

Office Operations

*Keep Patients Covered: Medicaid Renewal Changes
Access and Availability
Timely Filing Guidelines
The Right Information at the Right Time*

Clinical Resources

*Monroe Plan Hosts Quality University
Dr. Matthews on Brain Injury Awareness
March is National Nutrition Month
A Practice Guide to CPT2 Codes
Colon Cancer Awareness Month*

Monroe Plan News

MONROE PLAN GOES LIVE ON LINKEDIN, FACEBOOK, & INSTAGRAM

Click on any title above to jump to that article!



**MONROE PLAN HOSTS QUALITY UNIVERSITY FEATURING...
YOUR PLAYBOOK FOR SUCCESS IN 2023**

Thursday, March 30th at 7:30 a.m.

You won't want to miss this content packed session highlighting all the support tools available to your practice to:

- Optimize CPT2 Codes
- More Easily Close Gaps
- Plan Focused Outreach That Works
- Easily Link Patients to Care Management Services
- Address the Big Barriers to Care including Transportation, Food, Housing, Behavioral Health Needs
- Reduce Administrative Burden

If you have missed the invite, please reach out to quality@monroeplan.com.

A MESSAGE FROM DR. GEORGE E. MATTHEWS, CMO
BRAIN INJURY AWARENESS MONTH

In the United States alone, 5.3 million individuals are living with permanent brain injury related disability. 2.8 million Americans experience traumatic brain injuries in the United States every year.

An understanding of brain injury begins with defining the terminology. Acquired brain injury describes those injuries to the brain that are not congenital, hereditary, or induced by birth trauma. Acquired brain injury is further sub-classified into 2 types. **Traumatic brain injury**, reported to be the alteration in brain function as a result of an external force. Examples of an external force include falls, motor vehicle accidents, sports injuries/concussion, assaults. **Nontraumatic brain injury** include damage to the brain as a consequence of an internal factor (lack of oxygen, pressure from a tumor,

exposure to toxins). Examples of nontraumatic brain injury include stroke, tumor, infectious disease/meningitis, lack of oxygen to the brain from near drowning or heart attack.

In 2020, 176 Americans died from traumatic brain injury each day. Falls are the most common cause of traumatic brain injury. For those individuals over the age of 65, 1 out of 4 experience a fall each year. In children, falls, such as falling downstairs or off a bike, resulted in half of traumatic brain injuries. Unintentional blunt trauma in children (i.e., being hit in the head with a baseball) causes approximately 28% of traumatic brain injury. Car accidents are the #1 cause of traumatic brain injury related death in children over the age of 5.

The impact of brain injury may result in several alterations in lifestyle as a consequence of:

- (a) Behavioral change - changes in social and work interactions or demonstrating impulsive behavior.
- (b) Cognitive impairment - difficulty processing information or making decisions or negative impact to memory, concentration, reading and/or writing.
- (c) Emotional change - depression, anxiety, or anger
- (d) Physical change-motor skills, mobility, and sensory changes (vision or hearing impairment) may result from brain injury.

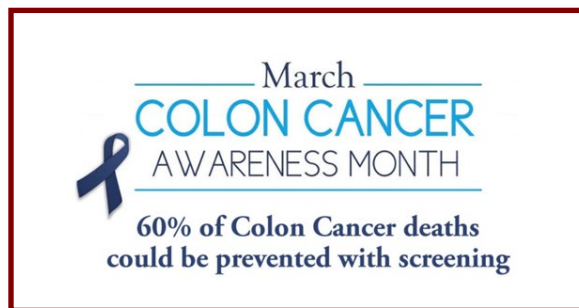
Recovery from significant acute brain injury may require rehabilitation. The purpose of rehabilitation is to assist the individual in regaining skills such as walking or speaking with the ultimate goal to allow the individual to perform their activities of daily living. Rehabilitation is tailored based upon the severity of brain injury and what skills need to be reacquired/relearned.

To learn more about brain injury and treatment, visit:

<https://www.biausa.org/>

<https://www.mayoclinic.org/diseases-conditions/traumatic-brain-injury/diagnosis-treatment/drc-20378561>

COLON CANCER AWARENESS MONTH



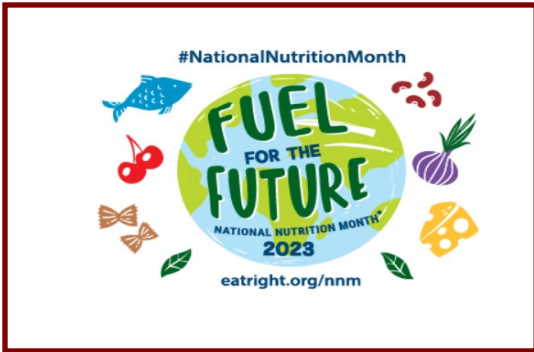
Colorectal Cancer screenings are now recommended beginning at age 45 to detect the cancer earlier, when treatment is most effective. Please speak to your patients and let them know their options.

If a patient is unwilling to have a colonoscopy, the FIT or FOBT test is better than no test at all.

TIPS:

- Have these tests readily available within your practice.
- Exact Science Cologuard® kits can be delivered directly to patients, who then receive follow up by Exact Science.
- Patients may self-report month/year and test type should you not have access to historical information.

NATIONAL NUTRITION MONTH



Food deserts — where nutritious food is often expensive or unavailable — usually occur in low-income, historically marginalized communities. They're marked by high rates of food insecurity, racial and health disparities, and high rates of chronic diseases.

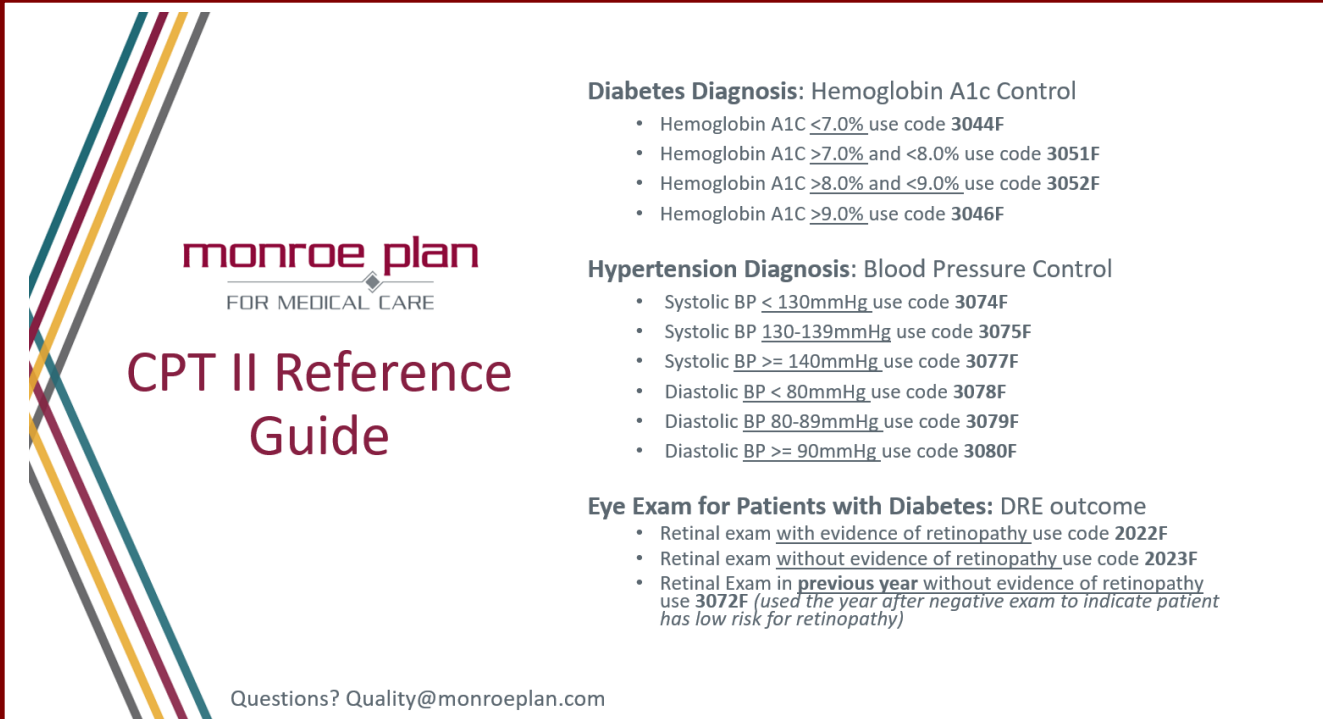
DOUBLE UP FOOD BUCKS
New York offers SNAP recipients the chance to stretch those dollars on nutritious foods.
[Visit doubleupnys.com.](http://doubleupnys.com)

ACCESS AND AVAILABILITY STANDARDS



Medicaid providers must follow appointment availability standards established by the New York State Department of Health. These standards, which apply to all lines of business, are used to improve patient access to routine, urgent, preventive and specialty care. Medicaid providers must also follow 24-hour access standards to measure after-hours access. Learn more by viewing Monroe Plan's [Access and Availability Tip Sheet](#).

A PRACTICE GUIDE TO CPT2 CODES



The image shows the cover of a 'CPT II Reference Guide' from Monroe Plan for Medical Care. The cover features the Monroe Plan logo and the title 'CPT II Reference Guide'. To the right of the cover, there are three sections of text detailing CPT codes for Diabetes, Hypertension, and Eye Exams.

Diabetes Diagnosis: Hemoglobin A1c Control

- Hemoglobin A1C $<7.0\%$ use code 3044F
- Hemoglobin A1C $>7.0\%$ and $<8.0\%$ use code 3051F
- Hemoglobin A1C $>8.0\%$ and $<9.0\%$ use code 3052F
- Hemoglobin A1C $>9.0\%$ use code 3046F

Hypertension Diagnosis: Blood Pressure Control

- Systolic BP $<130\text{mmHg}$ use code 3074F
- Systolic BP $130\text{-}139\text{mmHg}$ use code 3075F
- Systolic BP $\geq 140\text{mmHg}$ use code 3077F
- Diastolic BP $<80\text{mmHg}$ use code 3078F
- Diastolic BP $80\text{-}89\text{mmHg}$ use code 3079F
- Diastolic BP $\geq 90\text{mmHg}$ use code 3080F

Eye Exam for Patients with Diabetes: DRE outcome

- Retinal exam with evidence of retinopathy use code 2022F
- Retinal exam without evidence of retinopathy use code 2023F
- Retinal Exam in previous year without evidence of retinopathy use 3072F (*used the year after negative exam to indicate patient has low risk for retinopathy*)

Questions? Quality@monroeplan.com

HELP ENSURE YOUR PATIENTS STAY COVERED

Medicaid Renewals Resume Regular Rules April 1



Beginning April 1, 2023, NYS Medicaid Eligibility Renewals will resume regular, pre-Public Health Emergency (PHE) rules.

If a patient was eligible for Medicaid prior to the PHE, the patient's renewal date will align with the pre-established renewal date

If a patient became Medicaid eligible during the PHE, the renewal date will be the same month as the month the patient enrolled

Please encourage all patients on Medicaid, EP, or CHP to update their demographic information with the NY State of Health or their local DSS office.

- Call NY State of Health at 1-855-355-5777 (TTY: 1-800-662-1220)
 - Log into your account at nystateofhealth.ny.gov, or
- Sign up to receive text alerts from NY State of Health by texting **START** to 1-866-988-0327

For more information & practice resources, including social media or web promotions, please visit [NY State of Health](https://nystateofhealth.ny.gov).
If your patient receives a renewal letter or loses their coverage and does not know what to do, please reach out to

Quality@monroeplan.com for a list of facilitated enrollers who can assist patients with renewals.

Reminders:

TIMELY FILING GUIDELINES



Claim timely filing rules are as follows: (unless otherwise outlined in the provider's contract)

- **Original Primary** - Clean Claim – **90** calendar days from DOS
- **Secondary Insurance claim** – **90** calendar days after final determination
- **Corrected claim** – **60** days after receiving the remittance advice
 - Corrected Claims are considered new Claims for processing purposes. Corrected Claims must be submitted electronically with the appropriate fields on the 837I or 837P completed. Providers must submit corrected claims within sixty (60) days of receiving the remittance advice. Molina's Provider 162 Portal includes functionality to submit corrected Institutional and Professional claims. Corrected claims must include the correct coding to denote if the claim is Replacement of Prior Claim or Corrected Claim for an 837I or the correct Resubmission Code for an 837P. **Claims submitted without the correct coding will be returned to the Provider for resubmission.**
- **Claim Disputes** – **90** days
 - Providers disputing a Claim previously adjudicated must request such action within ninety (90) days of Molina's original remittance advice date. Regardless of type of denial/dispute (service denied, incorrect payment, administrative, etc.); all written Claim disputes must be submitted on the Molina Provider Appeal Form found on Provider website and the Provider Portal. The form must be filled out completely in order to be processed.
- Additionally, the item(s) being resubmitted should be clearly marked as a Claim Payment Dispute and must include the following:
 - Any documentation to support the dispute
 - The Claim number clearly marked on all supporting documents
 - Copy of Authorization form (if applicable)

Submission Process (3 ways to submit)

- Provider Portal
- Fax: 315-234-9812
- Mail: Molina Healthcare of New York, Inc. Attention: Appeals and Grievances Department 1776 Eastchester Road Bronx NY 10461

Please Note: Requests for adjustments of Claims paid by a delegated medical group/IPA must be submitted to the group responsible for payment of the original Claim.

- **Claim Appeals** – **60** days
Appeals are for clinical denials (authorization related)

**Monroe Plan for Medical Care IPA
March 2023 Newsletter**

- **Molina does not do retro reviews for medical necessity.** If an authorization is denied at the time of request, if an appeal is submitted, it will be upheld as it was originally denied.

THE RIGHT INFORMATION AT THE RIGHT TIME



Please help us ensure that our provider information is correct. Be sure to inform us when your practice has changes such as a location change or provider updates.

Visit the [Provider Resources & Forms – Monroe Plan for Medical Care](#) section of our website. You will have the option to download a PDF version of the form and email the form to pfmemails@monroeplan.com.


Please also verify and update your demographic information on the NPI Registry. Log into your NPI record at <https://nppes.cms.hhs.gov/#/>.

Thank you for helping us ensure we have the most up-to-date information available!

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