

Fast Facts

SEPTEMBER 2021

News for Providers from HealthPartners Provider Relations & Network Management

Administrative

Make sure patients can find you

Patients are often seeking to connect with providers. For many, seeing a provider who shares their race, ethnicity or gender is important. This is true for many specialties, but we hear it particularly from those seeking behavioral health providers.

To ensure patients can easily find clinicians in your practice who meet their needs, please update your practice's information in our Provider Data Profile application.

Follow these quick and easy steps:

- Log in at healthpartners.com/provider using your username and password
- Click on **Provider Data Profiles**
- Make updates by clicking on **Edit Practitioner**, including race, country of origin and personal profile

If you need access to the Provider Data Profile application, contact your delegate (located in the help center after you log onto the portal).

Cost, quality, and high value network

In light of COVID-19 and the impact on patient services and visits in 2020, provider measurement has been affected for both cost and quality. Limited access to medical services throughout 2020 caused lower utilization across providers, largely impacting clinic visits and outpatient procedures. Utilization was impacted differently across provider groups based on patient profiles and regional access differences.

To ensure appropriate provider assessments and transparency, Cost, Quality, and High Value Network results from 2021 benefit year will carry over and be maintained for 2022 benefit year. This is in alignment with approaches taken by other measurement bodies to hold harmless, eliminating the impact of COVID in 2020. Please reach out to your Provider Relations Contract Manager with any questions.

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HealthPartners colorectal cancer screening guideline changes

Earlier this year, the United States Preventive Services Task Force (USPSTF) updated their guidelines to lower the beginning recommended **colorectal cancer screening age to 45 years old**. HealthPartners implemented colorectal cancer screening coverage at the preventive benefit level for this new age group *effective to the same date that the USPSTF issued the recommendation – May 18, 2021*. The claims system is already paying these claims at the preventive benefit level which is typically 100 percent.

- Note that there are some plans that are not required to follow ACA preventive care coverage, so it's best for members to contact the Member Services number on the back of their member ID card to confirm coverage.
- Medicare has *not* updated their coverage policy at the time this went to print, so this may impact a small number of members who qualify for Medicare prior to age 65.

HealthPartners is updating our member outreach campaigns to educate those 45 to 50 years old about the importance of colorectal cancer screening.

There is more information about HealthPartners coverage of [Preventive care services](#) on our Provider Portal. If you have questions about these updated guidelines or how HealthPartners is addressing this with our members, please contact quality@healthpartners.com.

Coming soon – Provider Survey

HealthPartners will mail a short survey to a sample of primary care, specialty and behavioral health physicians. The survey assesses satisfaction in two key areas where we continue to focus improvement activities – Continuity/Coordination of Care across care settings and experience with the Utilization Management process for services requiring prior authorization.

If you receive a survey, we encourage you to complete it. Your feedback is important in helping us to identify potential areas of improvement.

If you have questions, please contact Kelsey Folin, Utilization Management, at **952-883-5768**.

Submitting rendering provider on claim forms

Recently we've had instances where the incorrect *rendering provider* or *attending provider* was submitted on a claims form. Some examples of incorrect billing include:

- The clinic owner submitted as the *rendering provider* or *attending provider* on claims even though other licensed providers were actually delivering or managing the care;
- A licensed and credentialed provider submitted as the *rendering provider* on a claim even though another licensed provider actually delivered the care.

Information on submitting *rendering provider* on a claims form can be found in the [HealthPartners Claims Manual](#) (healthpartners.com/provider-public/provider-resource-materials/) and the National Uniform Claim Committee websites: nucc.org and nubc.org.

Medical Policy updates – 9/1/2021

MEDICAL AND DURABLE MEDICAL EQUIPMENT (DME) & MEDICAL DENTAL COVERAGE POLICY

Please read this list of new or revised HealthPartners coverage policies. HealthPartners coverage policies and related lists are available online at healthpartners.com (path: Provider/Coverage Criteria). Upon request, a paper version of revised and new policies can be mailed to clinic groups whose staff does not have Internet access. Providers may speak with a HealthPartners Medical Director if they have a question about a utilization management decision.

Coverage Policies	Comments / Changes
Capsule endoscopy	Effective immediately, policy is retired.

Government Programs

Diabetes Performance Improvement Project

HealthPartners is partnering with the other Minnesota Medicaid plans to reduce disparities in diabetes care. MCOs participating in this collaboration for their respective SNBC, MSHO and MSC+ products include: BCBS, HealthPartners, Hennepin Health, Medica, South Country Health Alliance (SCHA) and UCare.

According to the Minnesota Department of Health (MDH), diabetes is the sixth leading cause of death in Minnesota, and the leading cause of blindness, kidney failure, and lower-limb amputations. In Minnesota, glaring racial and ethnic disparities in diabetes exist that are reflected in the disease's prevalence, complication and death rates, and preventive care received by those who have diabetes.

The Minnesota Community Measurement 2019 Minnesota Health Care Disparities Report highlights two key findings related to diabetes:

- American Indian/Alaskan Native and Black/African American patients with diabetes have the lowest rates of HbA1c control.
- Black/African American and Hispanic patients who have diabetes have significantly lower rates of blood pressure control compared to the statewide average for the Optimal Vascular Care measure.

To reduce disparities in diabetes management, this project will look to the already present best practice approaches to address the many factors that present challenges to these populations—factors such as access to nutritious foods and lack of options for physical activity. We will explore how a collaborative approach between both health care and non-health care services can improve diabetes care. The priority of addressing the social and environmental factors that affect vulnerable populations will be emphasized.

The collaborative is focused on ensuring continual attention to opportunities to include resources that promote health care equity and culturally tailored resources. We will present educational webinars to highlight approaches to supporting people in their diabetes care. Some of the collaborative interventions will be education and training provided for care coordination and development of tools and resources for clinicians, care coordinators and others who support members. The information will be posted on the [Stratis Health website](#) and shared with care coordinators and others via newsletters and informational webinars. The project is also working in partnership with the MDH 2030 Minnesota Cardiovascular Health and Diabetes State Plan.

The MOST important element of comprehensive diabetes care is blood pressure monitoring. Clinicians can support their members by encouraging their patients to monitor their blood pressure at home. **Home blood pressure cuffs are a covered Medicaid benefit for Minnesota Health Care Programs** when the member has a condition that meets criteria. Follow the standard DME process to order a blood pressure cuff for your patients. Other elements include diabetic eye exams, A1c and nephropathy screening. Attention to each of these is critical for optimal diabetes care.

HealthPartners offers supplemental benefits **for MSHO members** that can support them in their diabetes care. The 2021 benefits include foot care visits, health education classes, weight management classes and a tablet with health education materials. For a full list of MSHO benefits, visit the [HealthPartners Medicare website](#).

The following upcoming webinar will discuss how care coordinators/case managers can work with members to control their diabetes in the face of severe illness and social needs.

The Challenges of Achieving Optimal Diabetes Results: Barriers, Disparities and Strategies for Care Coordination Success

Click the link below for more information and to register.

**Tuesday, October 26, 2021
12:00 PM CST**

A blue rectangular button with the text "Info Register" in white, bold, sans-serif font.

Visit the [Stratis Health website](#) for more information and a list of additional webinars.

Provider communication for falls discussion/prevention

Fall Prevention Awareness Week is from September 20-24, 2021, and one way to help our patients avoid falls is through our work on the Medicare **Annual Wellness Visits**.

One of the important topics covered in that visit is asking about falls. According to the Centers for Disease Control and Prevention (CDC) 2018 Statistics, Wisconsin has the highest death rate at 157 per 100,000 in the nation. Minnesota is fourth highest at 124 per 100,000. [Deaths from Older Adult Falls \(cdc.gov\)](#)

Falls are the leading cause of injury-related death among adults age 65 and older with an increase of about 30 percent from 2009 to 2018. The increase was observed in 30 states and the District of Columbia. The fastest growing rate was among adults aged 85 and older (about 4 percent per year) according to the CDC National Center for Injury Prevention and Control.

The age-adjusted fall death rate is 64 deaths per 100,000 older adults according to the 2018 MMWR Morbidity and Mortality Weekly.

The Centers for Medicare and Medicaid Services (CMS) has prioritized this area for the simple reason – falls in the elderly have significant consequences. Medicare health plans are required to survey members asking if they have talked to their doctors about falls and how to prevent them. As clinicians, we should all be ready to initiate conversations/questions with our patients. There are some pretty simple interventions that we can do to help lessen the risk.

- 1) Medication review – you or medication therapy management (MTM) should focus on reducing or removing those medications that affect alertness and balance. Fewer medications and lower doses are always a reasonable approach for seniors.

- 2) Encouraging your patients to remain as active as possible – not only with walking, but also through exercise programs offered by community resources and fitness centers. Balance and strengthening, as well as walking, can make a difference. For more targeted approaches, a physical therapy referral can always be helpful. A simple “Exercise Prescription” can be enough to reinforce to your patients the importance of maintaining activities that will prevent decline in strength and endurance. Please utilize these references available in Minnesota:
 - health.state.mn.us/communities/physicalactivity/paresources.html
 - trellisconnects.org/about/
- 3) Encourage your patients to have regular eye appointments and remind them of the importance of proper-fitting shoes.

Thank you for your involvement in our Annual Wellness Visit work. It will continue to both help our senior patients, as well as ensure our care groups continue to perform successfully in this new Medicare environment.

Tom von Sternberg, M.D.

Below is a resource link from the National Council on Aging which has multiple documents such as caregiver guides, resource lists, falls prevention programs, etc. (ncoa.org/healthy-aging/falls-prevention/)

Healthy Aging Falls Prevention

Provider Portal



Take our annual [Provider portal survey](#) to tell us how we’re doing, what you find helpful, and how else we can help you!

You may also visit HealthPartners.com/providerfeedback to take the survey. This survey is only available for a limited time.

If you have questions regarding the content of this newsletter, please contact the person indicated in the article or call your HealthPartners Service Specialist. If you don’t have his/her phone number, please call **952-883-5589** or toll-free at **888-638-6648**. This newsletter is available online at healthpartners.com/fastfacts.

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