

MetroPulse Provider Newsletter

SUMMER 2024



Postdischarge care for mental health and substance use

The transition period following a patient's discharge from a hospital is a decisive phase for recovery, including for individuals recovering from mental health disorders or alcohol and drug dependencies. Effective postdischarge management is vital in enhancing patient outcomes.

The critical first week

Prompt engagement with a primary care provider after discharge is key in the recovery process. Research indicates that follow-up appointments within the first seven days postdischarge can lower a patient's risk of hospital readmission.

Before the patient goes home, schedule their seven-day follow-up. Take the time to communicate the critical nature of postdischarge

appointments. Also give the patient an opportunity to ask questions and make decisions related to their care. When patients feel engaged, they're more likely to attend their follow-up appointments.

Mitigating the cycle of readmissions

- **Acknowledge the pattern.** Frequent emergency department visits for mental health or substance use often indicate insufficient ongoing care.
- **Provide persistent support.** Implement a regular check-in system for patients via phone calls or digital health platforms. This step can help catch any issues early on, before another emergency department visit.

- **Enhanced resource accessibility.**

Increase the patient's access to outpatient care through referrals for medication management and counseling services.

Considerations for extended care

Schedule a follow-up within 30 days. This visit helps providers address any additional needs.

By integrating these strategies, providers can bolster the support framework for patients transitioning from inpatient to home settings, thus reducing the chances of readmission.

PROVIDER RESOURCES

For behavioral health announcements, updates, and training, please click [here](#).

About MetroPlusHealth

MetroPlusHealth offers a large network of doctors, hospitals, and urgent care centers. With more than 34,000 top providers and sites, members can find many offices right near them, along with local family care sites and over 100 urgent care sites like CityMD, Northwell-GoHealth Urgent Care, and more. Our network consists of over 40 hospitals, including NYC Health + Hospitals, NYU Langone, Mount Sinai, and Montefiore.

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SUMMER 2024

Read more about the following topics on our website:

- Helping your patients prevent diabetes
- Gambling disorder
- Model of Care training
- Cultural competency training
- New Behavioral Health Announcements and Updates section
- Smoking cessation
- Rx carve-out and pharmacy benefit change
- Fluoride varnish
- Changes to COVID-19 testing coverage
- Syphilis screening
- Hepatitis C screening

Provider Services Call Center

For questions, reach out to your MetroPlusHealth Quality Management contact or call the Provider Services Call Center at **800.303.9626**, available Monday to Friday, 8 a.m. to 6 p.m.

Remind your patients about the urgency of recertifying their health insurance. Learn more [here](#).

Improve health outcomes with SDOH screening



Social determinants of health (SDOH) are the nonmedical factors, such as income, access to food, housing, and education, that can have a significant effect on patients' health outcomes. Research has shown that SDOH may be more important than health care or lifestyle choices in influencing overall health, with between 30 and 55% of health outcomes ascribed to SDOH. The importance of SDOH in improving health and reducing health disparities is highlighted in several Healthy People 2030 objectives aimed at advancing health equity.

Providers play a frontline role in helping patients improve their health and overall quality of life. Here are a few approaches to keep in mind when discussing and addressing patients' SDOH:

Make SDOH screening part of your practice

Unless you ask about your patients' social needs, you will likely not know about them. This might keep you from providing them with the most appropriate care. Choose an SDOH screener and make it part of patient registration. Ask your office to send the tool electronically to patients before their visit, and then review their answers as part of your pre-visit planning.

Appropriate screening tools include:

- The Health Leads Screening Panel®
- Accountable Health Communities (AHC) Health-Related Social Needs (HRSN) Screening Tool
- AAFP Social Needs Screening Tool
- PRAPARE®

Build trust with patients

Patients may feel hesitant to discuss personal or sensitive information for fear of being judged or stigmatized. Building trust and rapport with patients and asking questions in a nonjudgmental way will reduce the stigma some patients may feel about their social circumstances. You can build patients' trust by respectfully asking questions and listening with compassion to their responses. Take the time to learn about each patient's social identity, values, and communication needs, and then adapt your approach to that patient.

Provide community resources

Screening for social needs is just the beginning. If you discover a patient has SDOH needs, have a conversation about what those needs entail. Be ready to help patients access resources in the community to fill any social gaps. It can be helpful to keep an updated list of local resources that you can provide to patients. Some practices enlist social workers or patient navigators to connect patients with local services.

Once you have referred a patient for social needs, follow up to ensure the needs are being effectively addressed and to adjust their care plan as needed.

SDOH resources

For local resources on childcare, food and nutrition assistance, housing, transportation, utilities, medical costs, health literacy, social isolation, refugee services, legal assistance, disabilities, and more, click [here](#).

Talk with patients about ANTIDEPRESSANTS

Depression is a common mental health disorder, affecting people of all ages, races, and genders. But it can be treated. Studies show that 70 to 80% of those with a major depressive disorder have a significant reduction in symptoms with appropriate treatment. For most patients, treatment includes antidepressant therapy, with or without psychotherapy.

Antidepressants can improve the symptoms of a wide range of depressive disorders and typically have fewer side effects than older antidepressants like tricyclics and monoamine oxidase inhibitors (MAOIs). However, tricyclics and MAOIs may work well for some individuals. Patients may need to try different doses of medications to find the best treatment. Most antidepressants take at least four to eight weeks to start working, so encourage patients to give the medication time to work before trying another prescription. Remind patients not to stop taking antidepressants suddenly, as this can cause unwanted side effects.

Managing side effects

Common side effects of antidepressants include headache, upset stomach, and sexual dysfunction. In most cases, the side effects are mild and go away with time. You can help patients manage side effects by starting them on a low dose and increasing slowly or by instructing them to take the medication before bed or with food.

Optimizing outcomes

To obtain the maximum benefit from antidepressants, patients should continue the medication for at least six months. Encourage patients to make other healthy lifestyle choices, such as eating healthy foods and getting regular exercise and enough sleep. Patients can also boost the effects of the medication by seeing a therapist or joining a support group.

Provider resources

For behavioral health announcements, updates, and training, click **here**.



TIPS AND RECOMMENDATIONS

- Provide clear dosing instructions and discuss any possible interactions with other medications, food, or alcohol.
- Schedule a follow-up visit to monitor effectiveness. If patients cancel or miss appointments, reach out to them and reschedule as soon as possible.
- Refer patients to MetroPlusHealth's **Good4You health library** to search for information on antidepressants and behavioral health: healthlibrary.metroplus.org/Wellness/BehavioralHealth/.
- Inform patients about the benefits of the **Medication Management Program**.
- Remind patients that they can earn a reward for refilling their antidepressant medication. Here is the link: metroplus.org/member-rewards/.

Navigating pediatric health and antipsychotic medications

In pediatric care, balancing the benefits of antipsychotic medications against their side effects demands a nuanced approach. Understanding and implementing metabolic monitoring is essential to ensure the physical and mental well-being of these young patients.

Importance of metabolic monitoring

Metabolic monitoring is key to managing children on antipsychotic medication. The primary objective is to identify and mitigate potential side effects like increased BMI, impaired glucose metabolism, and elevated lipid levels. These conditions significantly raise the risk of developing more severe health issues such as obesity, type 2 diabetes, and cardiovascular diseases.

Proactive strategies

Timely and regular health assessments will help detect any adverse changes early. This approach allows for immediate interventions, significantly improving health outcomes for young patients.

Documentation and treatment

Meticulously recording the glucose and cholesterol levels from bloodwork tests provides a comprehensive health profile. This diligent recordkeeping is invaluable in making informed treatment decisions and adjustments, ensuring a tailored approach to each child's care.

EPSDT reminder

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental, and specialty services.

When a screening examination indicates the need for further evaluation of an individual's health, diagnostic services must be provided. Necessary referrals should be made without delay and there should be follow-up to ensure the enrollee receives a complete diagnostic evaluation.

For more information on EPSDT reporting, click [here](#).



Key takeaways

- Balance antipsychotic medications with metabolic health monitoring for a holistic approach.
- Prioritize regular health assessments and maintain detailed medical records.
- Address both mental and physical health needs of the pediatric population to support a healthier, more balanced life.

Updated billing for 2024 COVID-19 vaccines

Updated billing guidance to bill NYRx, the New York State Medicaid Fee-for-Service pharmacy program for all Medicaid members enrolled in MetroPlusHealth Medicaid, Partnership In Care, and Enhanced (HARP) plans, for COVID-19 Vaccines can be found [here](#). For questions about NYRx billing and claims, call the eMedNY Call Center at **800.343.9000**.

HELP PATIENTS PREVENT DIABETES

Roughly one in three adults in the United States has prediabetes, putting them at greater risk for type 2 diabetes, as well as cardiovascular disease, stroke, kidney disease, and blindness. But prediabetes can be prevented or reversed with lifestyle changes. Health care visits are an opportunity to provide your patients with the education and support to help them take these steps.

Identify patients at risk for diabetes

Your patients may be at risk for diabetes if they:

- Have prediabetes
- Are overweight or obese
- Are sedentary
- Are age 45 or older
- Have a family history of diabetes
- Have had gestational diabetes or given birth to a baby who weighed more than 9 pounds
- Are of certain ethnic backgrounds, including African American, Hispanic/Latino, American Indian, and Pacific Islander; some Asian Americans are also at higher risk

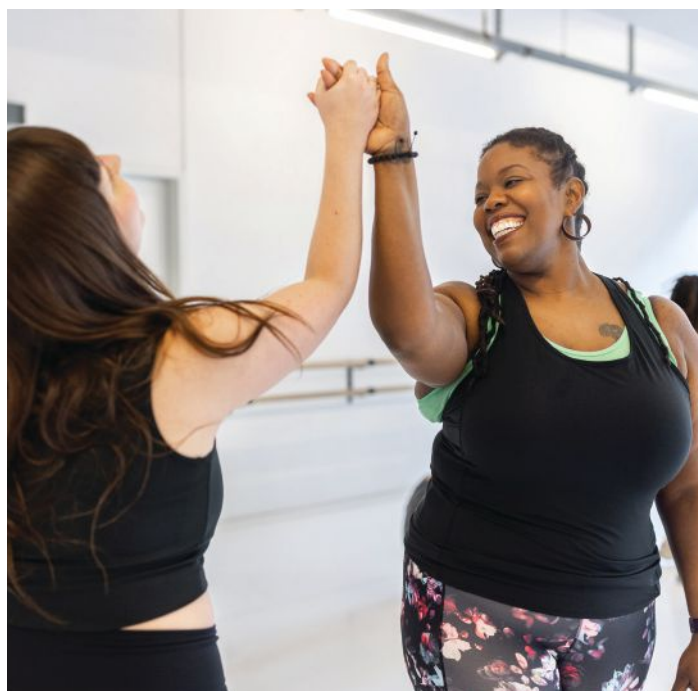
If you suspect a patient is at risk, check their blood glucose levels to determine if they have prediabetes or diabetes.

Encourage small, healthy steps

If your patient is at risk for diabetes, let them know they may be able to prevent or delay type 2 diabetes by making lifestyle changes. Even small changes add up. For patients who are overweight, losing just 5 to 10% of their body weight and getting 150 minutes a week of physical activity can lower their risk for developing type 2 diabetes. Taking small steps toward these goals can make a difference in their blood glucose levels and overall health.

Discuss a healthy lifestyle plan

Reassure patients that it's not necessary to give up all their favorite foods or run a marathon to lose weight. Most people can achieve weight loss by following a healthy eating plan and being more active. Here are some tips to share with patients:



- Pay attention to portion sizes.
- Choose fruits, vegetables, lean proteins, whole grains, and nonstarchy vegetables more often.
- Cut back on processed foods, and foods with trans fat, saturated fat, and added sugars.
- Drink water instead of soda, sports drinks, or fruit juice.
- Add physical activity to the day, gradually working up to 30 minutes of moderate physical activity at least five days a week. Walking is a great way to start.

Patient resources

- MetroPlusHealth's Diabetes Care Management Program: **800.303.9626**.
- CDC Diabetes Prevention Programs: Click **here**.
- NYC Community Resources for Diabetes and Diabetes Prevention: Click **here**.
- Shape Up NYC (free fitness programs): Click **here**.

Colorectal cancer screening strategies

In New York State, nearly 9,000 people are diagnosed with colorectal cancer every year — and almost 3,000 die of this disease. The provider's role is crucial in guiding patients through their screening options to ensure early detection and effective treatment.

The right test for your patients

When discussing screening options with patients, it's important to weigh their individual health needs, lifestyle preferences, and risk factors. Consider the following profiles:

Colonoscopy may be right for patients who:

- Prefer a comprehensive examination that's less frequent (every 10 years)
- Are comfortable undergoing a more invasive procedure
- Can accommodate the necessary preparation
- Value the ability to detect and remove polyps in a single appointment

Multitarget stool DNA tests may be right for patients who:

- Seek a noninvasive screening method that can be done at home
- Prefer to avoid the discomfort and preparation required for a colonoscopy
- Are diligent about regular screenings and willing to perform the test every three years
- Understand that a positive result will likely require a follow-up colonoscopy

Guaiaac-based fecal occult blood tests and fecal immunochemical tests (FITs) may be right for patients who:

- Seek a noninvasive screening method that can be done at home
- For FIT: want a test without the need for dietary restrictions
- Are committed to regular, yearly screenings to catch potential issues early
- Understand that a positive result will likely require a follow-up colonoscopy



Age-specific recommendations

Younger than 45	Screen if risk factors are present, such as inflammatory bowel disease, certain genetic syndromes, or a personal or family history of colorectal cancer or polyps.
45 to 75	Begin regular screenings at age 45. Determine frequency based on the patient's preferred testing method.
Older than 75	Take a personalized approach based on the patient's health and screening history.

Provider checklist: Ensure effective screening

- ✓ **Assess patient risk:** Factor in family history and lifestyle.
- ✓ **Educate patients:** Explain the importance and process of each screening test.
- ✓ **Schedule screenings:** Take into account age-specific guidelines and patient risk.
- ✓ **Follow up:** Ensure patients complete scheduled screenings.
- ✓ **Discuss results:** Provide clear information on next steps following any test result.

MEMBER REWARDS REMINDER

Encourage patients to report their colonoscopy to earn a reward. Direct members to this link to sign up: metroplus.org/member-rewards/.

PRIORITIZING PRENATAL AND POSTNATAL CARE

In New York State, where infant mortality has decreased by about 34% over the past decade, guiding expectant and new mothers through their pregnancy and beyond remains a critical mission.



Regular prenatal and postnatal checkups are key for early identification and management of potential health concerns, contributing to the ongoing well-being of mothers and their babies.

Prenatal care: A structured approach

The prenatal period is a time of significant change and development, making regular and planned checkups crucial. Guidelines generally recommend monthly visits up to the 28th week, then biweekly until the 36th week, and weekly thereafter until delivery.

This schedule supports timely monitoring of fetal development and maternal health, allowing for early intervention if necessary. For women with high-risk pregnancies, adjustments may include more frequent checkups or specialized tests.

Postnatal care: Critical follow-ups

Schedule postnatal visits within three weeks after delivery to check on the mother's physical and emotional recovery. Follow up with ongoing care as needed, with a comprehensive final visit around the 12th week. Use this time to assess issues like pain management, breastfeeding, physical health, and postpartum depression.

Discussing post-pregnancy concerns is vital for long-term wellness. Identifying issues now ensures new mothers receive timely treatment needed to prevent severe health problems in the future.

MEMBER REWARDS REMINDER

Encourage patients to go to a postnatal visit to earn a reward. Direct members to this link to sign up: metroplus.org/member-rewards/.

Healthy lifestyle habits for a safe pregnancy

During prenatal appointments, advise expectant mothers to maintain a balanced diet of:

- Whole fruits
- Vegetables
- Whole grains
- Proteins, like lean meats, beans, and seeds
- Low-fat or fat-free dairy
- Oils, like olive oil and oils in nuts

In addition, stress the importance of avoiding tobacco, alcohol, and foods high in mercury or linked to listeria. Encourage moderate exercise, proper hydration, and adequate sleep to support a healthy pregnancy.

Extension for postpartum coverage

MetroPlusHealth covers postpartum health care for 12 months. This is an extension of the previous coverage period of 60 days. Find out more [here](#).

HEDIS®-approved codes

Prenatal Visit CPT: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99483

Postpartum Visit CPT: 57170, 58300, 59430, 99501

Telephone Visit CPT: 98966, 98967, 98968, 99441, 99442, 99443

Online Assessment CPT: 98969, 98970, 98971, 98972, 99421, 99422, 99423, 99444, 99457, 99458

Postpartum Depression ICD-10 CM: F53.0 (Postpartum depression); O90.6 (Postpartum mood disturbance)

Please use these codes when appropriate.

Key insights on child hearing and vision screenings



Ensuring the holistic development of children is a priority. Early hearing and vision screenings are pivotal steps in this journey. By identifying potential issues early, providers can pave the way for better learning, communication, and social development.

Screening guidelines

Hearing screenings should happen within one to two days of birth. The American Academy of Pediatrics also recommends that all kids have hearing tests at ages 4, 5, 6, 8, and 10, plus screenings between ages 11 to 14, 15 to 17, and 18 to 21.

Newborns should have their eyes checked at birth for any abnormalities. After that, screenings are recommended at each well-child visit.

Developmental impact

Hearing or vision impairments can hinder a child's ability to engage with their surroundings. Specifically, it can lead to:

- Delayed speech and language skills
- Difficulty making friends
- Lower levels of academic achievement

Regular screenings enable early detection, when interventions can have the biggest impact. Children with proper support can achieve milestones in line with their peers, fostering a sense of belonging and enhancing self-esteem.

Recognizing the signs

Parents should know that the following could indicate vision or hearing difficulties:

Vision issues	Hearing issues
Persistent squinting or blinking	Inattentiveness
Headaches	Ignoring auditory cues
Trouble concentrating	Does not follow directions
Chronic eye rubbing	Delayed speech development

Navigating COVID-19 vaccination conversations

Encourage your patients to keep up with their COVID-19 shots. Regular updates ensure maximum protection against the virus and its variants.

Beyond vaccination, reinforce the significance of ongoing preventive measures. Encourage patients to:

- Wash hands often with soap and water.
- Avoid close contact with people who are sick.
- Stay home when feeling unwell or after testing positive.
- Reach out promptly following a positive test to receive care and guidance.

Older adults and those with underlying health conditions face a higher risk of serious complications from COVID-19. Tailor your discussions to emphasize the importance of vaccination and masking for these groups, providing them with the protection they critically need.

Flu shot reminder

Patients should get a flu shot every fall. Encourage patients to report their flu shot to earn a reward. Direct members to this link to sign up: metroplus.org/member-rewards/.

The crucial role of vaccination guidelines

Advancing a culture of vaccination is essential for protecting patients against serious illnesses. Providers play a key role in this by educating patients on the significance of receiving vaccinations throughout their lives.

Vaccination guidelines for all ages

HEDIS® metrics are used to track vaccination rates. For MetroPlusHealth, this includes monitoring:

Vaccinations in early childhood — ensuring children up to 2 years old receive:

- 4 doses of diphtheria, tetanus, and acellular pertussis (DTaP)
- 3 doses of inactivated poliovirus vaccine (IPV)
- 1 dose of measles, mumps, and rubella (MMR)
- 3 doses of *Haemophilus influenzae* type b (Hib)
- 3 doses of hepatitis B (HepB)
- 1 dose of varicella (chickenpox)
- 4 doses of pneumococcal conjugate vaccine (PCV)
- 1 dose of hepatitis A (HepA)
- 2 or 3 doses of rotavirus (RV)
- 2 doses of influenza vaccine

Teen immunization — tracking vaccinations received by 13-year-olds, including:

- 1 dose of meningococcal vaccine
- 1 dose of tetanus, diphtheria, and acellular pertussis (Tdap)
- Completion of the human papillomavirus (HPV) series

Vaccination for adults — ensuring those 19 and older are current on:

- Influenza vaccine
- Tetanus and diphtheria (Td) or Tdap
- Zoster (shingles)
- Pneumococcal vaccines

Immunizations during pregnancy — the rate of pregnant members receiving:

- Influenza vaccine
- Tdap vaccine

BEST PRACTICE REMINDERS

Maintaining community health and wellness requires adherence to the highest standards in immunization practices. Follow **clinical practice guidelines** and also enter all administered immunizations into the **Citywide Immunization Registry**.

For COVID-19 Coverage and Billing Guidance, click [here](#).

Follow guidelines for prescribing opioids

Prescription opioids, used appropriately, have a role in pain management. But they also have serious risks, including opioid use disorder and overdose. Guideline-based principles of opioid prescribing help ensure that the risks of opioid therapy don't outweigh the benefits for a given patient.

Before starting a patient on opioid therapy for chronic pain, evaluate their history to determine whether taking an opioid would put them at high risk for opioid

use disorder or overdose. Exercise caution if your patient has a history of a substance use disorder or a mental health condition such as depression. Consider alternate treatment options when possible.

If opioids are prescribed for chronic pain, monitor patients closely. Don't provide more opioid medication than is needed, and avoid concurrent prescribing of benzodiazepines. Follow these **CDC recommendations** for prescribing opioids.



Talk with patients about domestic violence

Health care visits are an opportunity to offer education and support to patients experiencing domestic violence. Talking about this issue can be challenging, but it has the potential to prevent harm and save lives.

Providers should employ a nonjudgmental approach, actively listen, and respect the patient's autonomy and decisions. It's crucial to recognize signs of abuse, which may not always be physical, and include emotional, financial, or psychological harm.

Let patients know that help is available in the community. NYC has a large support network of caring professionals as well as many resources to help people stay safe. The NYC Domestic Violence Hotline is available at **800.621.HOPE (4673)**. In addition, NYC operates a Family Justice Center (FJC) in every borough. Individuals can walk in or call 311 to connect with the FJC nearest them. For the link to FJC, click **here**.

Compliance Hotline

MetroPlusHealth has its own Compliance Hotline, **888.245.7247**. Call to report suspected fraud or abuse, possibly illegal or unethical activities, or any questionable activity. You may choose to give your name, or you may report anonymously.

BetterDoctor

MetroPlusHealth is partnering with industry leader Quest Analytics' BetterDoctor solution to simplify our verification process.

Now, BetterDoctor (a division of Quest Analytics) will reach out to you on a 90-day basis to ensure that your information in our Provider Directory is accurate, based on CMS's "No Surprises Act" guidelines. BetterDoctor will provide us with any updates needed to maintain accurate information about your practice for our Directory. Soon you won't need to reach out to MetroPlusHealth any longer regarding validation.

With BetterDoctor on our team, keeping your information current will be easier. We'll have a more robust, efficient process in place for your data intake, and a streamlined means of ensuring its accuracy.



Report any demographic changes

Notify MetroPlusHealth of any changes to your demographic information or if you leave your practice or join a new one. Changes can be faxed in writing on office letterhead directly to MetroPlusHealth at **212.908.8885**, or by calling the Provider Services Call Center at **800.303.9626**, Monday to Friday, 8 a.m. to 6 p.m.

Access and availability standards: TIPS FOR SUCCESS

MetroPlusHealth would like to remind you that with your assistance we are committed to helping our members stay healthy and receive the health care services within NYS accessibility standards. Provider practices are expected to have procedures in place to schedule patient services within the following time frames and provide 24-hour accessibility.

- MetroPlusHealth participating providers must be available to patients, 24 hours a day, 7 days a week, 365 days a year, either directly or through coverage arrangements.
- Ensure that patients' calls are responded to by live voice or covering answering service, or via an answering service with direct access to the provider or covering provider.
- If an answering machine is used, it must provide an option for the patient to directly contact the provider or covering provider to address emergencies.
- Responses via an answering machine should give the patient options to request a call back and not simply refer the patient to an emergency room, except for a life-threatening issue.
- MetroPlusHealth highly suggests that your practice review the access and availability standards on a regular basis with your schedulers and call centers where applicable.
- When possible, perform secret shopper audits to evaluate and determine if your practice is in compliance with NYS regulations.
- Audit and educate staff and practices that fail self-conducted audits and implement corrective action plans to ensure compliance.



If you have any questions, please contact the Provider Services Call Center at **800.303.9626**, Monday to Friday, 8 a.m. to 6 p.m.

For a list of our Behavioral Health Access and Availability standards, [click here](#).

Medicaid Managed Care Primary Care Providers are required to schedule appointments in accordance with the aforementioned appointment and availability standards. Providers **must not** require a new patient to complete prerequisites to schedule an appointment, such as providing a copy of their medical record, a health screening questionnaire, and/or an immunization record. The provider may request additional information from a new member if the appointment is scheduled at the time of the telephonic request.