

## Behavioral Health: May is Mental Health Awareness Month

May is Mental Health Awareness Month. The National Alliance on Mental Illness (NAMI) has a campaign called “You Are Not Alone.” The focus of the campaign is to connect with others in a safe way, prioritize mental health and acknowledge that it is ok to not be ok. Readers can connect with others on the website through NAMI’s blog, videos and by sharing personal stories. By sharing personal stories from real people, NAMI aims to make people feel less alone in their own mental health journey, especially during the COVID-19 pandemic. You can find this story and other mental health resources at: <https://www.nami.org/Get-Involved/Awareness-Events/Mental-Health-Awareness-Month>

## The Stigma of Addiction

The National Conference on Addiction Disorder shared a guide published by Shatterproof addressing the stigma of addiction. Shatterproof is a national nonprofit organization that focuses on reversing addiction crisis. The guide discusses the stigmatizing language of addiction. The guide gives input from those dealing with addiction of how they hear messages and how they would like to be addressed from providers and others.

The publication gives specific examples of language that can replace existing language that is more positive and patient/member focused.

- Example: stigmatizing language would be “drug problem” or “drug habit.”
- The recommended language would be “Substance Use Disorder” or “harmful/risky use.”

The rationale for using recommended language is placing the emphasis on the person, not the disease. This is also referred to as Person-first language. The publication can be found at: <https://www.psychcongress.com/article/shatterproof-releases-comprehensive-addiction-language-guide>

## HEDIS<sup>®</sup> HIGHLIGHT

Each year, Molina’s Quality Improvement Department develops and implements projects to improve the quality of services and care to our members. One of the Healthcare Effectiveness Information and Data Set (HEDIS) measures of focus for 2021 in behavioral health is **Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)**. This measure assesses whether members who are diagnosed with alcohol or other drug (AOD) dependence are “engaged” or attending ongoing treatment after their initial diagnosis. Our 2020 data indicated that members are attending the initial appointment after diagnosis, but there was a significant drop in engagement or ongoing treatment.

**Why is that?** There can be multiple factors or barriers leading to members not attending appointments. Identifying, understanding and addressing these barriers and/or contributing factors is the focus of one of our improvement initiatives this year.

Because you are a Molina Healthcare Network Provider, it is important for us to know and understand the challenges you face as you manage patients/members with behavioral health diagnoses. We want to arm you with as much information as you need to effectively work

with these patients/members. Molina has assembled a collection of HEDIS Tip Sheets that further define each one of the measures. Molina HEDIS Tip Sheets are located on the Molina Provider Portal in the “Forms” section.

### Wellness: 30-Day Readmission Policy Update Reminder & Focus

Unplanned acute readmission rates to hospitals drastically increased in 2020 for members age 18 and older, specifically within our Medicare-Medicaid Plan (MMP) population. You may be aware of the recent policy change shared in our December 2020 Provider Bulletin. This policy covers several changes, including an update to the claims process to collapse billing of preventable readmissions into the anchor admission. You can find a copy of the [Readmission Payment Policy](#) on our Provider Website, under the “policies” tab. Your action can have a significant impact on having a clear line of sight to members that are at the highest risk and most in need of our help.

Our goal is to reduce preventable acute readmission rates in partnership with primary care providers (PCP) and CliniSync Health Information Exchange (HIE). We believe that supporting our providers in their use, lack of use or limited access to HIE alerts may play a strong role in reducing preventable readmissions. We are currently in the planning phase to test if using CliniSync helps reduce the likelihood of readmission. We will share more details as the work develops.

**How can you help?** Take time to review the Readmission Payment Policy and ensure your practice is following the criteria set forth by the policy. Reducing denials and following billing guidelines as outlined can eliminate additional work and lead to better results for your patients and our members.

### Women’s Health: Report of Pregnancy Form

## Report of Pregnancy (ROP) Form

A timely electronic ROP (along with the Pregnancy Risk Assessment Form (PRAF)) ensures that pregnant individuals are eligible for Medicaid services as early as possible, through the pregnancy and immediate postpartum period.



#### Provider benefits and purpose of submitting an electronic ROP:

- A payment may be made for one report of a pregnancy that is diagnosed in conjunction with an E&M service not associated with a normal obstetrics/gynecology visit. It may be submitted on either form ODM 10257, "Report of Pregnancy (ROP)" (07/2021), or its web-based equivalent. *This payment is separate from the payment for the E&M service (or the encounter or visit of which the E&M service is part).*
- The ROP serves as pregnancy notification to managed Medicaid plans (MCPs) and initiation of timely health care and connection to added resources like care management, WIC and Evidenced-Based Home Visiting.
- The ROP maintains a pregnant woman’s Medicaid eligibility without disruption in coverage that ensures eligibility for covered services rendered by providers.



**Payment for completing the ROP:**

After completing the ROP, submit a claim based on the guidelines below:

Code + modifier	Description	Fee Schedule Amount*
HCPCS T1023	ROP electronic submission	\$30

*Reference: Medicaid rule 5160-21-04 (Pregnancy Related Services); 5160-1-60 Appendix DD fee schedule, effective 7/1/2021*



**Submitting the ROP using NurtureOhio is easy!**

1. Open the NurtureOhio website to access the PRAF:  
<http://www.nurtureohio.com>
2. Instructions can be found at: <http://medicaid.ohio.gov/Provider/PRAF>
3. Users must be registered in the Medicaid Information Technology System (MITS). For username or password issues:  
<http://www.ohmits.com/>
4. Difficulties with NurtureOhio, email: [Progesterone\\_PIP@medicaid.ohio.gov](mailto:Progesterone_PIP@medicaid.ohio.gov)



**Questions? Contact of the Managed Care Plans**

Buckeye	CareSource	Molina
<b>Timicia Swallen</b> 1-866-246-4356 Ext. 24532 <a href="mailto:TSwallen@Centene.com">TSwallen@Centene.com</a>	<b>Diana Holtrup</b> 937.224.3300 <a href="mailto:Diana.Holtrup@CareSource.com">Diana.Holtrup@CareSource.com</a>	<b>Shelby Burch</b> 1-800-642-4168 ext. 213596 <a href="mailto:Shelby.Burch@MolinaHealthcare.com">Shelby.Burch@MolinaHealthcare.com</a>
Paramount	United Healthcare	
<b>Sheila Martin</b> 419-887-2043 <a href="mailto:Sheila.Martin@promedica.org">Sheila.Martin@promedica.org</a>	<b>Kathryn Hobson</b> 614-356-2961 <a href="mailto:Kathryn.hobson@uhc.com">Kathryn.hobson@uhc.com</a>	

**COVID-19 Vaccinations**

As Ohio collectively works to promote COVID-19 vaccines across all populations, Medicaid recipients statewide continue to lag in vaccine completion rates by around 20%. On May 7, 2021, Governor Mike DeWine challenged all the Managed Care Plans (MCPs) to band together, with the goal of closing this gap. Using a data-informed approach, the MCPs are leveraging their collective impact to strategically target communities across Ohio to reach members, neighborhoods and cities to promote tailored and accessible COVID-19 vaccine events.

The MCPs are developing a three-pronged approach to reaching all Ohio Medicaid recipients age 18 and older who have not completed a COVID-19 vaccine:

- Large events across counties with low rates of vaccinations and high Medicaid enrollment. These events will center around a “Back to Summer” and “Back to School” theme to engage entire families in COVID-19 vaccine education and completion.
- Smaller, focused outreach to support homebound members, those in outlying or rural areas and vulnerable populations. This outreach will be tailored to the unique needs identified by circumstance and will include partnership with Community Based Organizations, Area Agencies on Aging and other community stakeholders.

- Innovative pharmacy partnerships statewide will provide a comprehensive approach, leveraging both large chain pharmacy capacity and smaller, local pharmacy relationships. An incentive-based payment model will be used to promote pharmacy involvement, with additional potential to take the vaccine into communities most at risk.

Promotion of equity across this approach will remain a key focus. The MCPs have obtained voice of the customer from Community Based Organizations, members, provider partners and partner agencies. Inclusion of this voice, coupled with ongoing data analysis and hot spot identification, will allow the MCPs to promote equitable access to COVID-19 vaccines statewide.

### Questions?

Provider Services – (855) 322-4079  
8 a.m. to 5 p.m., Monday to Friday  
(MyCare Ohio available until 6 p.m.)

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