

Medicare and Medicaid quality news

Helping you close gaps in care with tools, resources and member engagement campaigns

Summer 2024

★ Medicare quality

Close your patients' care gaps for colorectal cancer screening and increase your PIP incentives with ExactSciences at-home test kits

We've partnered with ExactSciences to provide at-home colorectal cancer test kits so your patients can manage their colorectal cancer screenings from the comfort of home.

How does the colorectal cancer screening program work?

- We'll use claims data to identify Medicare members due for their colorectal cancer screenings. Then, we'll send you a target list of your patients who qualify to receive an at-home Cologuard® test kit and will work with you to determine if any of your patients should be excluded from the target list for medical reasons.
- Once the target list has been approved, Exact Sciences will mail your targeted patients a free Cologuard test kit.
- The patient will complete their at-home Cologuard test and mail it back to ExactSciences. ExactSciences will cover all shipping costs.
- When ExactSciences receives the lab results, they'll mail the results to the patient and their PCP within two weeks.
- If the patient's result is positive, Exact Sciences will contact them by phone and/or a letter to discuss results and encourage them to schedule a follow-up appointment with their PCP.

Have questions about ExactSciences or at-home colorectal cancer screenings?

Contact the Priority Health Medicare Quality Department at phmedicarequality@priorityhealth.com or reach out to your Provider Strategy and Solutions consultant.

Health Outcomes Survey (HOS) season is here

We'll be contacting some of our Medicare members, selected at random, to discuss the importance of HOS survey participation, and how the results help shape the benefits we offer and the overall direction of care for the Medicare population.

Why is HOS important? HOS assesses how health plans and providers are working together to maintain or improve the health of their Medicare members/patients. The survey questions discuss patient-physician relationships and patients' access to benefits and care. Results are used to assess the overall health of the Medicare population, identify areas for improvement in our Quality programs and evaluate the treatment outcomes of patients.

Below are HOS topics we encourage you to discuss with your patients, along with programs and resources that can help.

- Improving or maintaining physical health
- Improving or maintaining mental health
 - [Brain HQ](#)
 - Companion care with [Papa](#)
- Management of urinary incontinence in adults
- Physical activity in older adults
 - [Silver Sneakers](#)
- [Fall risk management](#)

Comprehensive care for your patients with diabetes

How to close HEDIS care gaps for your diabetic patients.

We're halfway through the 2024 HEDIS measurement year. To optimize patient outcomes and close care gaps for the HEDIS Comprehensive Diabetic Care (CDC) measure, be sure to order the following tests, by the end of the measurement year, for your Medicare patients with type 1 or 2 diabetes.

- A glucose management indicator test or an HbA1c test
 - Your patient is considered controlled or uncontrolled based on the following metrics:
 - A lab result of <8% is considered controlled
 - A lab result of >9% is considered uncontrolled
- A retinal exam
- A kidney health evaluation using:
 - An Estimated Glomerular Filtration Rate (eGFR)
 - A Urine Albumin-Creatinine Ratio (uACR) identified by either of the following:
 - A uACR lab test**OR**
 - Both a quantitative urine albumin test and a urine creatinine test **with service dates four days or less apart during the measurement year**
- A blood pressure test
 - Your patient is considered controlled based on the following metric:
 - A result lower than 140/90 is considered controlled

We're committed to improving the health outcomes of our Medicare members through outreach and education and by working to alleviate barriers to care. Check out our [2024 Medicare outreach calendar](#) for information on outreach initiatives, goals, timing and incentives.



Get our quarter 3 Quality HEDIS measure spotlight

Tips for optimizing patient outcomes and closing care gaps in the Kidney Health Evaluation (KED) measure.



Annual Comprehensive Medication Reviews (CMRs) can improve the health of your patients and increase your earnings in our PIP medication adherence incentive.

We encourage you to perform a yearly CMR for your diabetic patients to assess their medication use and identify and monitor issues. Medication adherence in your patients optimizes health outcomes and can increase your earnings in our PIP program. **Is your patient having trouble with adherence?** Consider switching their medication refills from 30 days to 90 days. This allows for fewer prescription refills throughout the year and can help keep patients adherent for longer.

Medication adherence reports are back and have been enhanced to help you more easily monitor the adherence status of your Medicare patients. These reports are sent at the end of each month and help you identify your patients that are no longer adherent to their medications or at risk of becoming nonadherent. Not receiving our medication adherence reports? Contact your ACN's Provider Strategy and Solutions Consultant to be added to our list of recipients.

Priority Health provider resources

- [2024 HEDIS® Provider Reference Guide](#) – A comprehensive guide to help you and your practice better understand HEDIS®.
- [Statin Use in Persons with Diabetes \(SUPD\)](#) – Best practices for closing care gaps in the SUPD measure with information on how to talk to your patients about statins and monitor their medications for adherence.
- [Medication adherence in patients with diabetes, hypertension, and high cholesterol](#) – Information on how to succeed in the medication adherence measure, and tips for ensuring your diabetic patients are taking the most effective and affordable drugs, at the right time.



 Medicaid quality

August is National Immunization Awareness Month

We're committed to ensuring the health and safety of our communities through vaccine education and awareness. Throughout the year, we contact our Medicaid members via phone calls and text messages to remind them of the importance of immunizations, offer education to combat negative stigmas surrounding vaccines and help them schedule appointments with their PCP.

We're working alongside you to increase awareness of immunizations and lead screening across the state of Michigan.

We're proud to have partnered with BrilliantDetroit to help educate local Detroit families and neighborhoods on the importance of on-time immunizations and the requirements for blood lead screening and testing. Organizations interested in partnering with Priority Health for free community education on topics like immunizations and lead screenings can contact stephanie.esters@priorityhealth.com.

Get free vaccines for your Medicaid eligible patients, ages 0-18, with the Vaccines for Children (VFC) program.

The [VFC program](#) provides you with all routine vaccines for your Medicaid eligible patients, ages 0 through 18, at no cost to you. This is a federally funded program offered through the Michigan Department of Health and Human Services (MDHHS).

Join us on August 29 for our Q4 Medicare/Medicaid Quality campaigns webinar for information on topics like closing Quality care gaps, member outreach and incentives, annual Quality surveys and more.



To learn more about the VFC program, get our [VFC Program Provider Toolkit](#).

Don't have time to browse the toolkit? Check out our [VFC Program handout](#) for an overview of the program and how it supports you, your patients and your practice.



Extra care for moms and babies

We understand the excitement and challenges that come from pregnancy and early motherhood. We want to work alongside you to ensure your patients - our members - feel secure and supported. **Here are some resources that can help:**

- ✓ [PriorityMOM](#)
- ✓ [PriorityBaby](#)
- ✓ [Other maternity and infant care programs and services](#)

As a reminder, MDHHS offers Medicaid members [12 months of continuous postpartum coverage](#), which includes access to physical and behavioral health services, substance use disorder treatment, dental care and more.

Reminding members to schedule their dental appointments

We're contacting Medicaid members via phone calls, text messages or email to educate them on the importance of dental health. **Our outreach covers topics like:**

- Scheduling a preventive screening with their dentist.
- Completing a dental diagnostic screening for members who've recently had an emergency department (ED) visit. Medicaid members who complete a diagnostic screening within 90 days of their ED visit may be eligible to receive a gift card.
- Scheduling a preventive screening during pregnancy or within 90 days postpartum.
- Providing information on dental coverage, dental health and a calendar of community education events for our new members.

As a reminder, we offer dental coverage through Delta Dental for our Medicaid members, ages 19 and up. Members can visit <https://www.providers4you.com/Medicaid> to find a dentist in their area. Medicaid members under 19 have access to care through the [Healthy Kids Dental program](#).

Providers are encouraged to discuss the importance of dental health with their patients, and to educate them on the link between dental health and overall health.

