

Healthy Children

Preventive care visits are essential to improving the overall wellness of children and adolescents. We want to ensure our members obtain the care they need to have a healthy, successful school year. According to Bright Futures and Healthcare Effectiveness Data and Information Set (HEDIS®)* measure criteria:

- **Well-Care Visits (WCV):** Patients 3-21 years of age should complete at least one comprehensive well-care visit per measurement year with a primary care provider (PCP) or OB/GYN practitioner.
- **Weight Assessment and Counseling for Nutrition and Physical Activity (WCC):** Patients 3-17 years of age should also have evidence of documentation for (body mass index) BMI percentile and counseling for nutrition and physical activity per measurement year.

New HEDIS measures for the measurement year 2023:

- **Oral Evaluation, Dental Services (OED):** Patients under 21 years of age should complete at least one comprehensive or periodic oral evaluation with a dental provider per measurement year.
- **Topical Fluoride for Children (TFC):** Patients 1-4 years of age should receive at least two fluoride varnish applications per measurement year.

Helpful tips for improving well-care visits:

- Take advantage of every appointment, including sick visits, to complete a well-care visit.
- Educate patients to help them understand the importance of preventive visits, immunizations, and regular checkups.
- Refer the patient to a dental provider and follow up to make sure they received the desired services. If your practice offers integrated dental services or same-day appointments, assist in scheduling this convenient service for your patient.
- Reminders are effective! Even if a patient is not frequently seen at the office, they either chose or were assigned to your office.
 - Send an appointment reminder at least 48 hours prior to the scheduled appointment to allow time for the patient to obtain transportation assistance.
- Verify the patient's contact information is up to date and that the next visit is scheduled prior to the patient leaving the office.

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

Healthy Adults

Primary Care Provider (PCP) visits are important to complete preventive services, address acute health concerns, and manage chronic conditions. These regular visits are helpful in establishing a relationship between the patient and the provider. Contacting patients who have not completed an annual preventive exam and educating them on the importance of preventive care helps improve the completion of annual PCP visits.

The HEDIS® measure tracked for adult preventive services:

- **Adult Access to Preventive/Ambulatory Health Services (AAP):** Patients 20 years of age and older who had an ambulatory or preventive care visit during the measurement year.

Molina partners with Mid-Ohio Food Collective to offer the Mid-Ohio Farmacy program!

Molina Healthcare is partnering with the Mid-Ohio Food Collective to offer the Mid-Ohio Farmacy program to our members living in Franklin County who are experiencing food insecurity. The Mid-Ohio Farmacy program provides weekly access to fresh fruits, vegetables, and whole grains for the entire household. Outreach to enroll members into the Farmacy program began in January 2023. Our goal is to meet the dietary needs of our members and improve health outcomes by providing access to nutritious foods via Mid-Ohio Farmacy. For more information on Mid-Ohio Farmacy, please visit mofc.org/mid-ohio-farmacy/.

Important Information Regarding the Resumption of Medicaid Renewals

Information for Medicaid and MyCare Ohio providers

During the COVID-19 public health emergency (PHE), Medicaid enrollees received uninterrupted health care coverage without annual proof of eligibility requirements.

On Dec. 29, 2022, President Joe Biden signed the [Consolidated Appropriations Act of 2023](#)¹ (also known as the omnibus spending bill) into law, which included the resumption of Medicaid renewals (also referred to as "Medicaid redeterminations").

ODM restarted the renewal process on Feb. 1, 2023. The first disenrollments for non-renewal, or loss of eligibility, will occur on April 30, 2023, with a May 1, 2023, effective date.

It is imperative that we all direct Medicaid recipients to resource information about how to renew their benefits so they don't lose their health care coverage or give them time to seek other coverage if they are no longer eligible. Providers should encourage Medicaid members to ensure their contact information is updated with the County Job and Family Services office and to take timely action on any renewal information they receive in the mail.

To find member-facing, as well as stakeholder and partner information please access resource materials on ODM's website: medicaid.ohio.gov/stakeholdersand-partners/covidunwinding/covidunwinding.

Thank you for your continued commitment to providing high-quality health care to our members, especially throughout the PHE.

¹appropriations.senate.gov/imo/media/doc/JRQ121922.PDF

Women's Health

Using the best Medicaid forms for newly pregnant members matters!

Prenatal Risk Assessment Form (PRAF) vs. Report of Pregnancy (ROP)

You may be wondering what the difference is between the Medicaid documents titled Prenatal Risk Assessment Form (PRAF) and Report of Pregnancy (ROP). Both can be early indicators of pregnancy for the Medicaid Managed Care Plans, and both ensure coverage for pregnant people enrolled in Medicaid throughout pregnancy and during the postpartum period. The forms optimize healthcare

access and health outcomes for the member and infant. Both should be submitted electronically on the NurtureOhio site: nurtureohio.com. If you need assistance, please email the Ohio Department of Medicaid at MomsandBabies@Medicaid.ohio.gov.

The main differences:

Prenatal Risk Assessment Form – PRAF	Report of Pregnancy – ROP
ONLY submitted by providers of obstetrical services	ONLY submitted by non-obstetrical providers Submitters: primary care practices, emergency departments, or local health clinics
Billed Correctly: H1000 + 33 modifier , providers will receive a \$90 payment	Billed Correctly: HCPCS T1023 , providers will receive a \$30 payment.
OBs can submit the PRAF every time there is a change in condition or needs	Usually only one is submitted (member will be referred to an OB)

The PRAF and ROP, as early indicators of pregnancy, are important forms for the long-term care of the pregnant member and baby. As soon as Molina receives the PRAF or ROP from NurtureOhio, the member is called and assessed for needs. Molina can help pregnant members with transportation to prenatal appointments, housing, accessing food, and more. During the call, Molina will tell the member about rewards for attending prenatal, postpartum, and well-baby appointments.

If you have other questions about the PRAF or ROP, please email Gretchen.Conturo@MolinaHealthcare.com.

Behavioral Health

The Follow-up After Hospitalization for Mental Illness (FUH) HEDIS® measure assesses the percentage of inpatient discharges for a diagnosis of mental illness or intentional self-harm among patients age six years and older that resulted in follow-up care with a mental health provider within 7 and 30 days.

Two rates are reported:

1. The percentage of discharges for which the member received follow-up care within 30 days after discharge.
2. The percentage of discharges for which the member received follow-up care within seven days after discharge.

Why is the FUH measure important?

Evidence suggests that individuals who receive follow-up care after a psychiatric hospitalization are less likely to readmit to an inpatient facility. The ability to provide continuity of care can result in better mental health outcomes and support a patient's return to baseline functioning in a less-restrictive level of care.

What can providers do to help improve FUH rates?

Providers tips:

- Discharge planning should begin as soon as the individual is admitted and should be ongoing and specific.
- Schedule the patient's aftercare appointment prior to discharge.

- Involve the member and family in all stages of discharge planning.
- Educate patients and caregivers on the importance of follow-up care to reduce the risk of inpatient readmission.
- Discuss the importance of seeking follow-up care with a mental health provider.
- Train staff on the "Teach-Back Method" to ensure patients and caregivers review and understand discharge instructions and the next steps in their care for follow-up.
- Develop outreach systems or assign case managers to encourage recently released patients to keep follow-up appointments or reschedule missed appointments.
- Reach out to patients who do not keep initial follow-up appointments.
- Set flags, if available, in their electronic health record (EHR) or develop a tracking method for patients due or past due for follow-up after discharge visits.
- Coordinate care with behavioral health practitioners by sharing progress notes and updates.
- Notify our Transitions of Care team of the patient's aftercare information on the day of discharge.

Questions?

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