpreter on the purpose of the appointment or call.
- Talk directly to the patient. Speak in the first person.
- Speak in a normal voice, not too fast or too loud.
- Pause after a short sentence for the interpreter to interpret.
- Give information in small chunks and verify comprehension before going on.
- Use plain language. Avoid acronyms, medical jargon, and technical terms.
- Do not say anything you don't want the patient to hear. It is the interpreter's job to interpret everything.

## Communicating with Deaf and Hard of Hearing Patients

- Dial **711** to access the California Relay Services. It is a no-cost relay services provided by the Federal Communications Commission.
- American Sign Language interpreters are available for medical appointments. Please call L.A. Care Customer Solution Center to request an interpreter.

## Tools and Resources

You can *order* the below tools through the Online Tool Order Form:

<https://external.lacare.org/HealtheForm/>

- Interpreting services poster
- Telephonic interpreting card
- C&L provider toolkit

Additional materials are also available for *download* from the L.A. Care's website:

<http://www.lacare.org/providers/provider-resources/tools-toolkits>

- Go to *Manuals and Forms* to download:
  - ICE employee language skills assessment tool
  - Health Education referral form (C&L appropriate community services)
  - Preferred language labels
  - Interpreting request/refusal labels
- Go to *Toolkits* to download:
  - C&L provider toolkit

## C&L Trainings

The following trainings are available to L.A. Care network providers at no cost:

- Communicating through Healthcare Interpreters (CME)
- Cultural Competency
- Disability Sensitivity

To receive more information about upcoming trainings or to schedule an on-site training session, contact us at [CLStrainings@lacare.org](mailto:CLStrainings@lacare.org).

## Contact Information

For more information about the L.A. Care's Cultural & Linguistic services, email us at [CulturalandLinguisticServices@lacare.org](mailto:CulturalandLinguisticServices@lacare.org).



**HEALTHY  
MOMS.  
STRONG  
BABIES.**



# MARCH OF DIMES IMPLICIT BIAS TRAINING: **BREAKING THROUGH BIAS IN MATERNITY CARE**



## **Enrollment Beginning Nov. 2020**

*(participants have 6 months to complete course)*

**Provider CME & CNE contact hour credit will be provided upon completion of the course and program evaluation.**

To Register, please contact Deysi Sierra, QI Specialist at [deysi.sierra@anthem.com](mailto:deysi.sierra@anthem.com)

### **LEARNING OUTCOMES**

#### **EXPLAIN IMPLICIT BIAS**

Explain implicit bias, including its cognitive basis and potential impact on maternal care.

#### **DESCRIBE STRUCTURAL RACISM**

Describe how structural racism in the U.S. contributes to implicit bias in maternal care.

#### **USE STRATEGIES**

Use ALLY Model strategies in patient interactions to avoid implicit bias.

#### **APPLY AN EQUITY LENS**

Apply an equity lens that takes into consideration patient needs when making decisions.

- The U.S. is facing a maternal and infant health crisis. One potential threat is implicit bias - the attitudes and stereotypes that affect an individual's understanding, actions and decisions in an unconscious manner.
- This eLearning offers healthcare providers: an overview of implicit bias, a historical overview of structural racism in the U.S., strategies to mitigate racial bias in maternity care, and strategies for building a culture of equity within an organization.
- This training is aimed at increasing awareness and encouraging action to address maternal and infant health disparities. Anthem Blue Cross is collaborating with March of Dimes to facilitate learning opportunities for our Provider Network and better position ourselves to address disparities.
- This training meets the requirements of SB-464 California Dignity in Pregnancy and Childbirth Act.

#### Accreditation Statement:

In support of improving patient care, this activity has been planned and implemented by Amedco LLC and March of Dimes. Amedco LLC is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

#### Physician Credit Designation Statement:

Amedco LLC designates this activity for a maximum of 1.0 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

#### Nurse Credit Designation Statement:

Amedco LLC designates this activity for a maximum of 1.0 ANCC contact hours.

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**THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:****COUNTIES:**

- ☒ Imperial
- ☒ Riverside/San Bernardino
- ☒ Los Angeles
- ☐ Orange
- ☒ Sacramento
- ☒ San Diego

**LINES OF BUSINESS:**

- ☒ Molina Medi-Cal Managed Care
- ☐ Molina Medicare Options Plus
- ☐ Molina Dual Options Cal MediConnect Plan (Medicare-Medicaid Plan)
- ☐ Molina Marketplace (Covered CA)

**PROVIDER TYPES:**

- ☒ **Medical Group/ IPA/MSO Primary Care**

- ☒ IPA/MSO

- ☒ Directs

**Specialists**

- ☒ Directs

- ☒ IPA

- ☒ **Hospitals**

**Ancillary**

- ☐ CBAS
- ☒ SNF/LTC
- ☐ DME
- ☐ Home Health
- ☐ Other

**FOR QUESTIONS CALL PROVIDER SERVICES:**

(888) 562-5442, Extension:

**Los Angeles/Orange Counties**

X123017

**Riverside/San Bernardino Counties**

X120613

**Sacramento County**

X125682

**San Diego County**

X121735

**Imperial County**

X125682

## Medi-Cal Drug Utilization Review (DUR) Educational Article – 2020 Immunization Updates

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding **2020 Immunization Updates**.

The American Academy of Pediatrics (AAP) and the CDC have issued recommendations and strategies for childhood immunizations during the COVID-19 pandemic, including the following:

- If well visits have been rescheduled, work with families to bring children up to date as quickly as possible. State-based immunization information systems and electronic health records may be able to support any catch-up immunizations.
- Separate well visits from sick visits (i.e., schedule well visits in the morning and sick visits in the afternoon) or separate patients spatially by placing patients with sick visits in different areas of the clinic or at separate clinics, when possible.

In general, a reminder that Influenza Vaccine As in prior years, routine annual influenza vaccination is recommended for everyone 6 months of age or older without contraindications. For the upcoming influenza season, widespread influenza vaccination will be critical to reduce the impact of respiratory illnesses in the population and the resulting burdens on the healthcare system during the COVID-19 pandemic. Any reduction in flu cases and their severity could make a difference for hospital capacity.

Hepatitis A (HepA) Vaccine A July 2020 report summarizes previously published recommendations from ACIP regarding the prevention of HepA virus infection in the United States. ACIP recommends routine vaccination of children 12 to 23 months of age and catch-up vaccination for children and adolescents 2 to 18 years of age who have not previously received HepA vaccine at any age. ACIP recommends HepA vaccination for adults at risk for HepA virus infection or severe disease from HepA virus infection and for adults requesting protection against HepA virus without acknowledgment of a risk factor. These recommendations also provide guidance for vaccination before travel, for postexposure prophylaxis, in settings providing services to adults, and during outbreaks.

Tetanus Toxoid, Reduced Diphtheria Toxoid, and Acellular Pertussis (Tdap) Vaccine In October 2019, ACIP recommended that either Tdap or tetanus and diphtheria toxoids (Td) vaccine could be used in situations where only Td was previously recommended. This includes the decennial Td booster, tetanus prophylaxis for wound management, and catch-up vaccination, including in

pregnant women. While Tdap costs more than Td, utilization data show that Tdap was widely used in place of Td by clinicians in the United States, suggesting acceptability of Tdap to both patients and health care providers. ACIP concluded that allowing either Tdap for Td to be used in situations.

Reference: [https://files.medi-cal.ca.gov/pubsdoco/dur/Articles/dured\\_30685.pdf](https://files.medi-cal.ca.gov/pubsdoco/dur/Articles/dured_30685.pdf)

### **QUESTIONS**

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (888) 562-5442. Please refer to the extensions on page one.



You can help prevent  
**colorectal  
cancer.**

## If you're age 45 or older, you should start getting screened for colorectal cancer.

Colorectal cancer is one of the leading causes of cancer death in men and women, yet it can often be prevented or found at an early stage, when it's small and may be easier to treat, with regular screening.

Preventing colorectal cancer or finding it early doesn't have to be expensive. There are simple, affordable take-home tests available. Talk to your health care provider about which ones might be good options for you. No matter which test you choose, the most important thing is to get tested.

To learn more about colorectal cancer, visit the American Cancer Society's website at **cancer.org** or call us at **1-800-227-2345**. We're here when you need us.





Usted puede ayudar a prevenir el  
**cáncer colorrectal.**

## Si usted tiene 45 años o más, debe empezar a hacer las pruebas de detección del cáncer colorrectal.

El cáncer colorrectal es una de las principales causas de muerte por cáncer al considerar a hombres y mujeres en conjunto, pero con las pruebas rutinarias a menudo se puede prevenir o detectar en sus etapas iniciales, cuando es de menor tamaño y posiblemente más fácil de tratar.

Prevenir el cáncer colorrectal o encontrarlo en sus etapas iniciales no tienes por qué ser costoso. Hay pruebas sencillas y accesibles que puede hacer desde la comodidad de su hogar. Hable con su proveedor de atención médica sobre cuáles opciones de pruebas podrían ser adecuadas para usted. Sin importar cuál escoja, lo más importante es hacer la prueba.

Para más sobre el cáncer colorrectal, visite el sitio web de la Sociedad Americana Contra El Cáncer en **[cancer.org/es](https://cancer.org/es)** o llámenos al **1-800-227-2345**. Estamos a su disposición para cuando nos necesite.