



WINTER 2024

PROVIDER *Source*

A Newsletter for Michigan Medicaid and MI Health Link

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HAP CareSource™

Chief Medical Officer's Note



As we approach year end, thoughts always turn to the new year and resolutions we all make. As trustees of our members' and your patients' well-being and health, it is important to prioritize ways in which we can improve them. Ensuring immunizations are up to date is particularly important this time of year. A surprising number of people, despite numerous public service announcements and recommendations, defer flu vaccinations or avoid them altogether. Many would comply with receiving them if they received that recommendation from their physician. Other preventive services should also be addressed this time of year, and any chronic health condition documented in the patient's medical record. This is important not only for completeness of medical records, but also to ensure that any chronic condition as well as any preventive services provided are documented in the patient's records at HAP CareSource.

Documentation of quality medical care is critical to receiving high ratings for both our health plan and provider networks. That credit is reflected in Star ratings for the plan, as well as quality ratings for providers. This documentation, including documenting closure of gaps in the provision of preventive health services, is important in demonstrating compliance with nationally recognized measures of health quality. Such items as eye examinations and Hemoglobin A1C measures for diabetics, screening for colon cancer for age and risk-appropriate individuals and recommended immunizations for age and gender-appropriate patients, as well as screening for cervical cancer for women, among others are all important measures of quality.

In addition, ensuring that patients receive health services in the most appropriate and efficient setting is important in improving compliance with recommended health services. HAP CareSource supports utilizing alternative sites for care when appropriate to increase convenience as well as potentially decrease cost for many services. One such example is in supporting those patients who receive regular infusions of medication, such as for cancer therapy, by providing those services in the home. Those services are provided by specially trained nurses, under your supervision, in a convenient, comfortable environment, familiar to the patient. This is not only safer in many instances, but less costly than in a physician's office infusion center, or hospital setting. Offering these alternative sites to your patients not only can improve compliance, but significantly decrease the anxiety and inconvenience of having this treatment in a traditional setting, and HAP CareSource encourages doing so. Another service to consider offering for many surgical procedures is performing them in a free-standing surgical center as opposed to an outpatient hospital environment. Once again, this is often not only more convenient for patients, but less costly for the patient in many instances.

As we reach the end of the year, we at HAP CareSource appreciate and thank you for all you do, all year long for our members and your patients, and wish you all a wonderful holiday season and a successful and happy New Year.

Sincerely,

Dr. Lori Billis
Medical Director – Michigan

The material in this newsletter applies to HAP CareSource™ and HAP CareSource™ MI Health Link (Medicare-Medicaid Plan). When stating "HAP CareSource," the content applies to both plans – Medicaid and MI Health Link, unless otherwise noted.





Another Year in the Books!

With 2025 here, we want to reflect on 2024 and thank you for partnering with us. It was a busy and successful year, and we couldn't have done it without you. Thanks for all you do to support our members and joining us in this journey of making a difference in our members' lives!

Network Notification Bulletin

UPDATES



HAP CareSource regularly communicates operational updates on our website. Our goal is to keep you updated with a format that is quickly accessible and that keeps you informed about working with us. Here were some network notifications posted from the previous quarter that you may have missed:

- Medicaid – [Evolent Healthcare Advanced Radiology 2025 Annual Policy Updates](#)
- MI Health Link – [Macomb Prepaid Inpatient Health Plan \(PIHP\)](#)
- MI Health Link – [Reminder – Prior Authorization Requests and Appeal Process for Part B \(Medical Drugs\)](#)

Network notifications can be accessed at [HAPCareSource.com](#) > Providers > [Updates & Announcements](#).



Meet Marketplace!

We are excited to announce the launch of HAP CareSource Marketplace on January 1, 2025! Life is complicated. Health insurance shouldn't be. That's why all HAP CareSource Marketplace plans are simple and affordable with coverage for pre-existing conditions and no annual or lifetime dollar limits for essential health benefits. With this plan, members will receive affordable health insurance that covers what they need, when they need it. For more details on the Marketplace plan, check out our [HAP CareSource webpage](#).

In the Know About Annual Dental Visits

> Childhood Dental Visits

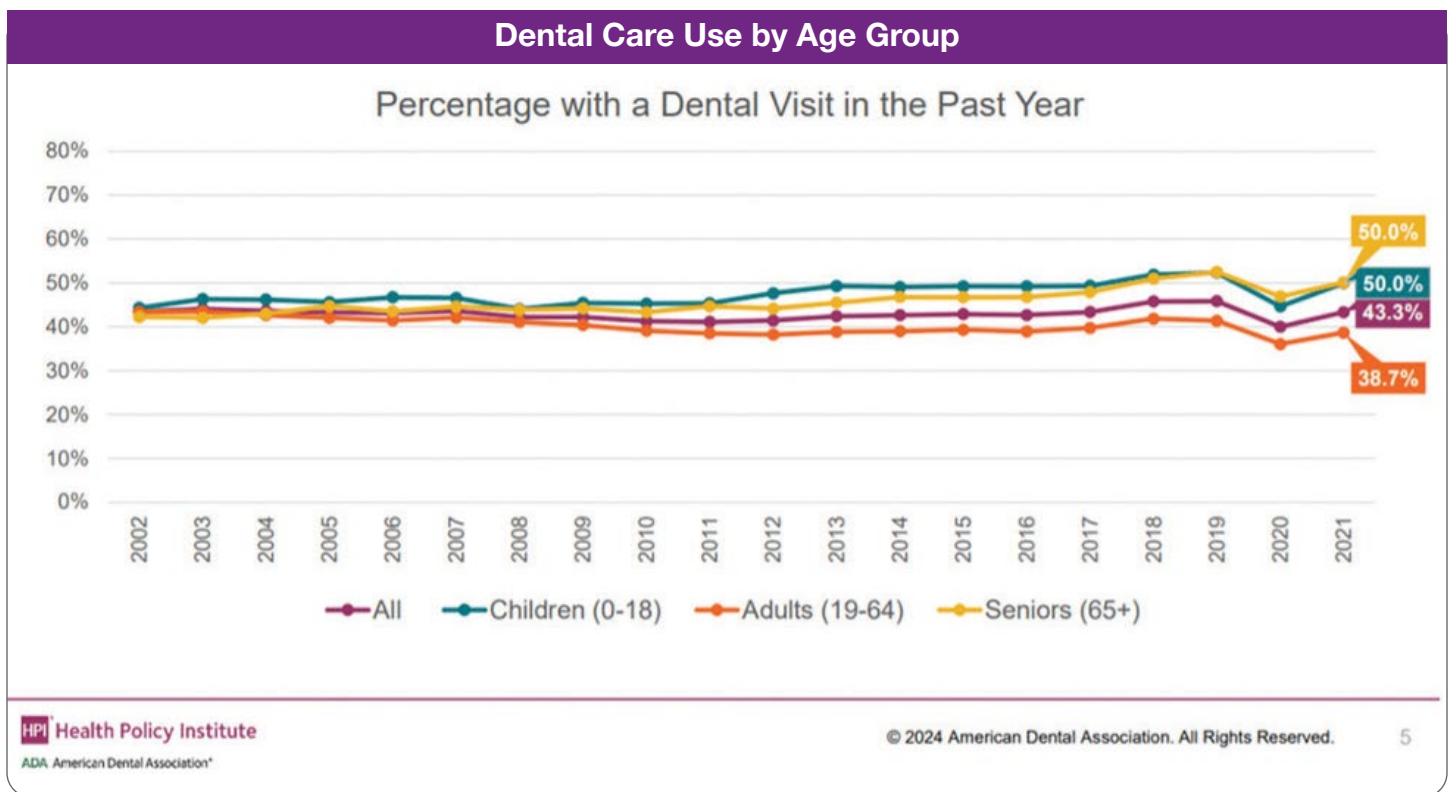
Approximately 25% of our nation’s children have multiple cavities. Tooth decay is a major cause of tooth loss in children. Oral health is essential to overall health. Annual dental visits and oral care throughout childhood and adolescence can significantly reduce the risks of developing oral disease. (NCQA, 2023)

> Oral Health During Pregnancy

Pregnancy brings significant physiological changes that can affect oral health. Maintaining oral health is crucial during this time. Dental treatments are safe and important for overall well-being. Counseling women on good oral health habits can help reduce the transmission of cavity-causing bacteria to infants and young children.

Did you know?

According to the American Dental Association in the National Health Institute 2023 data analysis, an estimated 43% of the U.S. population visited a dentist in 2021. While 50% of seniors and children visited a dentist in 2021, only 39% of adults ages 19-64 saw a dentist. The disparities are generally smallest for children. Please help HAP CareSource raise awareness of the importance of oral health and include those conversations in your annual wellness visits for members of all ages.



References:

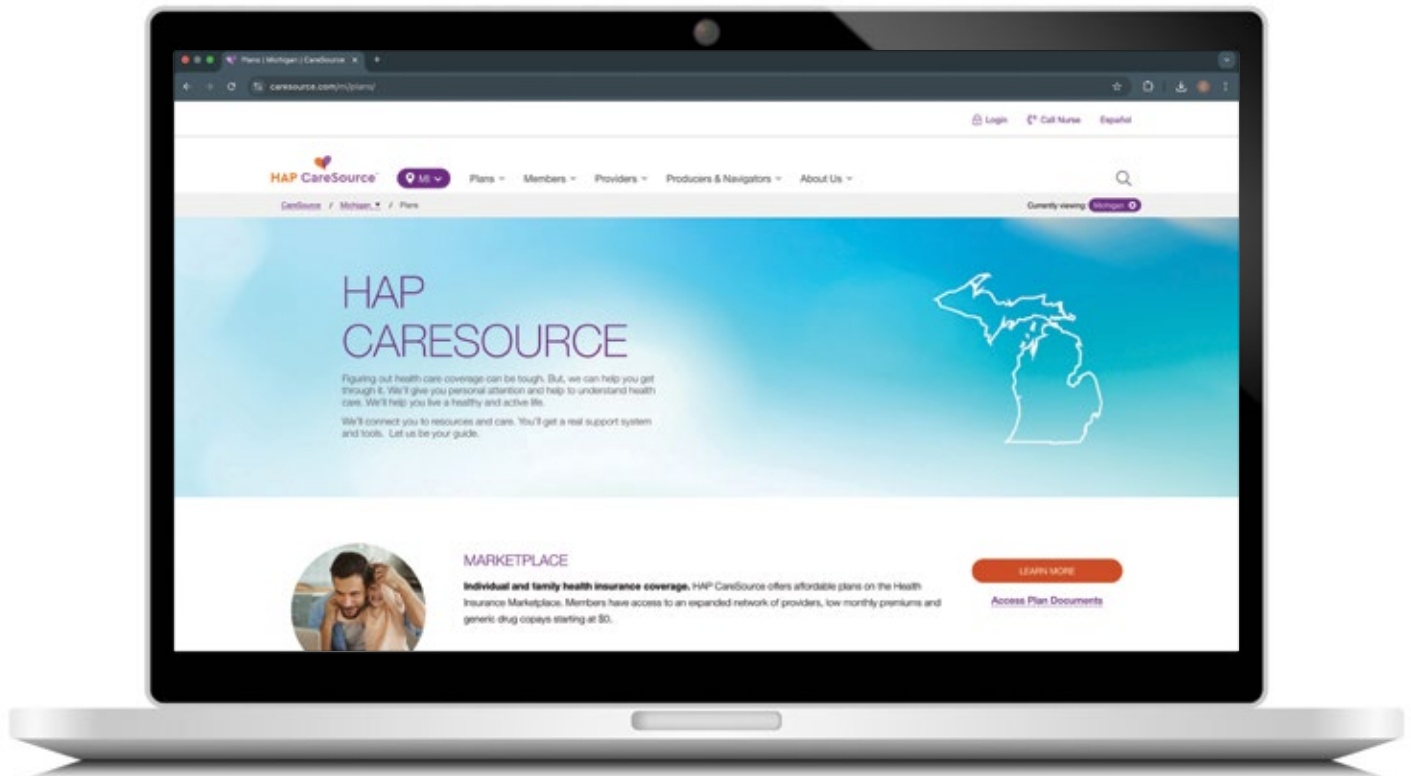
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2. OralHealthPregnancyConsensus.pdf (mchoralhealth.org) <https://www.mchoralhealth.org/PDFs/OralHealthPregnancyConsensus.pdf>
3. OralHealthPregnancyHandout.pdf (mchoralhealth.org) <https://www.mchoralhealth.org/PDFs/OralHealthPregnancyHandout.pdf>
4. Cha AE, Cohen RA. Urban-rural differences in dental care use among adults aged 18–64. NCHS Data Brief, no 412. Hyattsville, MD: National Center for Health Statistics. 2021. DOI: <https://dx.doi.org/10.15620/cdc:106856>.
5. National Trends in Dental Care Use, Dental Insurance Coverage, and Cost Barriers (ada.org)





New Member Tool: Interactive Health Library

We are excited to announce a new health education tool for our members. The Interactive Health Library is a member facing self-service website. It contains a variety of topic-specific articles and interactive tools such as quizzes to help members learn more about their condition(s), promote healthy habits, reduce stress and encourage emotional wellbeing. Not only can members learn about specific conditions or treatments, but they can look up healthy recipes by dietary considerations, find fitness tips, support smoking cessation efforts and much more. Members can access this tool via **HAPCareSource.com** > Members > Education or through their member portal.





A Few Facts on the False Claims Act

The False Claims Act (FCA) is a federal law that prohibits a person or entity from:

- Knowingly presenting a false or fraudulent claim for payment
- Knowingly using a false record or statement to get a claim paid
- Conspiring with others to get a false or fraudulent claim paid
- Knowingly using a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property

"Knowingly" means acting with actual knowledge or with reckless disregard or deliberate indifference to the truth or falsity of information.

An example would be a health care provider, such as a hospital or a physician, knowingly bills for services that were never performed, resulting in overpayment of the claim using Medicaid or Medicare dollars.

Using the FCA can help reduce fraud. The FCA allows everyday people to bring "whistleblower" lawsuits on behalf of the government – known as "qui tam" suits – against groups or other individuals that are defrauding the government through programs, agencies, or contracts.

You can find more information regarding the False Claims Act on [HAP CareSource's website](#).

RSV Prevention for Newborns and Infants

Respiratory syncytial virus (RSV) is a common respiratory virus that continues to be the leading cause of hospitalizations in infants. Severe RSV can result in significant illness, pneumonia, bronchiolitis and even death in infants and young children. Currently there are three different injections to help avoid severe RSV cases in infants. Abrysvo is an RSV vaccine that can be administered to pregnant people between 32 to 36 weeks of pregnancy producing antibodies passed onto the fetus preventing severe RSV. Nirsevimab (Beyfortus) and Palivizumab (Synagis) are two monoclonal antibody injections that can be given to infants to help avoid severe RSV lower respiratory tract infections.

Monoclonal antibodies are recommended for most infants if their birth parent did not receive the RSV vaccine during pregnancy, the birth parent's RSV vaccination status is unknown, or the infant was born within 14 days of the birth parent's RSV vaccination. High-risk infants and young children may also qualify for a recommended second round of monoclonal antibodies during their second RSV season. Refer to the Center of Disease Control (CDC) website [Clinical Overview of RSV | RSV | CDC](#) for more information.

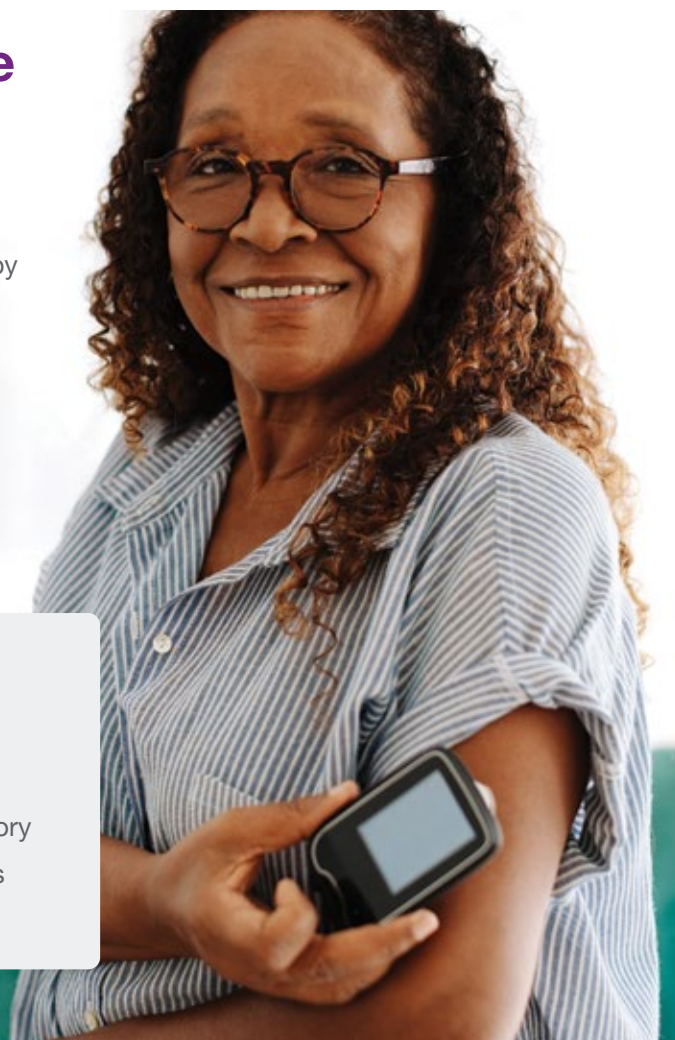


Closing Gaps in Diabetes Care by Including CPT® II Codes

Current Procedural Terminology Category II (CPT II) codes are supplemental codes to include with claim submissions. CPT II codes are used to track performance from tests or procedures by providing measurable data for quality of care.

CPT II codes are not substitutes for CPT codes. CPT codes will also need to be included for the services provided **along with** the CPT II codes.

CPT II codes are billed in the procedure code field, just as CPT I codes. CPT II codes are for reporting purposes and do not have a fee schedule associated with them.



Benefits of using CPT II codes include:

- ✓ Improve health outcomes
- ✓ Improve HEDIS® measurements
- ✓ Exclusions captured by coding of patient’s medical history
- ✓ Reduce medical record requests from a health plan thus reducing administrative burden for providers

Measure	CPT Codes
Kidney Health Evaluation for Patients with Diabetes (KED) (Blood & Urine Tests)	eGFR 80047-48, 80050, 80053, 80069, 82565, AND QUA 82043 WITH UC CPT 82570 or uACR via LOINC codes
Blood Pressure Control for Patients with Diabetes (BPD)	3074F, 3075F, 3077F, 3078F, 3079F, 3080F
Dilated or Retinal Eye Exam (EED)	2022F, 2023F, 2024F, 2025F, 2026F
Glycemic Status Assessment for Patients with Diabetes (HbA1c with documented results) (GSD)	3044F Most recent A1C < 7.0% 3046F Most recent A1C > 9.0% 3051F Most recent A1C > 7.0% & < 8.0% 3052F Most recent A1C > 8.0% & < 9.0%

Please refer to the **Procedure Code Lookup Tool** to check whether a service requires prior authorization.

In efforts to reduce health care costs, utilizing network labs is highly encouraged. As a network provider, you can play a crucial role in directing members to network facilities.

Contact your local HAP CareSource Health Partner Representative for more information.

Health Equity and Disability Inclusion

The term “health equity” refers to the goal of providing everyone with the opportunity to achieve their best possible health, ensuring that no one is held back by disadvantages from reaching this potential. However, when discussing "everyone," people with disabilities are often notably underrepresented.

One in four Americans experience a disability, making it the nation’s largest minority group. Individuals with disabilities are more likely to experience chronic health conditions, mental health issues, higher rates of poverty, unfair treatment, and limited access to health care. Additionally, the lack of inclusive health care policies and programs tailored to their specific needs amplifies these inequities. These challenges are often intensified when intersecting with other marginalized identities. Disabilities are not deficiencies, but rather a unique experience involving intrinsic functional needs. Focusing solely on a disability or treating individuals with disabilities as if they are just their condition is dehumanizing and perpetuates stigma and ableism.



Misconceptions about people with disabilities include:

- Those with a disability have poorer health.
- Public health should focus only on preventing disability, not on supporting individuals to live full and meaningful lives with a disability.
- Environment plays no role in the disability process.
- The value of the life of a person with a disability is less than that of a person who does not have a disability.

These implicit biases contribute to disparities and hinder efforts to promote and achieve optimal health for everyone. Pursuing and advocating for health equity without considering those living with disabilities will limit who can access health care effectively and achieve desirable health outcomes. Addressing health equity among people with disabilities requires a comprehensive approach that includes improving accessibility to health care services, promoting inclusive practices in health care settings, and advocating for policies that prioritize their health and well-being. This is a tall order; however, progress has been made. The Final Rule, *Discrimination on the Basis of Disability in Health and Human Service Programs or Activities*, advances equity and bolsters protections for people with disabilities under Section 504 of the Rehabilitation Act.

Here are some considerations for advocacy and inclusion:

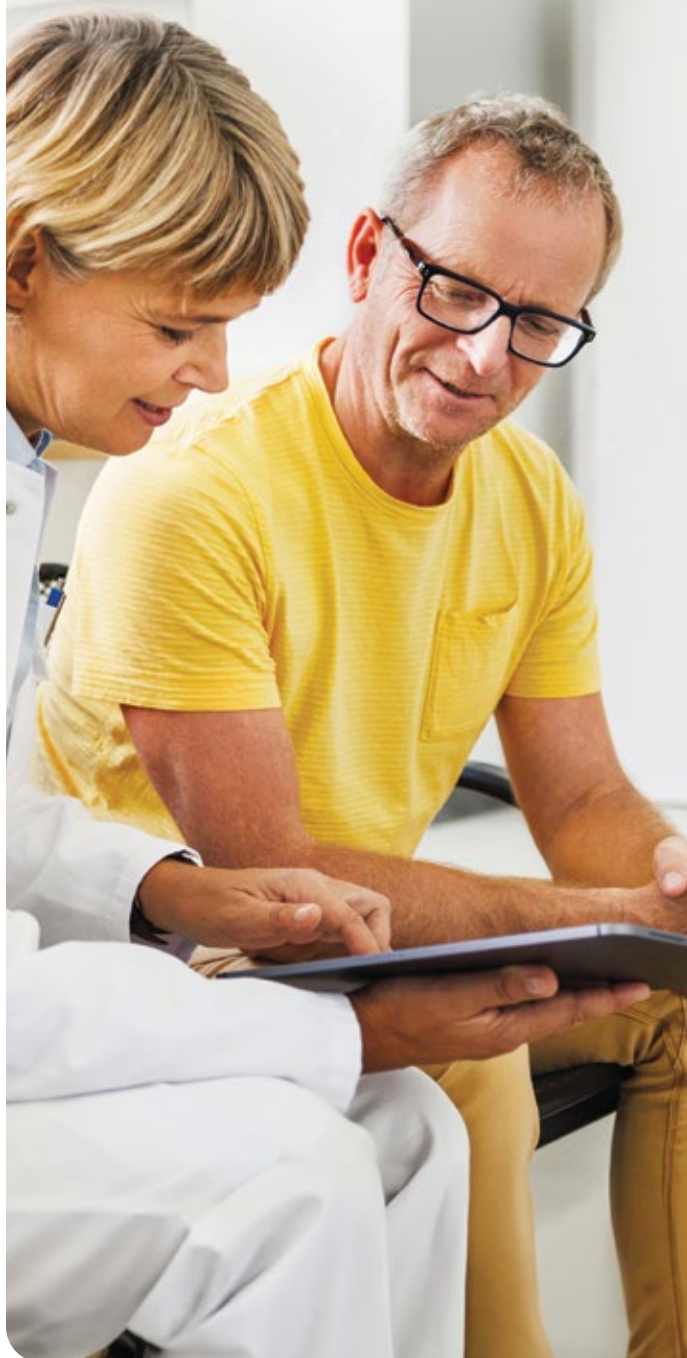
Avoid assumptions about “disability”	Connect with people who have disabilities
Commit to inclusivity via accessibility	Incorporate disability data collection as a common practice
Learn best practices	Develop a disability inclusion mindset

For further education and resources to review, check the links below:

- [Person-First Language](#)
- [Health Equity Programs and Healthcare Resources](#)
- [Fact Sheet on Section 504](#)
- [Including People with Disabilities: Public Health Workforce Competencies](#)



PrEP: Expanding Access and Support for Patients



As we continue our initiative to share valuable resources with our provider network, we are pleased to offer additional information and support regarding pre-exposure prophylaxis (PrEP). PrEP is a vital tool in Human Immunodeficiency Virus (HIV) prevention, particularly for populations at higher risk, including LGBTQ+ communities and individuals with certain risk factors such as inconsistent condom use or sharing needles.

Who Should Consider PrEP? PrEP may be suitable for individuals who:

- Have had a sexually transmitted infection (STI) in the past six months.
- Engage in sexual activities without knowing their partner's HIV status.
- Use injectable drugs with shared equipment.

For a comprehensive guide on assessing whether PrEP is right for your patients, please refer to the CDC's resource: [Deciding if PrEP is Right for You](#).

How PrEP Works: PrEP prevents HIV from replicating in the body if exposed. It should be taken as prescribed and does not replace the need for regular STI screening and safe practices, such as condom use.

Medications used for the treatment of HIV and PrEP are carved out and covered by the State for all Michigan Medicaid members, and are listed in the Michigan Medicaid Health Plan Common Formulary at: [State-of-Michigan-Medicaid-Managed-Care-Common-Formulary.pdf](#).

For more detailed information on PrEP and its usage, visit [Preventing HIV with PrEP](#).

Additional Considerations: Our goal is to support your efforts in providing inclusive and comprehensive care. Understanding the unique health needs of LGBTQ+ patients, including those seeking gender-affirming care or facing systemic health disparities, is essential. Ensuring culturally competent care and accessible services can significantly improve health outcomes.

For further reading on LGBTQ+ health disparities and the role of Medicaid in addressing these issues, please explore [this detailed brief](#) from the Center for Health Care Strategies.

Together, we can enhance the quality of care and support for our patient population. If you have any questions or need additional resources, please do not hesitate to reach out.



Pharmacy Updates for Medicaid and MI Health Link

HAP CareSource has searchable drug lists that are updated monthly on the website. To find out which drugs are covered under your member's plan, go to Providers > Tools & Resources > [Drug Formulary](#). The most current updates can also be found there. If members do not have access to the internet, they can call Member Services for their respective market and plan. A representative will help members find out if a medication is covered and if there are any rules or restrictions.

Free Drug Disposal Packets

Remind your patients that proper disposal of expired, unused, or unneeded medications is important for their health.

Proper disposal helps prevent accidental ingestion, especially by children or pets. It also minimizes the risk of misuse or abuse, thereby safeguarding those at risk for potential addiction or harm. Finally, proper disposal helps to lessen patient confusion by removing medications from their home that they are no longer taking.

HAP CareSource is pleased to offer all of our members free DisposeRx® drug disposal packets to help them and their loved ones stay healthy. Information on how to receive DisposeRx® packets can be found on our website, [HAPCareSource.com](https://www.HAPCareSource.com).



Earn AND *Redeem*



Providers, thank you for your collaboration and efforts. Our members are working hard to keep themselves healthy. Many may have earned rewards for completing healthy activities such as getting their flu vaccines or wellness checks.

Please remind them that some rewards expire, so it is important for them to use those hard-earned rewards. As a reminder, the expiration of rewards will be based on the program that they are enrolled in:

- HAP CareSource MyHealth Rewards Program – Rewards earned in 2023 will be expiring in December of this year! Have them redeem today!
- HAP CareSource MyKids – Rewards expire one year from issuance.
- My HAP CareSource Rewards - Rewards expire one year from issuance.

As we celebrate another year of health, please remind our members that they can earn new rewards in 2025. Encourage them to be proactive by scheduling their appointments today!





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Member Corner

The MemberSource newsletter is a great resource to stay up-to-date with health, wellness and plan information for your HAP CareSource or HAP CareSource MI Health Link patients. To view editions of the MemberSource newsletter, visit HAPCareSource.com > Members > Education > [Newsletters](#).

*Thank you for your
partnership!*