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Claims Submission Reminders

Submitting claims correctly is the most important part of being a MDwise provider. Educating MDwise providers on how to properly submit these claims is one of the most important aspects of being part of the MDwise Provider Relations and Claims teams. When submitting a claim to MDwise, be sure that your claim form (CMS 1500 and UB-04) is filled out completely.

Here are a few questions to answer before you submit your claim for processing:

• Is your Provider information up to date with the state AND MDwise?
• Did you use the most specific ICD-10 CPT/HCPCS code for the service(s) rendered?
• Are appropriate modifiers and place of service codes listed?
• Have I included the providers NPI number in the required field?

Verifying that the form and its contents are correct before submitting can save time and frustration in the long run. After confirming the claim is completely and correctly filled out and ready to submit, go to MDwise.org/for-providers and check out the Quick Contact Guide to make sure you submit the claim to the correct address.
RIDEwise

Providers may sometimes assist members in setting transportation for their health care visits. MDwise is working to make this easier. In the coming months MDwise will work to update our IVR so providers have an option to reach Ride Right, the MDwise Transportation Broker, when they call MDwise. Providers will be able to work with Ride Right to set up transportation for eligible members who do not have access to their own form of transportation.

To set up a trip, Ride Right will need information such as the date and time of the trip, the pick-up and drop off addresses, the reason for the trip and any specific accommodations. In most cases, Ride Right will be able to set the trip at the time of the call.

If a member has exceeded their number of allowed trips or the trip is more than 50 miles, Ride Right will create a prior authorization and send it to the correct delivery system for approval. Ride Right will reach out to the member and let them know if the trip is approved. If you have any questions on the transportation process contact MDwise customer service at 1-800-356-1204 and choose the Provider Services option to speak to a MDwise Customer Service Representative.

Scheduling a Ride:

1. Have member ID card ready when calling to schedule a ride.

Please gather this information from the member:
- Address and phone number.
- The date and time of the visit and the time it will end.
- The name, address and phone number of the doctor, dentist or clinic.

2. Call MDwise customer service at 1-800-356-1204 to reserve a ride. Listen carefully and pick the transportation option.

Lead and Healthy Homes Program for Indiana

Today, children in at least 4 million households are exposed to high levels of lead. There are approximately half a million U.S. children ages 1-5 with blood lead levels above 5 micrograms per deciliter (μg/dL), the reference level at which the CDC recommends public health actions be initiated.

There is no safe blood lead level for children. Lead exposure can affect nearly every system in the body. Because lead exposure often occurs with no obvious symptoms it frequently goes unrecognized. CDC’s Childhood Lead Poisoning Prevention Program is committed to the Healthy People 2020 goals of eliminating blood lead levels > 10 μg/dL and differences in average risk based on race and social class as public health concerns.

Children must be tested to fix the problem caused by lead poisoning. The state of Indiana requires lead poisoning tests for all children on Medicaid at ages 12 and 24 months and between ages 3 to 6, if not previously tested. If you have any questions about your MDwise children who need lead testing, please call customer service at 1-800-356-1204 or 317-630-2831.
Updates:

IHCP Updates
The IHCP First Quarter Provider Workshops began February 22. There is still time to sign up and attend the remaining workshops to receive updates from FSSA, Indiana Medicaid and all the Managed Care Entities! For more information on the workshops and how to sign up, visit the Indiana Medicaid Provider webpage.

Prior Authorization Updates
Effective April 1, 2018, MDwise will update the list of codes that require a prior authorization. MDwise would also like to announce changes in the coverage of medications under the medical and pharmacy benefits for the MDwise HIP & HHW plans. These updated lists can be found on the MDwise Provider homepage under News and Announcements. Should you have any questions or concerns, please contact MDwise at 1-800-356-1204.

Behavioral Health Provider Updates
There is a new way to reach MDwise Behavioral Health! Email bhticket@mdwise.org with all behavioral health provider inquiries, credentialing, enrollment and general questions. You will receive a ticket number to reference and the email will be routed to the appropriate behavioral health team member.

MDwise has added a clinical care guideline for practitioners regarding Chronic Muscular/Skeletal pain. The guideline reviews signs, symptoms and standards of care. You can find that, and other clinical practice guidelines, on the MDwise website.

There have been many changes to the benefits related to substance use disorders. Please contact your behavioral health provider relations representative if you have questions.
Notification of Pregnancy

The Office of Medicaid Policy and Planning (OMPP) developed the Notification of Pregnancy (NOP) form to improve birth outcomes for pregnant women in the Hoosier Healthwise and Healthy Indiana Plan programs. NOP is a short risk assessment completed on CoreMMIS that identifies pregnant women and some of the potential health risks that contribute to poor birth outcomes. The risk assessment includes questions about maternal and obstetrical history, mental health, substance abuse and social risk factors. MDwise will use this information to identify pregnant women and connect them with case and care management services that will provide education and care coordination to improve their birth outcome. Our case and care management staff can support the provider and the plan of care they have developed with the member.

Recognized MDwise providers are eligible for reimbursement of $60 upon submission of the NOP via CoreMMIS. To receive reimbursement from MDwise the following must be met:

- The pregnant woman must be enrolled in MDwise Hoosier Healthwise or HIP.
- The woman’s pregnancy must be less than 30 weeks gestation.
- The NOP must be submitted via CoreMMIS.
- The NOP is required to be submitted within FIVE CALENDAR DAYS from the date the risk assessment was completed in the provider’s office.
- Only one NOP can be submitted per member, per pregnancy to be eligible for reimbursement.
- Presumptively eligible (PE) pregnant women are eligible for this service.

Providers must bill the pregnant woman’s assigned MDwise delivery system for reimbursement of a successfully completed NOP. Providers should use CPT code 99354 and modifier TH. The date of service should reflect the date the provider completed the risk assessment with the pregnant woman.

Managing Patients with Airway Disease

Help us to help your patients have better control of their airway disease. This means ensuring they are on appropriately prescribed asthma controller medications, such as long-acting inhaled Corticosteroids, and that they remain on the appropriately prescribed medications during the Treatment period.

Recently, MDwise started a pilot project with the goal of identifying patients with airway disease who may not use their medications appropriately. MDwise will review medical claims data and pharmacy records to identify members who are not adherent with medications. Adherence rates are calculated by the Proportion of Days Covered (PDC) from the pharmacy records. Members with lower than 80% use may lack the correct number of refills on one or more of the following kinds of medications:

- Short-acting or Long-acting inhaled beta-2 agonists.
- Inhaled steroid combination.
- Inhaled corticosteroid.
Managing Patients with Airway Disease – Continued

Once members are identified a letter is sent to their provider to inform them which members may be non-compliant and provide the prescription refill history of their patients. We hope these letters will be informative for treatment planning. The goal is for providers to encourage identified members to get their medications filled as appropriate.

We always encourage providers to educate patients about when it is appropriate to use the Emergency Department or Urgent Care facilities. MDwise care management teams contact members who over utilize or inappropriately use emergency department services. We also provide newsletters, special mailings and other education to our members.

Help Your Patients to Quit Smoking or Using Tobacco

The MDwise medical benefit covers tobacco cessation services for HIP and Hoosier Healthwise members in the form of tobacco cessation counseling services. These services, in coordination with pharmacotherapy that is available under the pharmacy benefit program, can be very effective in helping MDwise members to quit tobacco use. The Public Health Service of the United States Department of Health and Human Services developed best practice guidelines for providers in assessing tobacco users and rendering effective tobacco dependence interventions**. The guidelines encourage providers to utilize the “5 As” model for treating tobacco use and dependence:

Providers talking with their patients about the risks of smoking is most impactful. Discussions should occur at every encounter. Please be sure to include in each discussion the “5 As”:

• Ask about and document tobacco use at every visit.
• Advise in a clear, strong and personalized manner to quit.
• Assess current users for willingness to make an attempt to quit. For ex-smokers, determine how recently they quit and if they have any challenges remaining abstinent.
• Assist patients willing to attempt quitting by offering nicotine replacement therapies and providing or referring the patient for counseling or behavioral treatment to help the member quit. This includes the Indiana Tobacco Quitline that patients can reach by phone at 1-800-quit now (1-800-784-8669) or by mobile phone or computer at Text2Quit. For members who are not willing to quit at this time, provide motivational intervention designed to increase future quit attempts. For those who recently quit and have remaining challenges provide relapse prevention.
• Arrange for all members receiving the previous A’s, steps for follow-up.

Contact Indiana Quitline to become a preferred provider. You can also refer members via fax by using the form on the MDwise website: Tobacco Cessation Toolkit.

Health Literacy

According to the 2012 National Assessment of Adult Literacy (NAAL), 36% of adults living in the United States either had “limited” health literacy or were unable to be measured because language barriers prevented participation in the assessment. Thirty percent of our youth do not graduate from high school and this number has not changed in 30 years. Adults living at or below 125% of the federal poverty level (FPL) had a much lower average health literacy score than adults with higher income levels.

Health literacy impacts an individual’s ability to successfully manage their health and health care. Research shows literacy is a stronger predictor of health status than age, income, employment status, education level or racial and ethnic group. Unfortunately, evidence shows that patients often misinterpret or do not understand much of the information given to them by clinicians.

Communication barriers caused by poor health literacy can lead to a misunderstanding of health care instructions, prescriptions and poor health outcomes and medical errors. For example, patients who must self-manage chronic diseases such as asthma or diabetes will have poorer outcomes if they cannot understand written instructions for using metered-dose inhalers or for monitoring and recording their own blood sugar levels; an infant with an ear infection will not benefit from treatment if her mother cannot understand that the antibiotic the clinic prescribed is to be given orally, not put in the child’s ear.

Some tips to improve interpersonal communication with patients:

1. Slow down.
2. Use plain, non-medical language.
3. Focus on need to know and need to do.
4. Show or draw pictures.
5. Limit the amount of information provided and repeat it.
6. Use the teach-back or show-me technique.
7. Create a shame-free environment and use patient friendly and culturally appropriate materials.

Additional information can be found on the MDwise website.