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#VegasStrong



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Reminder:

EXPERIAN System Update and Transition to New Platform

Silver State ACO works with its Participant practices to engage patients in an attempt to improve outcomes. This includes identifying patients when they are discharged from the hospital so that the practice can reach out to the patient for a post – acute follow up visit. This has been proven to reduce the risk of readmission.

Because of the positive results it has seen with this initiative, the Centers for Medicare and Medicaid Services (CMS) pays a higher rate for this visit, known as a Transitional Care Management (TCM) visit.



The Experian e-careNext system, which notifies practices of a patients discharge, is about to undergo a transition to a new platform, named Community Partner Encounters.

The new platform will give users a cleaner interface and allow download to an Excel spreadsheet. As we move through this transition we will continue to work with Experian to improve the system for the benefit of those using it. Please share your insights which inform us of our user’s experience. We can then engage with Experian to make this new tool more valuable for our practices.

Experian has now set November 11th as the “go live” date for the new platform which is expected to include additional search functionality that we requested. The old platform, Care Coordination Manager, is expected to be discontinued on Monday, November 15th. If you don’t currently see the Community Partner Encounters button on your landing page, please reach out to your quality coordinator or call Rena Kantor, Director of Operations, at 702-751-0945.

CARE COORDINATION
MANAGER INBOX

COMMUNITY PARTNER
ENCOUNTERS

Next Practice Meetings:
Southern Nevada
November 3, 2021

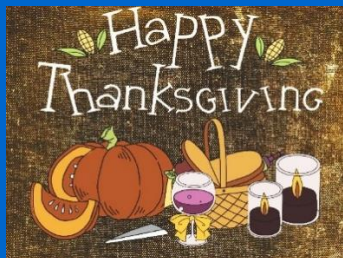
Northern Nevada:
November 4, 2021

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Public Health Emergency

On October 18th, the federal government renewed the COVID-19 Public Health Emergency (“PHE”) declaration.

The policies implemented last year to address the PHE described in the [Specifications of Policies to Address the Public Health Emergency for COVID-19](#) will extend to Performance Year 2021 as well.

As we have seen throughout this pandemic, there is no way to foresee what the future holds – neither in terms of the pandemic nor the government’s reaction to it. As always, we strongly encourage our practices to maintain flexibility so as to be able to adapt to situations as they arise.



Be sure to react to actual fact, and not to rumors or presumptions. To monitor updates, visit the official Public Health Emergency Declaration Website:
<https://www.phe.gov/emergency/news/healthactions/phe/Pages/default.aspx>

Important Notice from the State of Nevada Regarding 2022 Managed Care Caseload

October 21, 2021 - Attention All Providers:

2022 Managed Care Caseload Distribution Notice

The Nevada Division of Health Care Financing and Policy (DHCFP) executed, on September 14, 2021, a new contract with four managed care entities to become effective January 1, 2022. Medicaid recipient membership is currently with three plans, and DHCFP will distribute the membership across the four plans on January 1, 2022. Recipients will have a 90-day period where they can select a different plan if they wish.

Implementing this new contract with the plans will cause some member disruption. DHCFP is currently working with all four contracted vendors to implement transition of care procedures to reduce provider and recipient disruption.

The DHCFP expects this implementation to impact all providers, but expects this to be most relevant to:

- Hospitals (acute, sub-acute and post-acute)
- Primary Care providers
- Behavioral Health Care providers
- Personal Care Service providers and
- Home Health Care providers

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*Southern Nevada:
November 3, 2021
Northern Nevada:
November 4, 2021*

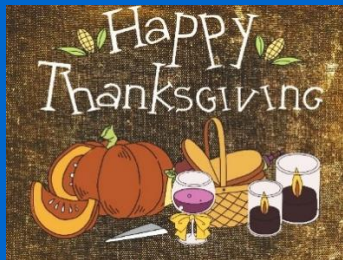
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The four Managed Care Organization (MCO) vendors will not be notified of their assigned membership in time to communicate to providers which members will be moving to another vendor. It is imperative that all providers utilize the Medicaid Electronic Verification System (EVS) to determine member eligibility and MCO assignment, and to facilitate appropriate billing to the correct MCO.

All managed care households will receive a letter by November 1 notifying them of this upcoming change and the possible impact to their coverage. In December, recipients will be notified if they are assigned to a new MCO beginning January 2022. A document with the summary and timeline regarding the **Medicaid Managed Care Enrollment Changes** is found below.

It may be beneficial as a provider to share with your patients which MCOs you are credentialed with, as this may inform their decision on whether to select a different plan within the 90-day period as allowed. All four MCOs will reimburse out-of-network providers during the initial transition period in order to ensure members receive the appropriate medically necessary care. MCOs will share prior authorization information on members that are transitioning. MCOs are expected to honor prior authorizations and referrals through the transition period. After the transition period, members will be re-assigned to in-network providers for further care and coverage.



If you have questions on how to appropriately bill an MCO that you are not currently credentialed with, please contact the specific MCO via their provider services line located below.

MCOs will make additional information regarding their plans available via websites located below for both providers and members.

Anthem Blue Cross and Blue Shield Nevada Medicaid

<https://mss.anthem.com/nevada-medicaid/home.html>

- Member Services (844) 396-2329
- Provider Services (844) 396-2330

Health Plan of Nevada (HPN)

<https://myhpnmedicaid.com/Provider>

- Member Services (800) 962-8074
- Provider Services (800) 745-7065

Molina HealthCare

<https://www.meetmolina.com/nv-medicaid>

(to be activated 10/27/2021)

- Member Services (833) 685-2109 (to be activated 10/27/2021)
- Nevada Provider Line (877) 902-1207

SilverSummit Healthplan

<https://www.silversummithealthplan.com/>

- Member and Provider Services (844) 366-2880

Additional information, including Frequently Asked Questions (FAQs), MCO change form, flyers and more, will be posted on the DHCFP website as it becomes available:

<https://dhcfp.nv.gov/Members/BLU/MCOMain/>

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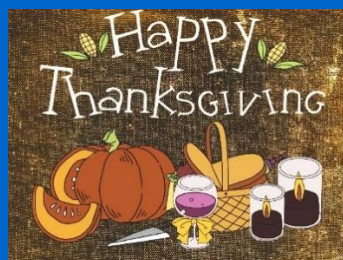
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Medicaid Managed Care Enrollment Changes

Nevada Medicaid
September 30, 2021

Summary	Action Date	Strategy
<ul style="list-style-type: none"> • 630,000 Nevadans are enrolled in Medicaid Managed Care Organizations (MCOs). 	10/14/21	Pull list of existing enrollees.
	10/15/21	Notify existing enrollees that changes are coming.
<ul style="list-style-type: none"> • 3 MCOs currently serve all enrollees. 	11/24/21	Pull list of all eligible enrollees & distribute 25% to each MCO.
	12/10/21	Send distribution list to MCOs.
<ul style="list-style-type: none"> • 4th MCO was added to offer enrollees more options. New MCO has no enrollees. 	12/15/21	Notify enrollees of their assigned MCO.
	12/26/21	List of new enrollees after 11/24 pulled & distributed across all MCOs.
<ul style="list-style-type: none"> • Redistribute enrollees equally to ensure equal opportunity for MCOs & enhanced choices for Nevadans. 	12/28/21	New enrollees list sent to MCOs.
	12/27-12/31/21	New enrollees pulled daily & file transferred nightly to MCOs.
	1/1/22	Changes effective. Members have 90 days to switch to a preferred MCO.

For more information, write to: ManagedCare@DHCFP.nv.gov

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GAP CLOSURE CONTEST

Success in the Medicare Shared Savings Program is based on patient results as defined by both quality of care and reduction of cost. As we all know, in medicine, “If it’s not documented, it never happened.” Each SSACO Participant practice has a dedicated quality coordinator who helps review medical records and identify “gaps in care” – be they actual gaps or just data that is undocumented or documented incorrectly.

As we near year-end, we are, once again, offering an incentive to close those “gaps in care.” Close more gaps than any other practice – or the highest percentage of gaps – and Silver State ACO will write you a check! Details, below.

A flyer for the 2021 Gap Closure Contest. The background is light blue with a pattern of red, white, and blue stars. The Silver State ACO logo is at the top center. The text reads: "2021 GAP CLOSURE CONTEST October 25th - December 10th WIN UP TO \$21,000". Below this, it says "We are handing out prizes for each of the following SEVEN categories..." followed by a bulleted list: Breast Cancer Screening, Colorectal Cancer Screening, Tobacco Screening and Cessation, Influenza Immunization, Fall Screening, Controlling Hypertension, and Diabetes A1c Poor Control. It then states "\$1,500 for the practice that completes the most per category AND \$1,500 for the practice that completes the highest percentage of attributed patients per category!". A red banner says "Your practice can win in one category or all seven!!!". At the bottom, under "Rules:", it lists: Quality Coordinators will provide a Gap in Care Report that includes eligible patients; Must submit your completed list to your Quality Coordinator no later than Friday, December 10th; Assessments must be scanned in the chart no later than Friday, December 10th; All submissions must be documented in an excel spreadsheet; Gaps **MUST** be documented during the contest dates.

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Patient Experience

Last month we highlighted the importance of patient experience. Scientific research shows a positive correlation between results for a



patient and his/her opinion of the provider and experience. If a patient feels respected and valued and has a positive opinion of how the provider interacts with him/her, the patient is far more likely to follow instructions, resulting in better outcomes.

Patient satisfaction also benefits the practice directly by improving patient retention.

CMS also includes patient experience as a factor in calculating Shared Savings. Consider this a reminder that listening carefully to your patients and responding respectfully to them, helps everyone. Remember – a positive word never goes to waste.

QUALITY MEASURES SPOTLIGHT

The Centers for Medicare and Medicaid Services (CMS) requires the ACO to report several Quality Measures on behalf of our participant practices. This month we are focusing on “Cancer Screening” measures. As an ACO, we are currently scoring in the 50’s for both measures. As we are nearing the end of the year, we would like to improve both scores significantly. Please review the following requirements with all staff and providers.



SPOTLIGHT

Breast Cancer Screening

CMS requires female patients ages 50-74 to have a bilateral mammogram once every 24 months. A right or left unilateral mammogram will meet the measure **if** there is documentation of a right or left unilateral mastectomy within the patients chart.



- Medicare **will** accept the following procedures for screening: Diagnostic, film or 3D mammogram.
- Medicare **will NOT** accept: MRI’s, ultrasounds and biopsies.

This measure may be documented during a telehealth encounter.

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Regardless of whether the documentation is made during an in office visit or a telehealth encounter the documentation in the medical record must include the following:

1. Type of test
2. Date test was performed (Both month and year are **required**)
3. Results or findings. “Normal” and “Abnormal” are acceptable

Below are some examples of documentation that Medicare will accept. As you will see these include all of the elements listed above:

- Mammogram 12/2018 Abnormal
- Normal Mammogram 01/2020

Below are examples of documentation Medicare will **not** accept because they do not contain all 3 of the required elements:

- Normal mammogram (**Missing month and year completed**)
- Mammogram April 2019 (**Missing result/finding**)

Colorectal Cancer Screening

CMS requires patients age 50-75 years of age to have an appropriate screening for colorectal cancer. Patients with a diagnosis or documented history of colorectal cancer or a total colectomy will be excluded from this measure.

Appropriate screenings are:

- Fecal Occult Blood Test (FOBT) once every 12 months
- Flexible Sigmoidoscopy or CT Colongraphy during the current year or the four years prior
- Colonoscopy during the current year or the nine years prior
- Fecal Immunochemical DNA Test (FIT-DNA) during the current year or the two years prior



This measure may be documented during a telehealth encounter.

Regardless of whether the documentation is made during an in office visit or a telehealth encounter the documentation in the medical record must include the following:

1. Type of test
2. Date test was performed (Year is **required**)
3. Results or findings. “Normal” and “Abnormal” are acceptable

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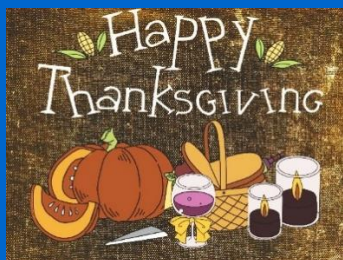
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Below are some examples of documentation that Medicare will accept. As you will see these include all of the elements listed above:

- Colonoscopy 2018 Abnormal
- FOBT 2021 Normal

Below are examples of documentation Medicare will **not** accept because they do not contain all 3 of the required elements:

- Normal FOBT (**Missing year completed**)
- Colonoscopy 2019 (**Missing result/finding**)

Please reach out to your Quality Coordinator if you have any questions or need help meeting this measure.

CMS Best Practices for Protecting Beneficiary Data

CMS continues to reinforce its message, reminding all medical practices and providers to carefully secure all Protected Health Information (PHI) and Personal Identifiable Information (PII).

Among best practices is to avoid sharing PHI, PII or sensitive data by email. And, if one must email the information, always encrypt the file and share the password with the recipient via a different mode of communication, for example – by phone or fax. If by phone, always ensure that you are delivering the password only to the intended recipient. CMS policy *prohibits* emailing passwords for encrypted files sent via email.



Never include full taxpayer identification numbers, MBIs or other sensitive personal information in an email. This includes screenshots! For more about CMS security, privacy guidance and best practices, visit [CMS Information Security and Privacy Overview webpage](#).

2021 Practice Meetings

Come join other Participants, learn about Silver State ACO systems and ways we can help your practice. Join us for either breakfast or lunch and be entered to win a prize. Win, win, win. We plan to hold the meetings in person but be sure to watch your email for updates.

Last Practice Meetings for 2021:

Southern Nevada:

Wednesday, November 3rd (At 7:30 and 11:30 a.m.)
at Summerlin Hospital

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Northern Nevada:

Sparks Medical Building at 5 pm

Thursday, November 4th

Practice Meeting Schedule for 2022:

Please Note your Calendar

Southern Nevada:

At 7:30 (breakfast) and 11:30 (lunch) on each of the following days:

Wednesday, February 2, 2022 - at Desert Springs Hospital

Wednesday, May 4, 2022 - at Summerlin Hospital

Wednesday, August 3, 2022 - at Desert Springs Hospital

Wednesday, November 2, 2022 - at Summerlin Hospital

Northern Nevada:

At 5 p.m. at the NNMC Sparks Medical Building, Suite 201, on each of the following days:

Thursday, February 3, 2022

Thursday, May 5, 2022

Thursday, August 4, 2022

Thursday, November 3, 2022

Speaking of dates – the holidays are creeping up quickly. Why not enter the SSACO newsletter contest and be entered to win a prize now? Simply respond to the email, to which this newsletter was attached, with “Silver State ACO – Helpful in Every Season” in the subject line.

Halloween at Silver State ACO

You may know your Quality Coordinator as a lovely, but serious, hands-on professional. But the Silver State ACO staff does enjoy partying and celebrating holidays together. We have some very talented costumers among us!



From left: Larry Preston, CEO, Amanda Almache, Jessica Aquino, Sharon Watson, Linda Casco, Jennifer Simpson, Alyssa Reid, Jessica Shepard, Martha Sutton, Lindsey Parnell (PMC) and Brett Slizeski

SILVER STATE ACO COMPLIANCE LINE: 702-751-0834

Available for secure reporting of any suspected compliance issues, without fear of retribution.

*“Don’t judge each day by the harvest you reap but by the seeds that you plant.”
Robert Louis Stevenson (1850 – 1894), Scottish writer and poet who only learned to read at age
7. Even so, he dictated stories throughout his childhood. He is best known for his adventure
novel, Treasure Island, and the Strange Case of Dr. Jekyll and Mr. Hyde.*

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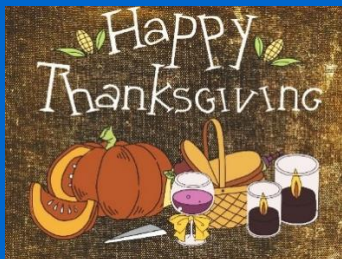
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Halloween 2021



Captain Hook Preston



Alyssa, Jessica and Martha – Beware, they may put a spell on you...



Lindsey and Sharon... The Devil's



Larry Preston with staff from Nevada Heart & Vascular