monroe plan
FOR MEDICAL CARE

Monroe Plan for Medical Care IPA
October 2021 Newsletter

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October is National Breast Cancer Awareness Month

According to the American Cancer Society, approximately 1 in 8 women (13%) will be diagnosed with invasive breast cancer in their lifetime and 1 in 39 women (3%) will die from breast cancer. Early detection of breast cancer by mammography reduces the risk of breast cancer death and increases treatment options, including less extensive surgery and/or the use of chemotherapy with fewer side effects, and sometimes, the option to forgo chemotherapy.

American Cancer Society Guideline for Breast Cancer Screening
The recommendations below are for women at average risk of breast cancer*.
- • Women should begin annual screening between the ages of 40 and 44.
- • Women ages 45 to 54 should be screened annually.
- • Women ages 55 and older should transition to biennial screening or continue screening annually.
- ** women without a personal history of breast cancer, a suspected or confirmed pathogenic genetic variation [e.g., BRCA1 or BRCA2], a strong family history, or a history of previous radiotherapy to the chest at a young age*

Please encourage your patients to get screened. Patients may be able to access convenient screening at a mobile mammography unit. See the links below for more information and schedules.
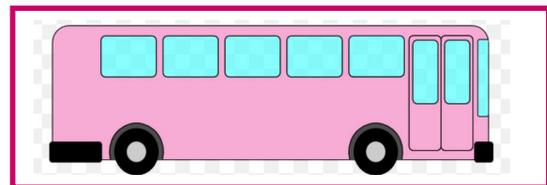
Mobile Mammography Units

Erie County:
Erie County Medical Center Mobile Mammography
Windsong Mobile Mammography

Monroe, Livingston, Wayne, Cayuga Counties:
Rochester Regional Mobile Mammography Unit

MEMBER INCENTIVES
Improve Patient Health and Quality

Molina Healthcare of New York has several incentives that providers can use to encourage hard to motivate or otherwise hesitant patients to stay on top of their preventative health. Breast Cancer Screening is on the list!

How It Works:
1. Molina will send out self-mailer post cards to members who show a gap in care as a reminder to schedule their appointments with providers.
2. The member and/or provider fill out the verification information on the post card.
3. The member mails the completed pre-paid post card in the mail. The reward should be received within 3-6 weeks.

If a member needs a post card, please email **MHNYQuality@molinahealthcare.com.**

Members who complete the following screenings and exams can earn a $25 WALMART GIFT CARD:
Adults:
Adult Well Visits Ages 19 – 64
Breast Cancer Screening (Ages 40+)
Cervical Cancer Screening (Ages 21-64) *discuss testing options with your provider*
Colorectal Cancer Screening (Ages 50-75)
Diabetes (***Note:*** BOTH of the following tests combined must be completed: HbA1c and Eye Exam)
Prenatal (1 visit within the first trimester)
Postpartum (visit 7 to 84 days after birth)

MOLINA CONDUCTING PRELIMINARY HEDIS RECORD REVIEW

Molina is contractually required to collect and provide medical record documentation for our providers to fulfill NYS and federal regulatory and accreditation requirements. From October 5, 2021, to December 11, 2021, Molina Healthcare will be conducting a "Mock HEDIS Audit." This mock audit is similar to the HEDIS data collection that occurs from January to May.

During the week of October 5th, you will receive a a list of patients and the information being requested from their charts. There are several ways to submit the records needed to complete the audit:
1. Grant EMR access to the Molina HEDIS Team
   If your office(s) use an EMR system for medical records keeping, you can arrange for secure "remote" access for the Molina office staff to download the records without inconveniencing your staff. Please contact: Matthew Walker, Senior Program Manager, Phone: (614) 547-3913, Email: Matthew.Walker@Molinahealthcare.com.
2. Fax requested records to 844-226-8084
3. Send requested records via secure email: RegionB_MedRecords@molinahealthcare.com
4. Mail Records to:
   > Molina Healthcare NY
   > Attention: HEDIS Quality Improvement
   > 5232 Witz Drive Syracuse, NY 13212
5. Arrange for onsite record collection- let your rep know and we will arrange.
6. Third Party Vendor- If your office is contracted with a third-party vendor to facilitate, process, and fulfill medical record requests, please use the following reference request number: CIOX/HealthPort: 1965654, IOD: 1622794

Thank you in advance for your help with this project!

WANTED: YOUR FEEDBACK!
Monroe Plan Survey Coming in November

Be on the lookout for a brief, easy-to-complete Monroe Plan Survey in your inbox early November. We are actively interested in learning what we can do differently or better to help your practice achieve its goals. Please take a few minutes to complete the survey so that we can better serve you!

PROPER CREDENTIALING ENSURES PROMPT, ACCURATE CLAIMS PAYMENT

Complete, accurate and up-to-date credentialing is the first step to ensuring that your claims can be paid in a timely fashion and accurately. Help us help you by following the guidelines below!

Facilities:
Molina Healthcare of New York, Inc.'s credentialing program has been developed in accordance with State and Federal requirements and the standards of the National Committee of Quality Assurance (NCQA). If you do not have a current HDO/DO form on file, please complete one at this time. To download the HDO/DO form please go to https://www.molinahealthcare.com/providers/ny/medicaid/forms/fuf.aspx.

Professional Groups:
Professional groups are required to submit updated CAQH forms whenever provider data changes but minimally bi-annually. Please be sure to submit updated CAQH's as appropriate, re-attest and authorize Molina to view the CAQH application. Remember, Molina may need additional information to complete credentialing. If you have questions, contact MHNY Network Operations teams at MHNYNetworkOperations@MolinaHealthCare.Com.

Credentialing FAQ's	Answer
We are a facility; do I credential individual providers or as a facility? **Example:** Physical Therapy Office	Initial credentialing must be completed prior to finalization of a contract for any organization/facility not currently contracted with Molina Healthcare.
I am a professional how do I initiate credentialing?	Molina processes the credentialing. In addition, new provider with an existing contract need to complete a practitioner application. Monroe Plan will update our network data and forward the credentialing application to Molina.
How long does the credentialing process take?	Credentialing can take up to 60 days to complete. Reminder: Once credentialing has been approved with Molina, an approval letter will be sent out with the participating effective date. The facility is considered a non-participating until credentialing is complete.
What can delay my credentialing process?	1. Incomplete form(s), CAQH expired 2. CAQH not updated 3. Failure to attest and authorize Molina to view the application. 4. Failure to include and attach additional information. Such Lability insurance info.

MEET THE MONROE PLAN CLINICAL PERFORMANCE TEAM!

Dr. Joseph Stankaitis, CMO

Samantha Tolbert, Manager, Clinical Performance and Network Relations

Jane Jackson, Clinical Practice Performance and Coding Coordinator

Kaitlyn Brusehaber, Clinical Practice Performance and Coding Coordinator

Wanda Maxwell, Clinical Practice Performance and Coding Coordinator

Michael Chambers, Health Systems Analyst

Susan Meyer, HEDIS QARR Health Systems Analyst

Erin Nelson, Outreach Representative

We are a dedicated group of professionals committed to assisting our network improve performance through:

*Coding Guidance   *Patient Management/Resources   *EMR Optimization

*Quality Dollar Achievement   *Billing Guidance   *HEDIS/QARR Education

*Navigating Managed Care Operations   *Operationalizing Improved Workflows

*Understanding Regulatory Initiatives   *Clinical and Administrative Support

For assistance, please email stolbert@monroeplan.com.
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