



MedStar Family Choice

DISTRICT OF COLUMBIA

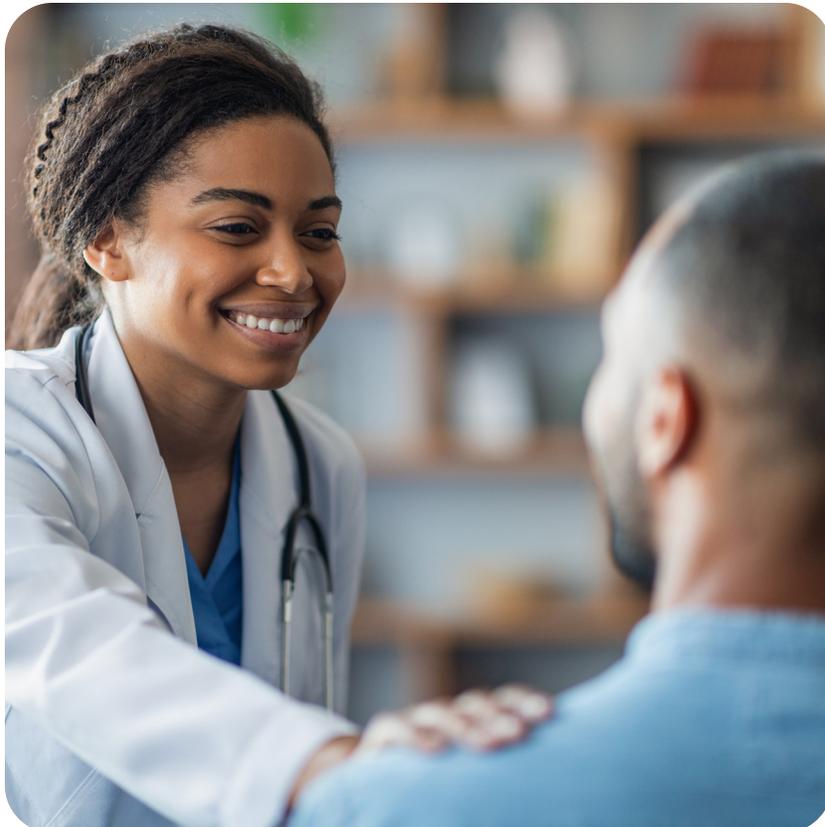


Provider Newsletter

1st Quarter 2024

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A message from Dr. Tu



Raymond Tu, MD

Dear Provider,

Thank you to all our MedStar Family Choice District of Columbia Providers for the care you provide your patients, our Enrollees. The 2024 Lunar New Year is the Year of the Dragon and is predicted to be a great year to start new projects, explore new opportunities, and create value for yourself and others. If you have ideas or opportunities for us to collaborate with you, please reach out to us. Enrollee engagement with you, our Providers, is essential to build trusting relationships between you and our Enrollees. If we can participate in any way, please let us know.

Important reminder: Please take every opportunity to mention health coverage renewal to your patients. All DC residents with Medicaid and Alliance must renew their coverage to continue receiving benefits. The first step is for Enrollees to ensure that their contact information is up to date with the Department of Health Care Finance by visiting DistrictDirect.DC.gov.

If you have questions or if we can assist you in any way, please call Provider Customer Service, Monday through Friday, 8 a.m. to 5:30 p.m., at **800-261-3371** (select option 1 or remain on the line). You can also email us at mfcdc-providerrelations@medstar.net.

Best in Health,

Raymond Tu, M.D., M.S., F.A.C.R., Chief Medical Officer
MedStar Family Choice District of Columbia

Welcome to MedStar Family Choice District of Columbia!

We are proud to welcome the following new physical and behavioral health provider groups to our network.

Alpha Health LLC
American Oncology Partners PA
Bamboo Beginnings Doula Services LLC
BBD Psychiatry Group Professional Limited Liability Co
Cherish Life with Dignity Counseling and Consulting
Chevy Chase Foot and Ankle
Cona Healthcare Services LLC
Fidelity Health Care LLC
Happy Family Care and Clinic LLC
Humming Bird Counseling and Therapeutic Services
Infectious Disease Care Center
Integrare Health LLC
Lifegate Healthcare Services
Luminox Healthcare Services LLC
MedStar Health Neurology at Reston
Nuer Happy Solutions
Onyx Therapy Group
Prudent Behavioral and Wellness Health LLC
RWA Innovative Providers LLC
Terry Jarrett-Saunders
TrueYou Center LLC
Unique Minds Behavioral Health Services LLC
Vigor Integrative Wellness LLC
William J Demeo PhD



In addition, we are happy to welcome the following ancillary providers into our network:

GroupName

Complete Care at Hyattsville LLC
Complete Care at Springbrook LLC
Complete Care at Wheaton
Continuum LLC
Potomac Anesthesia Associates
Samaritan Inns Inc
Woodley House Inc

Specialty

Skilled Nursing Facility
Skilled Nursing Facility
Skilled Nursing Facility
Durable Medical Equipment
Anesthesiology
Mental Health Clinic
Mental Health Clinic

Key contacts

Each participating MedStar Family Choice District of Columbia provider is assigned a Provider Relations associate to assist with questions regarding our health plans. If you are not certain who your Provider Relations associate is, please contact us and we'll assist you. You can also click this link to access [Provider Relations Associate Territory Assignment](#) information on our website.

24/7 Nurse Advice Line: 855-798-3540

MedStar Family Choice DC Nurse Advice Line
Our 24/7 nurse advice line can help direct Enrollees to the care they need any time of the day or night.

All Prior Authorization (including Behavioral Health): 888-404-3549 or 855-798-4244

Processes requests for services requiring authorization.

Authorization:

- Non-Pharmacy Fax **202-243-6307**
 - o Diabetes and Nutrition Counseling
 - o DME, Home Health, & Soft Supplies
 - o Orthotics & Prosthetics
 - o Outpatient Rehab (PT, OT, SPL)
 - o Skilled Nursing/Sub Acute Rehab, Acute Rehab
- Pharmacy & Infusion Drugs ONLY Fax **202-243-6258**
- Acute Inpatient Concurrent Review Fax **202-243-6256**
- MedStar WHC Concurrent Review Fax **202-243-6257**
- All Behavioral Health Services Fax **202-243-6320**

Case Management Services (including Behavioral Health)

Phone **888-404-3549** or **855-798-4244** | Fax **202-243-6253**
Care coordination, High-Risk Pregnancy, Early Intervention, and Social Work.

Claims/Encounter Data Submission/Provider Portal

MedStar Family Choice DC Claims Processing Center
P.O. Box 211702

Eagan, MN 55121

800-261-3371 Provider Calls

888-404-3549 Enrollee Calls

Processes claims and encounter data. Resolves claim issues. Claims must be submitted within 365 days. Electronic claims submission is also available.

Payor ID # **RP062**

Dental Benefits - Avesis: 844-391-6678

Dental services available to all Enrollees. Benefit package depends on the type of coverage.

Eligibility Verification

202-906-8319 (Inside DC) | **866-752-9233** (Outside DC)
The District's IVR line verifies that a patient is eligible to receive benefits and is active with MFC-DC.

Laboratory

LabCorp **800-788-8764** Quest Diagnostics **866-697-8378**
Requesting physician sends patient to an approved LabCorp or Quest draw station using a LabCorp or Quest Requisition Form with MedStar checked off.

Outreach

MedStar Family Choice DC Care Management Center
Phone **855-798-4244** | Fax **202-243-6252**
Outreach verifies PCP assignment, answers questions about eligibility/benefits, assists with transportation, and can assist providers with required outreach attempts for preventive care and Enrollee compliance, and translation/interpreter services.

Provider Relations

MedStar Family Choice DC Provider Relations
3007 Tilden Street, NW, POD 3N, Washington, DC 20008
MFCDC-ProviderRelations@MedStar.net
MedStarFamilyChoiceDC.com (for self-service options)
Phone **800-261-3371** | Fax **855-616-8763**
Assists with problem solving, education, recruitment, contracting, credentialing, and cultural competency concerns.

Radiology

MedStar Family Choice DC Outpatient Radiology Network (see Provider Manual)

Requesting Physician completes a Consultation referral form or a script to a participating radiology site for any radiology tests.

Routine Vision Benefits - Avesis: 844-391-6678

Enrollees may self-refer to a participating provider for routine vision care. Medical eye problems must be referred to a participating ophthalmologist. Referrals are not required for Diabetic eye exams.

Transportation - Access2Care: 866-201-9974

Providers and Enrollees may call directly to schedule.

You may contact MedStar Family Choice DC, Monday through Friday, between 8 a.m. and 5:30 p.m. Providers have the option to leave a message or send a fax after normal business hours. However, any calls and faxes received after hours will be addressed the next business day.



2023 Provider Satisfaction Survey

MedStar Family Choice District of Columbia is committed to supporting your practice in delivering the best medical care to your patients and our Enrollees. As part of our commitment, we are measuring the quality of our services last year from your practice's perspective through our "2023 Provider Satisfaction Survey." Your input will help us understand how our policies and practices affect your ability to provide the best possible care for our Enrollees and help us identify those areas where we may have opportunities for improvement.

The survey will be available shortly. It will take approximately 10 minutes of your time. The survey can be completed by an office manager, nurse, physician, or another staff member at your practice. Additional details concerning the 2023 Provider Satisfaction Survey will be forthcoming. Thank you in advance for your response and willingness to provide your valuable feedback.

**It's new
on the
website!**

**Click here for the
Community
Resources Tool**

Search our online, local resources directory for free or low-cost services to support families, such as help with medical care, food, utilities, transportation and more.

Our Provider Community at Work

Spotlight on: Pathways to Housing DC

The key to healthier communities is Housing First; this is how Pathways to Housing DC elevates health equity in its response to homelessness.

“I just want to heal.” Shelly shared these words with a Pathways to Housing DC case manager after struggling with homelessness, the trauma of abuse, and addiction for years. Thankfully, Shelly moved into housing last month and is actively rebuilding her life from a place to call home. A grandmother, she is eager to return to school to become a certified addictions counselor, knowing “I have so much to offer others like me.”

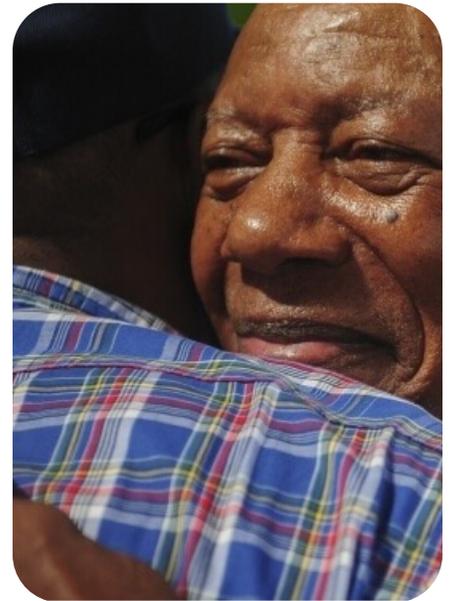
While every person’s journey is unique, stable housing is the foundation of a healthy life. Within the Washington, DC region, Pathways to Housing DC has been blazing a path forward to create greater access to both housing and healthcare services for nearly two decades. This pioneering work continues today by meeting people where they are and by investing in innovation as a partner on the journey home.

The origin of the Housing First model is not a policymaker or a political ideology, it is a result of Pathways to Housing DC’s values—**meeting people where they are and listening.** Beyond needing food, clothing, blankets, or a warm cup of coffee, the people that Pathways to Housing DC encounters on the streets, in parks and libraries, or at bus shelters will tell you that they need housing.

When people can access stable, safe housing, they can experience better health and quality of life. Instead of requiring individuals to achieve “housing readiness” to qualify for a program, the Housing First approach provides **permanent housing as a foundation** so individuals can then address other issues, such as getting sober, receiving care for mental and physical health issues, or seeking employment.

Fast Facts: Did You Know?

- Homelessness is a public health crisis. Homelessness may exacerbate chronic health conditions and lead to the development of new health problems.
- Homelessness makes treatment and medication more difficult to receive, often co-occurs with lack of access to consistent or healthy food sources, exposes people to weather extremes and communicable diseases, and creates additional physical strain on the body.
- People experiencing homelessness suffer higher rates of diabetes, high blood pressure, heart attack, Hepatitis C, HIV, depression, and substance use disorders, all of which are difficult to manage and treat without safe and stable housing. Even minor health problems like cuts and colds become dangerous when someone is experiencing homelessness.
- People who are chronically homeless have higher mortality rates than the general population—with a life expectancy cut tragically short by nearly 20 years.
- Homelessness is a result of race inequities and impacts people of color disproportionately. Ending homelessness cannot happen without addressing racial inequity.



But housing alone is not the cure. Those served by Pathways to Housing DC are often chronically homeless and with that comes **a myriad of health challenges and opportunities** for Pathways to Housing DC to create a new path forward with each individual.

Key healthcare investments that spotlight Pathways to Housing DC’s commitment to health equity include:

- A **medical respite program** tailored to meet the needs of individuals experiencing homelessness who are in need of a safe place to recover following a hospitalization. Time to recover with a care plan in place is only the beginning as securing permanent and stable housing is always the goal.
- **Partnerships that bolster health equity** initiatives on the street and in the community. From working with managed care organizations, medical residency programs, local hospitals and emergency rooms, public health agencies, and other nonprofit partners, bridging the gaps requires the strengths and ingenuity of every sector.
- A **workforce committed to community health**. Employing nurses, clinicians, certified addictions counselors, peer health specialists, psychiatrists, and case managers who see the whole person and believe that every person deserves health and healing is a calling for those who work at Pathways to Housing DC.

Most of all, it is a belief that **healing is possible**.
Countless individuals include Pathways to Housing DC as part of their healing journey because housing is health care.
You can reach Pathways to Housing DC at **202-529-2972**.



Let's Talk Behavioral Health

Love is good for your health

Humans, by nature, are social beings and have established loving relationships for as long as we've walked the earth. Initially meant to support survival, loving relationships can help us feel secure, connected, and increase trust in one another. Beyond strengthening bonds, love has been shown to have a positive impact on our mental health and our ability to cope with stress.

Although the concept of love can be hard to define, recent research has taught us more about the chemistry of love and its network of neurotransmitters and hormonal processes which impact our physical and emotional wellbeing. From the time we are born, the limbic system in our brain is affected by those providing care for us. It attempts to synchronize and mirror those closest to us, which can have profound impacts on our personality and emotional development. Having social support and loving relationships is linked to decreased stress, decreased symptoms of depression and anxiety, and improved prognosis with conditions like cancer and myocardial infarction.



With February being the month for love and Valentine's Day, we encourage you to embrace and express love in a variety of ways in these types of relationships:

- **Yourself** - show some self-love by taking time for yourself each day to do something enjoyable and relaxing like taking a bath, going for a walk, or making your favorite cup of tea.
- **Your romantic partner** - pick a day and time for "date night" - and you don't have to break the bank to celebrate one another...you can watch a movie at home or cook your favorite meal together.
- **Your friends** - set up a group or one-on-one time to catch up over a shared favorite activity like sports, the spa, or brunch.
- **Your parents** - call your parents or write them a letter sharing how much you care about them and the meaning they've brought to your life.
- **Your children** - find time to read your child's favorite book, draw a picture, or plan a fun "adventure day" to spend some extra special time together.
- **Your pet** - show your furry friend some extra love by going for a long walk, having a cuddle session, or splurging on a favorite treat.

Like Gandhi once said "Where there is love there is life," so take this as an opportunity to express your love for yourself and others...and improve your health along the way!

Compliance Corner

Office of Inspector General Compliance Program Guidance for Individual and Small Group Practices

The Office of Inspector General (OIG) has developed a series of voluntary compliance program guidance documents (CPGs) directed at various segments of the healthcare industry for Individual and Small Group Physician Practices, to encourage the development and use of internal controls to monitor adherence to applicable statutes, regulations, and program requirements. The CPGs are listed below.

On April 25, 2023, **OIG announced** its plans to improve and update existing CPGs and to deliver new CPGs specific to segments of the healthcare industry or entities involved in the healthcare industry that have emerged in recent years. In modernizing OIG's CPGs, their goal is to produce useful, informative resources, as timely as possible, to help advance the industry's voluntary compliance efforts in preventing fraud, waste, and abuse in the healthcare system. The existing CPGs and supplemental CPGs will remain available for use as an ongoing resource as the OIG develops and publishes the new guidance. Refer to the link here for relative guidance for Physician Practices: <https://oig.hhs.gov/documents/compliance-guidance/801/physician.pdf>

Know the rights and responsibilities of our Enrollees

Enrollees have a right to:

- Know that when they talk with their doctors and other providers, it's private.
- Have an illness or treatment explained to them in a language they can understand.
- Participate in decisions about their care, including the right to refuse treatment.
- Receive a full, clear, and understandable explanation of treatment options and the risks of each option so they can make an informed decision.
- Refuse treatment or care.
- Be free from any form of restraints or seclusion used as a means of coercion, discipline, convenience, or retaliation.
- Can see and receive a copy of their medical records and request an amendment or change, if incorrect.
- Receive access to healthcare services that are available and accessible to them in a timely manner.
- Choose an eligible PCP/PDP from within MedStar Family Choice DC's network and to change their PCP/PDP.
- Make a Grievance about the care or services provided to them and receive an answer.
- Request an Appeal or a Fair Hearing if they believe MedStar Family Choice DC was wrong in denying, reducing, or stopping a service or item.

- Receive Family Planning Services and supplies from the provider of their choice.
- Obtain medical care without unnecessary delay.
- Receive a second opinion from a qualified healthcare professional within the network or, if necessary, obtain one outside the network at no cost to them.
- Receive information on Advance Directives and choose not to have or continue any life-sustaining treatment.
- Receive a copy of MedStar Family Choice DC's Enrollee Handbook and/or Provider Directory.
- Continue the treatment they are currently receiving until they have a new treatment plan.
- Receive interpretation and translation services free of charge.
- Refuse oral interpretation services.
- Receive transportation services free of charge.
- Get an explanation of prior authorization procedures.
- Receive information about MedStar Family Choice DC's financial condition and any special ways we pay our doctors.
- Obtain summaries of customer satisfaction surveys.
- Receive MedStar Family Choice DC's "Dispense as Written" policy for prescription drugs.
- Receive a list of all covered drugs.
- Be treated with respect and due consideration for their dignity and right to privacy.
- Receive information, including information on treatment options and alternatives, regardless of cost or benefit coverage, in a manner they can understand.
- Receive information about MedStar Family Choice DC, its services, its practitioners and providers and Enrollee rights and responsibilities.
- Make recommendations regarding the organization's Enrollee rights and responsibilities policy.

Enrollees are responsible for:

- Treating those providing their care with respect and dignity.
- Following the rules of the DC Medicaid Managed Care Program and MedStar Family Choice DC.
- Following instructions they receive from their doctors and other providers.
- Going to scheduled appointments.
- Telling their doctor at least 24 hours before the appointment if they must cancel.
- Asking for more explanation if they do not understand their doctor's instructions.
- Going to the Emergency Room only if they have a medical emergency.
- Telling their PCP/PDP about medical and personal problems that may affect their health.
- Reporting to Economic Security Administration (ESA) and MedStar Family Choice DC if they or a family Enrollee have other health insurance or if they have a change in their address or phone number.
- Reporting to Economic Security Administration (ESA) and MedStar Family Choice DC if there is a change in their family (i.e. deaths, births, etc.)
- Trying to understand their health problems and participate in developing treatment goals.
- Helping their doctor in getting medical records from providers who have treated them in the past.
- Telling MedStar Family Choice DC if they were injured as the result of an accident or at work.
- Working with their Primary Care Provider (PCP) to create and follow a plan of care that they and their PCP agree on.
- Supplying information (to the extent possible) that the organization and its practitioners and providers need in order to provide care.

Support Your Care Team By Building Your Trauma-Informed Practice



Practice Assessment



Workforce Training



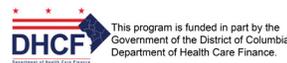
Resilience Coaching



Impact Evaluation

MedStar Family Choice District of Columbia is offering **free** Trauma-Informed Care training for in-network providers:

- Three months of hands-on support customized to your health clinic's needs
- Delivered by Rooting Resilience, a collective of DC mental health professionals
- Email info@rootingresilience.com for more information and to get started
- This **free** service, with up to 35 hours of support, is available to your practice until December 31, 2024



It's how we treat people.

Formulary updates

MedStar Family Choice District of Columbia Pharmacy and Therapeutics Committee meets quarterly. During the October and November 2023 meetings, formulary changes were made for DC Healthy Families and DC Healthcare Alliance. **Bolded** names indicate a brand medication; other listed medications are generic.

CHANGES BELOW BECOME EFFECTIVE ON OR AROUND JANUARY 1, 2024

Additions:

adalimumab-fkjp, adalimumab-adaz injection

AirSupra (*albuterol and budesonide*) inhaler

Ajovy (*fremanezumab*) injection

Alvesco (*ciclesonide*) inhaler

Austedo XR (*deutetrabenazine*) titration kit

Corlanor (*ivabradine*) tablets

Cosentyx UnoReady (*secukinumab*) 300

mg/2 mL injection

disopyramide CR capsules

Lantus, Lantus Solostar (*insulin glargine*),
pens and vials

Lokelma (*sodium zirconium cyclosilicate*)
packets

mexiletine capsules

Nayzilam (*midazolam*) nasal spray

nitazoxanide tablets

Norpace (*disopyramide*) ER capsules

Novolog (*insulin aspart*) products

Orilissa (*elagolix*) 200 mg tablets

Perseris (*risperidone*) injection

Rezvoglar (*insulin glargine*) KwikPen

roflumilast tablets

Siklos (*hydroxyurea*) tablets

sodium chloride nebulized solution,

hypertonic (3%, 7%, 10%)

Soliqua (*insulin glargine and lixisenatide*) pen

tinidazole tablets

Trinate prenatal tablets

Valtoco (*diazepam*) nasal spray

Visco-3 (*sodium hyaluronate*) injection

Zejula (*niraparib*) tablets

Removals:

Aimovig (*erenumab*) auto-injector

albuterol tablets

carbidopa 25 mg tablets

Chemet (*dimercaptosuccinic acid*) 100 mg

capsules

clemastine oral syrup

Creon (*pancrelipase*) capsules

dantrolene 100 mg capsules

disopyramide IR tablets

Flovent (*fluticasone*) Diskus, HFA inhalers

gemfibrozil tablets

Guardian continuous glucose monitoring
(CGM) system

Hyalgan, Supartz FX (*hyaluronidase*
derivatives) injection

Ingrezza (*valbenazine*) capsules

insulin aspart generic pens, vials

insulin glargine generics (including Basaglar)
pens, vials

insulin lispro generics (including Admelog)

pens, vials

Janumet, Janumet XR, Januvia

Leukine (*sargramostim*) injection

Long-acting injectable antipsychotics with

administration frequency >Q4 weeks (Abilify

Asimtufi [720mg, 960 mg], Aristada 1064

mg, Invega Trinza, Invega Halfyera)

meloxicam oral suspension 7.5 mg/5 mL

Nourianz (*istradefylline*) tablets

Nurtec (*rimegepant*) tablets

phenylephrine-containing products

ProAir Respiclick (*albuterol*) inhaler

Procrit, Epogen (*epoetin alfa*) injection

Reyvow (*lasmiditan*) tablets

Risperdal Consta (*risperidone*) 12.5 mg

injection

Steglatro, Segluromet (*ertugliflozin,*

ertugliflozin/metformin) tablets

Victoza (*liraglutide*) injection

Viokace (*pancrelipase*) tablets

Vyepti (*eptinezumab*) injection

Xofluza (*baloxavir*) tablets

Xultophy (*insulin degludec/liraglutide*)

injection

Additions with Prior Authorization:*

Auryxia (ferric citrate) tablets
Cablivi (caplacizumab) injection
Cerezyme (imiglucerase [glucocerebrosidase]) injection
Cinryze (C1 inhibitor) injection
Elevidys (delandistrogene moxeparvec) injection
Jesduvroq (daprodustat) tablets
Korlym (mifepristone) tablets
Krystexxa (pegloticase) injection
Ngenla (somatogon) injection
NovoSeven (Factor VIIa, activated) injection
Nutropin AQ (somatropin, recombinant HgH) injection
Oxycodone extended release (ER) tablets
Piqray (alpelisib) tablets
Soliris (eculizumab) injection
Takhzyro (lanadelumab) injection
teriparatide pen-injector
Tymlos (abaloparatide) pen-injector
Ultomiris (ravulizumab) injection
Venclexta (venetoclax) tablets starter pack
Vraylar (cariprazine) capsules
Vyjuvek (beremagene geperpavec) injection
Xdemvy (lotilaner) ophthalmic solution

Addition of Quantity Limits:

Ampyra (dalfampridine) 10 mg tablets
Inhaled corticosteroids (**Alvesco, Asmanex, Asmanex HFA, Flovent HFA** authorized generic)
aprepitant capsules
Calcitonin gene-related peptide (CGRP) Receptor Antagonists
cyclosporine eye drops
diphenoxylate/atropine tablets
granisetron 1 mg tablets
Long-acting injectable antipsychotics (**Abilify Maintena, Aristada, Aristada Initio, Invega Sustenna, Invega Trinza, Invega Hafyera, Perseris, Risperdal Consta, Zyprexa Relprevv**)
Nayzilam (midazolam) nasal spray

Nuedexta (dextromethorphan and quinidine) tablets
Proton Pump Inhibitor medications
Santyl (collagenase) ointment
Sickle Cell Disease agents (**Adakveo, Droxia, Oxbryta, Siklos**)
Valtoco (diazepam) nasal spray

Prior Authorization Removed:

Dexcom CGM systems
Emgality (galcanezumab) injection
Santyl (collagenase) ointment

The full formulary and list of formulary updates are available on the MedStar Family Choice DC Provider Website at [MedStarFamilyChoiceDC.com/providers/pharmacy](https://www.MedStarFamilyChoiceDC.com/providers/pharmacy).

The MedStar Family Choice DC P&T Committee welcomes your feedback. Providers can email feedback or requests for formulary additions or changes to: MFC-FormularyFeedback@MedStar.net

*Please see the Prior Authorization and Step Therapy Table for clinical criteria. **The table is updated regularly.** Please use the most current version found on the pharmacy page of the MedStar Family Choice DC Provider Website at [MedStarFamilyChoiceDC.com/providers/pharmacy](https://www.MedStarFamilyChoiceDC.com/providers/pharmacy).





Case Management services and other available benefits

Case Management Services are provided by licensed registered nurses and social workers, and coordinators. These professionals assist Enrollees in the management of their biopsychosocial needs. This is done telephonically and face to face, when applicable, by educating the Enrollee on disease self-management, facilitating access to health care, and connecting the Enrollee to needed resources within the community. Case managers work closely with providers to ensure that their Enrollees receive appropriate and timely health care.

Case Management services

We provide Case Management services to our most complex and highest risk Enrollees, as well as those requiring care coordination and resource management. Enrollees identified

by District of Columbia Health Care Finance (DHCF) as 'Special Needs Population' include an adult age 21 or older who:

- Has a chronic, physical, developmental or behavioral health condition;
- Receives SSI;
- Has a disability that meets the DDI definition.

Inclusion criteria for adult Enrollees include, but is not limited to:

- High Risk Pregnancy
- Diabetes
- Asthma
- COPD
- Hypertension
- Cardiovascular Disease
- HIV
- Substance Use Disorder
- Social Issues/Mental Health

Inclusion criteria for pediatric Enrollees include but is not limited to:

- Diabetes
- Asthma
- Epilepsy
- Chronic Lung Disease
- Cardiovascular Disease (CAD)
- Attention Deficit Hyperactivity Disorder (ADHD)
- Depression
- Anxiety
- Substance Use Disorder
- Other Mood Disorder

Transition Care Case Management services

Transition Care Case Management is a service provided by MedStar Family Choice District of Columbia to assist your patient, identified as high risk for readmission when transitioning from the hospital to home. This service is provided by registered nurse case managers who work closely with your patient to assist with adherence to the discharge plan ordered by the hospital care team, locating providers, scheduling follow-up appointments, and assisting with transportation if needed. This service is offered for 30 days, and if after that time your patient requires further assistance, they will be referred to one of our case management programs.

Enrollment

Enrollee participation in Case Management services is voluntary and Enrollees can start, stop, or decline participation at any time. However, they are automatically included in the programs once identified by us as meeting qualifying criteria. Adults with special healthcare needs as defined by DHCF are mandated to be in some level of perpetual Case Management.

To refer your Enrollee to any of the above services, please fax your referral to 202-243-6253, or call us at **855-798-4244** (select option 2 for Provider and then option 1 for Care Manager). We are available Monday through Friday from 8 a.m. to 5:30 p.m. Any faxes or voice messages received after hours will be handled the next business day.

Additional Enrollee benefits

Resource connection

A case manager can connect your patients with resources in their community to assist them with mental and/or substance use needs, utility turn-offs, food assistance, and emergency shelters. Printed educational materials with information on chronic conditions are available for Enrollees. The information is written in easy-to-understand language. A case manager is available to answer your patient's questions and concerns, and to advise on wellness incentives that may be available to them.

Coordinate care

A case manager can assist your patient with locating a specialist in their area, as well as scheduling appointments and coordinating transportation based on your patient's needs. For more information, call **855-798-4244** (select option 2 for Provider and then option 1 for Care Manager)



HEDIS® Highlights

Spotlight: HEDIS Update MY2024

As NCQA continues its focus on electronic clinical data, several measures are being moved from administrative/hybrid reporting to the electronic clinical data systems (ECDS) standard, including:

- Follow-Up Care for Children Prescribed ADHD Medication (ADD)
- Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)
- Colorectal Cancer Screening (COL)

*Eye Exam for Patients with Diabetes (EED) will remain a hybrid measure for MY2024.

Meanwhile, there will be no new measures added for MY2024 and four measures are being retired; they are:

- Ambulatory Care (AMB)
- Inpatient Utilization–General Hospital/Acute Care (IPU)
- Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)
- Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

Diabetes measure event/diagnosis criteria:

- Claim/encounter data: Simplified to only require two diagnoses of diabetes on different dates of service during the MY (measurement year) or prior year (PY)
- Pharmacy data: Added a requirement to also have a diagnosis of diabetes in the MY (measurement year) or PY (prior year) removing the Diabetes Exclusions Value Set

Osteoporosis Management in Women Who Had a Fracture (OMW) negative diagnosis history:

- Simplified to fracture diagnosis 60 days prior to episode date.

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP) required exclusions:

- Simplified identifying members for whom first-line antipsychotic medications may be clinically appropriate; only requires applicable diagnoses on two different dates of service in the measurement year.

Expansion of inclusivity and diversity initiatives

As NCQA seeks to advance gender-inclusive measurement for transgender health plan members, it is expanding the criteria for the Breast Cancer Screening (BCS-E) and Cervical Cancer Screening (CCS, CCS-E) measures. These measures now identify members recommended for routine cancer screening using the following criteria:

- Administrative gender of Female (Administrative Gender F) at any time in the member's history
- Sex Assigned at Birth (LOINC 76689-9) of Female (LOINC LA3-6) at any time in the member's history.
- Sex Parameter for Clinical Use of Female (Sex Parameter For Clinical Use Female-typical) in the Measurement Year

New exclusions to these measures include:

- BCS-E: Gender affirming chest surgery with a diagnosis of gender dysphoria in the member's history
- CCS, CCS-E: Sex Assigned at Birth (LOINC 76689-9) of Male (LOINC LA2-8) in the member's history

In addition, to advance health equity, NCQA is adding nine additional measures for Race and Ethnicity Stratification (RES) reporting to the existing set of 13 measures, including:

- Follow-Up After Emergency Department Visit for Mental Illness (FUM)
- Follow-Up After Hospitalization for Mental Illness (FUH)
- Postpartum Depression Screening and Follow-Up (PDS-E)
- Prenatal Depression Screening and Follow-Up (PND-E)
- Childhood Immunization Status - Combination 10 (CIS-E)
- Cervical Cancer Screening (CCS-E)
- Prenatal Immunization Status (PRS-E)
- Kidney Health Evaluation for Patients with Diabetes (KED)
- Eye Exam for Patients with Diabetes (EED)

As these changes demonstrate, it can be difficult keeping up with the changing complexities. If you have any questions, please email Dianna Lee-Sam, Director of Quality and Outreach at: dianna.Lee-Sam@medstar.net or Meghan Myer, Manager of Quality at meghan.e.myer@medstar.net.

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3 YEARS

If you have questions regarding information in this newsletter, please call us, Monday through Friday, 8 a.m. to 5:30 p.m., at **800-261-3371** (select option 1 or remain on the line).

You can also email us at **mfcdc-providerrelations@medstar.net**. This Provider Newsletter is a publication of MedStar Family Choice District of Columbia. Submit new topics for subsequent publication consideration to **mfcdc-providerrelations@medstar.net**.

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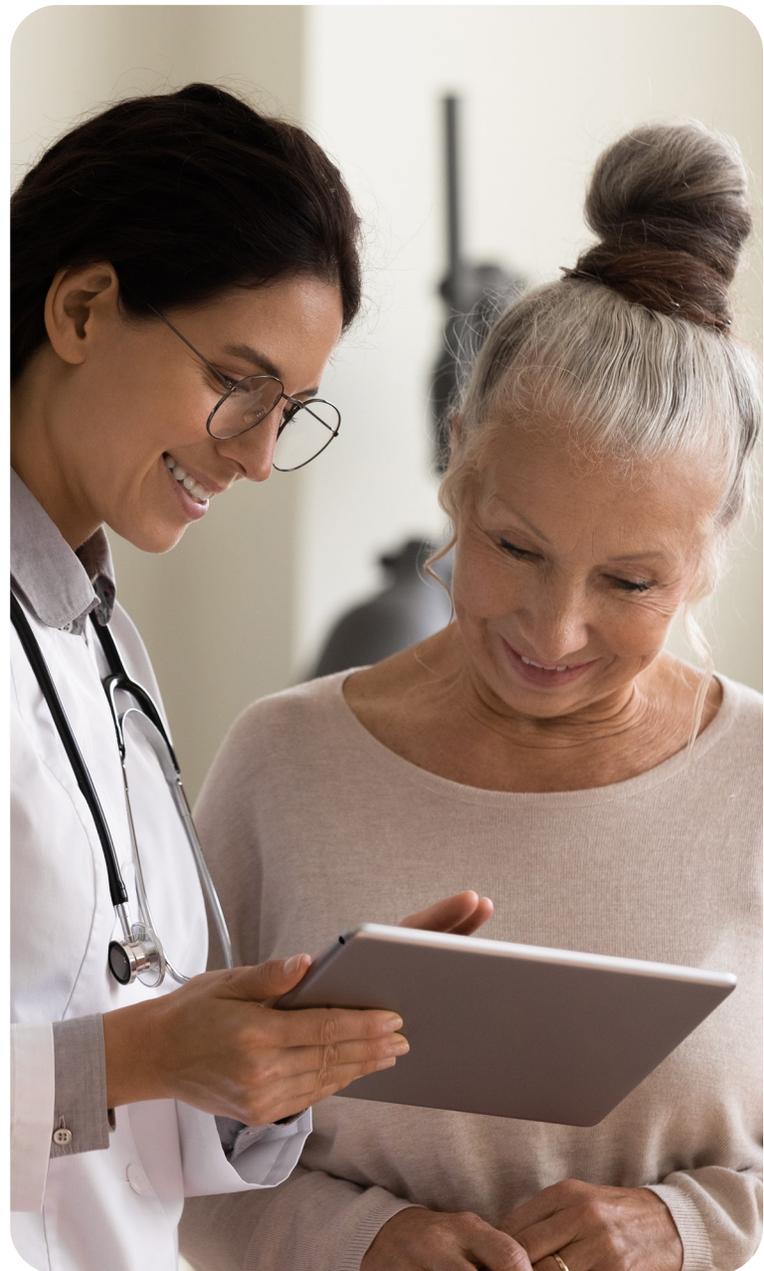
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