Newsletter



April 2022 Volume 82

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Sleep Apnea

Sleep apnea is common, yet often unrecognized. Diagnosis may be challenging and many patients are reluctant to discuss with their doctor or volunteer symptoms. According to a 2021 scientific statement by the American Heart Association, approximately 34% of middle aged men and 17% of middle-aged women meet the diagnostic criteria for Obstructive Sleep Apnea (OSA), a disorder caused by the repetitive collapse of the upper airway during sleep. The prevalence increases in older adults and varies by race/ethnicity, gender and body mass.

Sleep apnea places a significant burden on the heart — and there are consequences. Everything that happens during an episode of sleep apnea is harmful to the heart: the patient struggles to breathe against a collapsed airway; blood oxygen is low, carbon dioxide is elevated; and the sympathetic nervous system is activated. Adverse effects persist into the daytime. Susceptible individuals may suffer stroke, myocardial infarction (heart attack), or develop congestive heart failure or arrhythmias.

A 2020 study published by the Journal of Clinical Sleep Medicine, found that untreated sleep apnea patients are large consumers of health care dollars, driven primarily by hospitalizations for cardiovascular complications. Excess cost in the Medicare population is estimated at \$20,000 per patient per year.

There is effective therapy which may reduce health care utilization

costs by up to 50%. The Journal of Clinical Sleep Medicine found that *CPAP* (continuous positive airway pressure) therapy is effective in controlling sleep apnea and improving sleep quality, as well as in reducing utilization costs if used properly and consistently.



Next Practice Meetings: Southern Nevada May 4, 2022

Northern Nevada: May 5, 2022

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When CMS (Centers for Medicare and Medicaid Services) created the Accountable Care Program, it was devised to center around primary care physicians. CMS made certain exceptions, as they understood that there are patients who look to their specialists as "their doctor." One of the exceptions was to allow cardiologists and/or cardiology groups to be ACO Participants. In fact, since its inception,



Silver State ACO has had three cardiology groups as Participants. One of these groups, Nevada Heart and Vascular Center, has a dedicated sleep apnea program. Dr. Alan Steljes, a provider with Nevada Heart and Vascular Center, is certified in sleep medicine by

the American Board of Internal Medicine, and is passionate about management of sleep apnea to prevent cardiovascular complications. He believes that dealing with this issue is beneficial for patients, providers and insurers. Dr. Steljes estimates that Silver State ACO has thousands of patients with sleep apnea and that, if effective therapy were to be instituted properly and promptly for these patients, healthcare utilization costs could be reduced by as much as \$100 million annually.

The first step to lowering utilization is to establish a successful program to screen the population for sleep apnea. Patients identified as high risk should be referred for a sleep study. If referred to therapy, patients under treatment must be followed and engaged by a qualified staff member in order to insure optimal adherence. Attached to the email to



which this newsletter was attached is a form for referring patients.

Dr. Steljes is available to discuss screening strategies and protocols and believes that launching a well-designed screening program in your office can reduce utilization and costs, improve the likelihood of earning Shared Savings and, most importantly, improve the health and quality of life of patients.

Nevada Heart and Vascular Center has numerous locations throughout the Las Vegas Valley and can be reached at 702-227-3422.

Experian Rebuilds Portal Access for Silver State ACO

One of the great benefits of being a Participant practice with Silver



State ACO is the ability to know when a patient has been discharged from the hospital. This allows the practice, as well as the Silver State ACO care coordination team, to reach out to

the patient. Patients benefit from careful follow-up and have a greatly

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reduced likelihood of being readmitted to the hospital. The practice benefits by being able to monitor their patients more completely and by being able to bill Medicare for a Transitional Care Management (TCM) visit, which is paid at a much higher rate.

The problem is that, unfortunately, most patients don't call their doctor when they are admitted to or discharged from the hospital.... unless they develop serious complications or take a turn for the worse. At that point, it may be too late for their PCP to intervene and they end up back in the emergency room or admitted to the hospital.

The Experian notification system has been a valuable tool for practices. Unfortunately, for the past few months, some of our users have had issues accessing all the information they used to get from the Experian website. We have been working with Experian to rectify this and, ultimately, Experian is in the process of rebuilding our user's access. The system should be more robust and give users additional



search capabilities. That being said, change is always difficult. We appreciate your patience and understanding while the system updates. We

implore you to let us know if you have any issues. When access is transitioned to the new system, users may get duplicate messages. If that is the only issues you encounter, please wait a few days for the system to be tweaked. Should you detect any irregularities other than that, please contact us immediately.

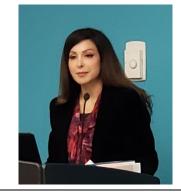
A number of practices, including those who joined in 2022, have requested access for additional users. The requests are NOT being ignored. We are on hold to activate new users until the system (and access for all current users) is updated. We will reach out to you directly once the new users are set up.

We are grateful to those practices and users who contact us. It's the only way we can know of any issues you are encountering. Please call your quality coordinator or Rena Kantor, Director of Operations (702-751-0945) with any questions or comments.

Silver State ACO Sponsors Women's Leadership Summit

Silver State ACO was one of the sponsors of the Southern Nevada Women's Leadership Summit which took place on Friday, March 25, 2022.

A marvelous time was enjoyed by all. The keynote speaker, Ayesha Mehdi, J.D., shared the story of her journey from immigrant to lawyer (specializing in healthcare law) and the



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insights she learned of what it means to be a professional woman, how to embrace the positives and accomplish your dreams, regardless of circumstances.

A panel discussion regarding various challenging scenarios in the workplace was professionally conducted by Aleia Cassidy, with panelists Corinne Burton, Carissa Rey and Kim Grana impressively handling the questions like the pros they are.

Attendees networked, learned a lot, shared breakfast and games, and left with smiles, business cards, a "goodie bag" and prizes.



QUALITY MEASURES SPOTLIGHT

Preventive Care: Breast Cancer Screening

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 the "Breast Cancer Screening" measure.



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 <u>if</u> there is documented evidence of a right or left unilateral mastectomy within the patients chart.

- Medicare <u>will</u> accept the following procedures for screening: Diagnostic, film or 3D mammogram.
- Medicare <u>will NOT</u> accept: MRI's, ultrasounds and biopsies.

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:

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

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

- Mammogram 12/2021 Abnormal
- Normal Mammogram 01/2022

Below are examples of documentation Medicare will <u>not</u> accept because they do not contain all 3 of the required elements:

- Normal mammogram (Missing month and year completed)
- Mammogram April 2021 (Missing result/finding)

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

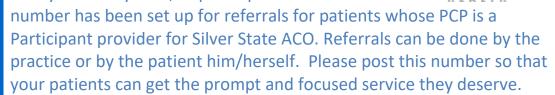
REMINDERS

DISPATCH HEALTH

Dispatch Health offers same day, in-home medical care. Each

DispatchHealth team that visits a patient in the home is made up of either a Nurse Practitioner or Physician Assistant, as well as a medical assistant. An Emergency Medicine physician is always available for consult.

Because Dispatch Health has entered into an agreement with Silver State ACO and the Valley Health System, a special phone



725-246-1973

Security Reminders

Remain vigilant! Now that the masks have come off, have the screen guards, too?

- ✓ DON'T let your guard down! HIPAA rules have not changed. Scammers and internet hackers are as busy as ever.
- ✓ DO remain vigilant about securing PHI.



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- ✓ DON'T forget to check *every* new prospective employee against the OIG's list of excluded individuals.
- ✓ DO review when each employee most recently completed CMS fraud and abuse training.
- ✓ DO let your employees and vendors know that you "mean business" when it comes to security and compliance.
- ✓ DO report any suspected issues relating to your dealings with Silver State ACO to its dedicated line:

SILVER STATE ACO COMPLIANCE LINE: 702-751-0834

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

PROVIDER MANUAL

The 2022 Provider Manual has been distributed to all Silver State ACO Participants. The manual contains descriptions and information about various Silver State ACO programs and benefits; forms; lists of Participants, providers and contact information, as well as company data and helpful hints. As it is a very large file, it was split and sent as an attachment in two separate emails. If you have not received yours, please call Sharon at Silver State ACO (702) 800-7084.

RECOMMEND A FRIEND?

Do you know of a practice that would benefit from joining Silver State ACO? Have you found the information, review and contact with your quality coordinator helpful? Do you find the practice meetings informative? Do you find the clarification of CMS rules valuable? Do you know a practice / practice manager / provider who would, as well? Please let us know. We'll be glad to reach out to the practice. Although we have barely gotten involved in 2022, CMS deadlines push us to start looking toward 2023 very early. If a practice that you recommend allows us to meet with them, your name will be entered to win a prize.

Mark Your Calendar



Practice Meeting Schedule for 2022:

Watch emails for changes to schedule or venue (in person/virtual)

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SOUTHERN NEVADA

Meetings are scheduled to be held at 11:30 a.m.

Wednesday, May 4, 2022 - at Summerlin Hospital Wednesday, August 3, 2022 - at Desert Springs Hospital Wednesday, November 2, 2022 - at Summerlin Hospital

NORTHERN NEVADA

Meetings are scheduled to be held at NNMC Sparks Medical Building, Suite 201.

Meet and greet begins at 5 p.m., program begins at 5:30.

Thursday, May 5, 2022 Thursday, August 4, 2022 Thursday, November 3, 2022

> Stay Safe Healthy

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