

PROVIDER NEWSLETTER

A Newsletter for Senior Whole Health of New York Providers

First Quarter 2022



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Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits. It not only helps to increase patient retention but can also help increase compliance with physician recommendations and improve patient outcomes.

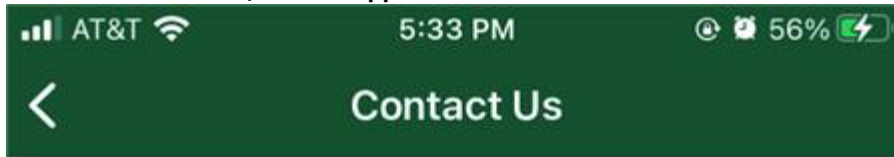
Focusing together on a positive patient experience will have many important benefits to your practice:

- Increase patient retention
- Increase compliance with physician clinical recommendations
- Improve patient's overall wellness and health outcomes
- Ensure preventive care needs are addressed more timely
- Reduce no show rates

Additional resources are available for office staff and patients:

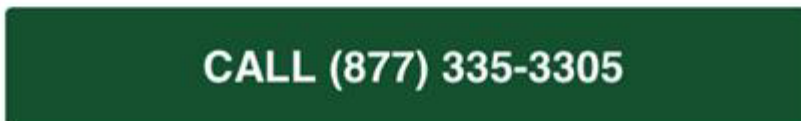
- For additional after-hours coverage, SWH of NY members can call the 24-Hour Nurse Advice Line:
 - Medicaid MLTC: English: (888) 275-8750 Spanish: (866) 648-3537 Deaf and Hard of Hearing: 711
 - Medicare: **(833) 671-0440**

- SWH of NY members can access Interpreter Services at no cost by calling Member Services
Globo 844-311-9777, Mobile App -877-335-3305



CALL US ON OUR TOLL FREE NUMBER

(877) 335-3305
TTY/TDD: (787) 522-8281
7:00 a.m. - 7:00 p.m. local time, Monday to Friday



- Medicaid MLTC: **Globo 844-311-9777**
- Medicare: **(833) 671-0440**
- Providers can access the Availity Essentials portal at Availity.com/MolinaHealthcare to:

- Search for patients and check member eligibility
- Submit service request authorizations and/or claims and check status
- Review Patient Care Plan
- Obtain CAHPS® Tip Sheets
- Participate in online Cultural Competency trainings (also available at SWHNY.com under Health Resources tab)

Please encourage your patients who have received the CAHPS® survey to participate. Listed below are several questions asked in the survey regarding patient care:

- When you needed care right away, how often did you get care as soon as you needed?
- When you made an appointment for a check-up or routine care at a doctor’s office or clinic, how often did you get an appointment as soon as you needed?
- How often was it easy to get the care, tests, and treatment you needed?
- How often did your personal doctor listen carefully to you?
- How often did your personal doctor spend enough time with you?
- How often did your personal doctor explain things in a way that was easy for you to understand?
- How often did you and your personal doctor talk about all the prescription medicines you were taking?
- How would you rate your personal doctor?

SWH of NY’s 2021 Quality Improvement

Senior Whole Health of New York conducts an annual program evaluation to assess how well we meet the performance goals and objectives for improving the quality and safety of clinical care and services specified within the Quality Improvement Program Description and Annual Work Plan. Below are highlights from the annual evaluation.



CAHPS®

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey assesses SWH of NY members’ satisfaction with their health care. It allows us to better serve our members.

SWH of NY has received the CAHPS® results of how our members rated our providers and our services.

Medicaid: In 2021, SWH of NY improved in the following CAHPS measures: Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, Coordination of Care, Rating of Health Care, Rating of Personal Doctor and Rating of Specialist Seen Most Often.

We need to make improvements in Customer Service/Plan Administration and Rating of Health Plan.

HEDIS®

Another tool used to improve member care is the Healthcare Effectiveness Data and Information Set or HEDIS®. HEDIS® scores allow SWH of NY to monitor how many members

are receiving the services they need. Measures include immunizations, well-child exams, Pap tests and mammograms. There are also scores for diabetes care, and prenatal and after-delivery care.

Medicaid: In 2021, SWH of NY improved in Appropriate Testing for Pharyngitis (CWP) - Total, Follow-Up Care for Children Prescribed ADHD Medication (ADD) - Initiation Phase, Follow-Up Care for Children Prescribed ADHD Medication (ADD) - Continuation and Maintenance (C&M) Phase and Appropriate Treatment for Upper Respiratory Infection (URI) – Total.

We need to make improvements in Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - BMI Percentile, Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - Counseling for Nutrition, Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - Counseling for Physical Activity, Childhood Immunization Status (CIS) - Combination #10, Immunizations for Adolescents (IMA) - Combination #2, Breast Cancer Screening (BCS), Cervical Cancer Screening (CCS), Chlamydia Screening in Women (CHL) - Total, Controlling High Blood Pressure (CBP), Comprehensive Diabetes Care (CDC) - HbA1c Control (<8.0%), Comprehensive Diabetes Care (CDC) - Eye Exam (Retinal) Performed, Comprehensive Diabetes Care (CDC) - Blood Pressure Control (<140/90 mm Hg), Prenatal and Postpartum Care (PPC) - Timeliness of Prenatal Care and Prenatal and Postpartum Care (PPC) - Postpartum Care.

Culturally and Linguistically Appropriate Services/Disability Resources

SWH of NY also assesses the cultural, ethnic, racial and linguistic needs and preferences of members on an ongoing basis. Information gathered during regular monitoring and annual network assessment is used to identify and eliminate cultural and/or linguistic barriers to care through the implementation of programs and interventions.

Medicaid: In 2021, a majority of SWH of NY Medicaid members specified English as their preferred language (32%), followed by Spanish (21%) and Cantonese (12%). Spanish was the most requested language among Medicaid members through SWH of NY's interpreter services, followed by Mandarin and Cantonese.

Overall, SWH of NY found that the current Culturally and Linguistically Appropriate Services program resources, structure, and practitioner and community participation are sufficient based on member needs. Additionally, SWH of NY has a series of short Culturally Competency training videos (Health Disparities, LGBTQ+, Immigrants/Refugees, etc.) available on the [Availity Portal](#) and at [SWHNY.com](#) on the Culturally and Linguistically Appropriate Resources/Disability Resources page listed under Health Resources. Disability resources are also available at this location under SWH of NY Provider Education Series: Americans with Disability Act (ADA), Members who are Blind or have Low Vision, Service Animals and Tips for Communicating with People with Disabilities & Seniors.

The progress related to the goals that SWH of NY has set for the annual (CAHPS®) Survey results and the annual HEDIS® measures can be viewed in more detail on the SWH of NY Website. You can also view information about the Quality Improvement Program and print a copy if you would like one. Please visit the provider page on SWH of NY's website at [SWHNY.com](#).

Requirements for Submitting Prior Authorization



Senior Whole Health of New York requires prior authorization (PA) for specific services. SWH of NY offers three tools on the SWHNY.com website to assist you in knowing what services require Prior Authorization:

<https://www.molinahealthcare.com/members/ny/en-us/health-care-professionals/home.aspx>, the PA Guide, and the PA Code Lookup Tool. Both the PA Code

Matrix and the PA Lookup Tool offer detailed information by CPT and HCPCS code regarding PA requirements. The PA Code Lookup Tool is conveniently located available on the “home” page of Provider area of SWHNY.com. Check it out here: [Senior Whole Health of New York \(molinahealthcare.com\)](http://Senior Whole Health of New York (molinahealthcare.com)). The most efficient prior authorization submission method is through our Provider Portal Availity.com/MolinaHealthcare.

When submitting a prior authorization request, it is important to include all clinical information and medical records necessary to support the medical necessity of the requested service/item. The following is an example of documentation needed:

- Current (up to six months) patient history related to the requested service/item
- Relevant physical examination that addresses the medical need for the requested service(s)
- Relevant lab or radiology results to support the request (include previous MRI, CT, lab or X-ray report/results)
- Relevant specialty consultation notes
- Any other information or data specific to the request showing the member meets the criteria for approving the service/item

By providing all necessary clinical information with the initial request, SWH of NY will be able to make a more timely and complete decision based on the member’s current health condition while potentially avoiding a need to request additional supporting documentation. The Urgent/Expedited service request designation should only be used if the treatment is required to prevent serious deterioration in the member’s health or could jeopardize their ability to regain maximum function. Requests outside of this definition will be handled as routine/non-urgent. The goal is to have all necessary information to make the appropriate decision during the initial review of the service/item and avoid the need for an appeal if the service/item is denied.

NOTE: In the event a denial is issued and subsequently appealed, please be sure to reference the original decision. If the denial was due to missing information needed to justify coverage, not providing that information with your appeal request will not change the decision and could further delay medically necessary covered services/items. Let’s work together to ensure timely and appropriate care for your patients.

Strengthening the Primary Care Setting with Trauma-Informed Care

Senior Whole Health of New York is dedicated to promoting the importance of Trauma Informed Practice. According to the National Council for Mental Wellbeing, an “individual’s experience of trauma impacts every area of human functioning- physical, mental, behavioral, social, and spiritual.” Implementing a Trauma Informed Care approach in the Primary Care

setting can benefit providers, members, and office staff alike. The National Council of Mental Wellbeing reports that Trauma-Informed primary care settings can:

- Create safer spaces for staff
- Improve clinical decision-making
- Equip providers to identify and respond to trauma
- Build collaborative care networks to increase provider capacity to address holistic needs

SWH of NY has adopted the guideline for Fostering Resilience and Recovery: A Change Package for Advancing Trauma-Informed Primary Care from The National Council for Mental Wellbeing. For more information, please visit our Clinical Program Guidelines on our provider website or visit the National Council for Mental Wellbeing to access the guideline [here](#).

Secure Messaging from Claim Status Screen Enabled in Availity Essentials Portal

SWH of NY strives to offer tools to provider partners so you can get more done with less effort. SWH of NY now offers an integrated messaging feature from the Claim Status screen in the Availity Essentials portal.

You can submit secure messages from the Claim Status screen directly to SWH of NY using Availity's Messaging Application.

Note: You will need the Claim Status and the Messaging App roles to access this function. If you're an administrator for your organization, you can assign roles by selecting Maintain User from your account dashboard. Then, select the user and View/Edit their roles.

Accessing Secure Messaging: Go to Claims & Payments | Claims Status

1. Initiate a message via the "Message this payer" option on the claim status results page. Important: The message must pertain to the current claim listed on the claim status results page.
2. Allow up to two business days for a response.
3. Access the Messaging Queue from the top right corner of your Availity home page.
4. Conversations display as cards. The color of the cards indicates the status.
5. All users have sorting and filtering options. If a message is missing from your queue, clear your filter options

Availity's Messaging App is a faster, more effective platform for resolving simple queries. The next time you SWHNY-Provider Relations NY <SWHNY-ProviderRel-NY@MolinaHealthCare.Com> have a question about the status of a claim, try messaging.

Customer Support: If you have questions about Messaging from Claim Status, you can reach Availity Client Services at (800) 282-4548 from 7 a.m. to 7 p.m. CT, Monday through Friday.

Additional Questions? We're here to help. Contact your **Provider Services Representative @ SWHNY-Provider Relations NY** SWHNY-ProviderRel-NY@MolinaHealthCare.Com

Availity Essentials Portal: We continue our transition to the Availity Essentials portal, a tool that streamlines your claims management, authorizations, and eligibility/benefit verification. Are you registered yet? [Click here](#) to get started.

Clinician Administered Preferred Drug List 2022

A clinician-administered drug is an outpatient drug other than a vaccine that is typically administered by a health care provider in a clinician’s office or other outpatient clinical setting. For example, drugs that are infused or injected are typically clinician-administered drugs.

The Senior Whole Health of New York by Molina Healthcare Medical Preferred Drug List encourages utilization of clinically appropriate and lower net cost products within the following therapeutic drug classes. The SWH of NY Medical Preferred Drug List includes the listed products only and other product may be available under a plan’s medical benefit. The listed preferred products must be used first. An exception process is in place for specific circumstances that may warrant a need for a non-preferred product.

Medicaid Medical Preferred Drug List- Through October 2022

Drug Class	Non-Preferred Product(s)	Preferred Product(s)
Alpha-1 Antitrypsin Deficiency	Aralast® (Alpha-1-Proteinase Inhibitor), Glassia® (Alpha-1-Proteinase Inhibitor), Zemaira® (Alpha-1-Proteinase Inhibitor)	Prolastin C® (Alpha-1-Proteinase Inhibitor)
Hematologic, Colony Stimulating Factors – Short Acting	Granix® (tbo-filgrastum) Leukine® (sargramostim) Neupogen® (filgrastim) Nivestym® (filgrastim-aafi)	Zarxio® (filgrastim-sndz)
Hematologic, Colony Stimulating Factors – Long Acting	Fulphila™ (pegfilgrastim-jmdb), Udenyca® (pegfilgrastim-cbqv), Neulasta® (pegfilgrastim) Nyvepria™ (pegfilgrastim-apgf)	Ziextenzo® (pegfilgrastim-bmez)
Infliximab	Remicade® (infliximab)	Inflectra® (infliximab-dyyb) Renflexis® (infliximab-abda) Avsola™ (infliximab-axxq)
Lysosomal Storage Disorders – Gaucher Disease	VPRIV® (velaglucerase alfa) Elelyso® (taliglucerase alfa)	Cerezyme® (imiglucerase)
Multiple Sclerosis (Infused)	Lemtrada® (alemtuzumab)	Tysabri® (natalizumab) Ocrevus® (ocrelizumab)
Osteoarthritis, Viscosupplements	Gelsyn-3® (sodium hyaluronate 8.4mg/ml) GenVisc® 850 (sodium hyaluronate) Hyalgan® (1% sodium hyaluronate) Hymovis® (hyaluronic acid 8mg/ml) Orthovisc® (1% sodium hyaluronate) Supartz® FX (1% sodium hyaluronate)	Euflexxa® (1% sodium hyaluronate)

	TriVisc®(sodium hyaluronate) Visco-3® (1% sodium hyaluronate) Synvisc® (hylan (Avian) 8 mg/mL)	
Oncology	**Avastin® (bevacizumab)	Mvasi™ (bevacizumab-awwb) Zirabev® (bevacizumab-bvzr)
	Herceptin® (trastuzumab) Herceptin Hycelta™ (trastuzumab and hyaluronidase-oysk)	Herzuma® (trastuzumab-pkrb) Kanjinti™(trastuzumab-anns) Ogivri™ (trastuzumab-dkst) Ontruzant® (trastuzumab-dttb) Trazimera™ (trastuzumab-qyyp)
Paroxysmal Nocturnal Hemoglobinuria	Ultomiris® (ravulizumab-cwvz)	Empaveli® (pegcetacoplan)
Rituximab	Rituxan® (rituximab) Rituxan Hycela®(rituximab-hyaluronidase)	Truxima®(rituximab-abbs) Ruxience®(rituximab-pvvr) Riabni™ (rituximab-arrx)
Retinal Disorders (Eye)	Eylea®(aflibercept) Lucentis® (ranibizumab)	**Avastin® (bevacizumab)