

# MetroPulse Provider Newsletter

FALL 2025



## Encourage flu vaccination this fall

Flu season has arrived, and now is the time to talk with your patients about vaccination. Whether they come in for a routine checkup, chronic disease management, or a sick visit, don't miss an opportunity to:

- Review their immunization history
- Recommend the seasonal flu shot
- Share the benefits of being vaccinated

Recommend annual flu vaccination for patients 6 months and older — especially those at higher risk for severe flu complications, including older adults, pregnant women, and those with chronic health conditions.

Patients may decline vaccination due to safety myths, worry about side effects, or a fear of injections. Take a moment to:

- Reassure them that flu vaccines are safe and rigorously tested
- Clarify that the flu vaccine cannot cause the flu
- Emphasize the vaccine's role in reducing illness severity, hospitalization, and death

Protect your patients and yourself by staying updated on the latest **flu guidance from the CDC**.

### PROVIDER TIP:

The New York State Department of Health urges residents to get the flu vaccination by the time flu season rolls around. Check your stock in preparation for fall demand.

## 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.

# Table of contents

## Flu vaccination 1

Encourage flu vaccination this fall.

## BetterDoctor 3

Improve office data accuracy.

## Access and availability standards 4

Observe guidelines for securing appointments.

## Cervical cancer screening 5

Follow guidelines for testing.

## Adult vaccination 5

Ask about vaccination status at every visit.

## Well-child visits 6

Monitor growth and developmental delays.

## Preventive care for adolescents 7

Offer routine screenings and vaccines.

## Monitor blood pressure 8

Discuss blood pressure at every visit.

## Heart failure care 9

Identify and overcome any barriers.

## Breast cancer screening 10

Discuss early detection and address any myths.

## Oral health 11

Recommend regular dental exams.

## Medication therapy management 12

Talk to patients about the benefits of this program.

## Compliance hotline 12

Report fraud or abuse to the compliance hotline.

## Provider referrals 12

Help MetroPlusHealth expand our network.

## Lifestyle medicine 12

Learn about scholarship and grant programs.

## Quality management program 12

Ensuring access to health care.

## Demographic updates 12

Report changes to your demographic information.

## FALL 2025

Read more about the following topics on our website:

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

## Provider Services Call Center

Monday–Friday, 8 a.m. to 6 p.m. **800.303.9626**

**Questions about the Restricted Recipient Program (RRP)?** Learn more [here](#).

## New Medicare BHUM fax number

As of April 1, please use the new Behavioral Health Utilization Management (BHUM) Medicare Fax Line: **212.908.3323**  
Providers may continue to use other fax lines below:  
ABA Fax Line: **212.908.5182**  
BHUM Fax Line: **212.908.5208** (except ABA and Medicare)  
BHUM Appeals Fax Line: **212.908.5209**

Get *MetroPulse* delivered to your inbox by emailing [ProviderRelationsOps@metroplus.org](mailto:ProviderRelationsOps@metroplus.org).

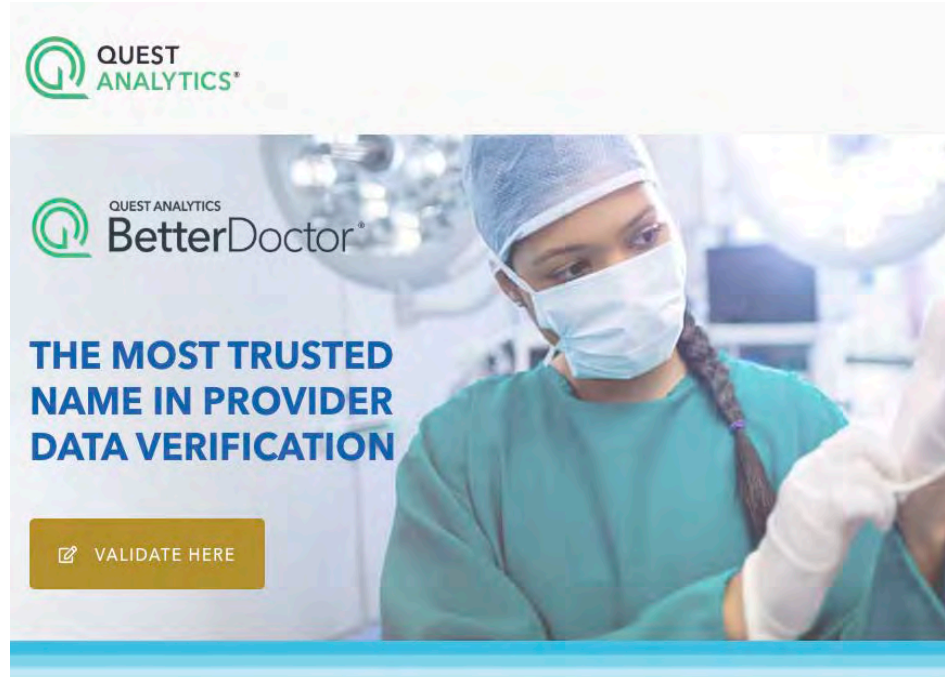
# Update your directory information with BetterDoctor

MetroPlusHealth has partnered with BetterDoctor to ensure your practice information stays accurate. Keeping your details up-to-date, including your address, phone number, office hours, languages spoken, and website, helps MetroPlusHealth members find and schedule appointments with providers.

Both New York state and the federal government (under the No Surprises Act, effective January 1, 2022) require providers to maintain the most current demographic information for their practice, available practitioners, and services in the health plan directories where they participate.

If information cannot be verified, your practice locations could be removed from the MetroPlusHealth Provider Directory.

BetterDoctor will reach out every 90 days to confirm your directory entry is correct. They will then submit any updates directly to MetroPlusHealth.



To learn more about BetterDoctor, click [here](#). If you have any questions, email [providerrelationsops@metroplus.org](mailto:providerrelationsops@metroplus.org).

## Provider training deadlines: Medicare Model of Care and Annual Cultural Competency Training due by 12/31/2025

Providers are required by CMS to complete the **Annual Medicare Model of Care Training** by **Wednesday, December 31, 2025**. Access the free, self-taught training [here](#). Be sure to complete the attestation at the end of the presentation to have your training marked as completed.

The **Annual Cultural Competency Training** is also due by **Wednesday, December 31, 2025**. Access the training [here](#) and remember to submit your online attestation.

Thanks for your continued commitment to our members.



# 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 health care services within New York state 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, seven days a week, 365 days a year, either directly or through coverage arrangements.
- Ensure that the patient's call is responded to by live voice or a 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 callback 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 New York state 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 call 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, providing their MetroPlusHealth or Medicare ID number or card, a health screening questionnaire, and/or an immunization record. The provider may ask that the new patient bring their ID card and any pertinent information to their first appointment.

# Keep patients up-to-date on cervical cancer screening

It's important for patients to know that getting screened for cervical cancer is a simple way to detect the cancer early, when it's most treatable. Cervical cancer is considered highly preventable because testing can identify abnormal cells before they can turn cancerous.

## Testing options

Tests that can help detect cervical cancer include the following:

- A Pap test allows for the examination of the vagina and cervix as well as the collection of cells to check for abnormal or precancerous changes.
- An HPV test also involves collecting sample cells but tests them for types of human papillomavirus (HPV) that can cause cervical cancer.

## Following the guidelines

Use each office visit to screen patients and keep them on track. These guidelines vary with age and apply to patients regardless of their HPV vaccination status:

**Ages 21 – 29:** Patients should begin Pap testing at age 21 and repeat testing every three years.



**Ages 30 – 65:** Patients should get an HPV test and repeat it every five years or have a combination HPV/Pap test and repeat the test every five years. Another option is getting a Pap test and repeating it every three years.

**Older than 65:** If patients have been screened regularly with normal results, most can stop testing.

## Encourage adult vaccination

Three of every four adults are missing at least one recommended vaccine, and rates declined further during the COVID-19 pandemic.

The National Adult and Influenza Immunization Summit (NAIIS) is calling on providers to help reverse these trends by:

- Asking about vaccination status at every visit, even if you don't stock or administer vaccines in your office
- Identifying gaps and recommending that patients get missing immunizations
- Administering necessary vaccines or referring patients to other providers to get them, when necessary

- Documenting vaccinations in patient health records

Most of all, answer questions that patients have and encourage vaccination, especially for those with chronic conditions.

### 2025 VACCINATION SCHEDULE

For the 2025 Recommended Adult Immunization Schedule from the CDC, click [here](#).

# Well-child visits: Your frontline defense against developmental delays

Most children hit developmental milestones, such as walking and talking, at the appropriate time. But if a child begins to fall behind, it's critical to catch the problem as soon as possible.

Neural circuits are most adaptable in the first three years of life. Early intervention during this period can address developmental delays and improve outcomes for children and families.

That's why well-child visits are so important. Following the periodicity schedule allows you to monitor growth and development and discuss milestones, behaviors, and learning with parents.

Between the physical exam and these conversations, you can detect delays or symptoms of health conditions early — and help take action when it's most likely to be effective.

## Forming bonds with families

Seeing parents and children regularly builds trust and rapport. During well-child appointments, practice active listening — make eye contact, don't interrupt, remain nonjudgmental, and paraphrase what families say.

This helps you build a therapeutic alliance with families so that they're more comfortable raising concerns and more likely to follow guidance on topics such as vaccination.

You'll also model strong, supportive relationships. This promotes social and emotional development.

## Giving kids a healthy foundation

During well-child visits, talk with parents about preventive health and healthy habits. Discuss:

- **Sleep.** Getting enough rest is crucial as kids grow, and inadequate sleep is associated with obesity and other health issues.
- **Screen time.** Excess time with phones, computers, or TV contributes to problems like weight gain, poor sleep, declines in mental health, and academic problems. Help parents establish **screen time guidelines**.



- **Nutrition.** A diet rich in fruits, vegetables, whole grains, lean meats, and low-fat dairy supports development, strong bones, and immunity, among other benefits.
- **Safety.** Offer age-appropriate guidance on topics such as car seat use, firearm storage, and poison control.

## Importance of lead testing

New York state law mandates lead testing in children, with results submitted to the New York State Department of Health (DOH). If a child's blood reveals lead exposure, providers should conduct further testing, advise parents or caregivers on prevention strategies, and offer feedback on reducing risk. Nutritional counseling plays a crucial role, too, as a healthy diet can help limit the absorption of lead. For provider resources, click [here](#).



# Key preventive care for adolescents

Bright Futures and the American Academy of Pediatrics define adolescence as occurring between the ages of 11 to 21. The many changes these patients experience during this time should be reflected in their preventive health care.

You can refer to the **Bright Futures Toolkit** for forms and other resources to assist with health history and age-specific assessments and questions.

Anticipatory guidance should be given on topics like nutrition, sexual health, sleep, social media, and safety.

## 2025 Child and Adolescent Immunization Schedule

For the 2025 Recommended Child and Adolescent Immunization schedule for 2025 from the CDC, click [here](#).

<b>Human papillomavirus (HPV)</b>	Two doses should be given at least six months apart, starting from 11 to 12 years old. The series can start as young as age 9. Start/complete the series at older ages if needed.
<b>Meningococcal</b>	Give dose one from 11 to 12 years old; give dose two at age 16. Offer shots to patients ages 13 to 18 who haven't completed the series.
<b>COVID-19</b>	Offer updated vaccines to all patients ages 6 months and older as needed.



## Routine screenings

<b>Anxiety</b>	Screening should start at age 8.
<b>Depression and suicide risk</b>	Screening should begin at age 12.
<b>Lipid panel</b>	Universal testing for dyslipidemia should be done once between ages 9 and 11 and 17 and 21.
<b>STI testing</b>	<b>HIV:</b> Universal testing once between ages 15 and 18. Everyone at least once between ages 13 and 64.  <b>Gonorrhea and chlamydia:</b> Annually for sexually active women younger than age 25 and men who have sex with men.  <b>Syphilis:</b> Sexually active men who have sex with men and anyone who is pregnant.

## Tips for establishing patient trust

Building trust with adolescent patients is key to gathering sensitive information that supports better care. Start by using open-ended questions to encourage honest conversation. Around age 12, consider asking the parent or caregiver to step out

of the exam room for the second half of the visit. Explain to both the patient and caregiver that confidentiality is protected by federal and state laws, and clarify what information can be shared and under what circumstances.

Get *MetroPulse* delivered to your inbox by emailing [ProviderRelationsOps@metroplus.org](mailto:ProviderRelationsOps@metroplus.org).

# Help patients monitor blood pressure



Hypertension can lead to serious complications like heart attack, stroke, and kidney disease — and it remains one of the most modifiable risk factors for premature death. Despite this, three-quarters of U.S. adults with high blood pressure do not have it under control. As a provider, you play a critical role in early detection and personalized management.

Take a moment at every visit to:

- Check and document blood pressure
- Review medication adherence and side effects
- Adjust treatment based on individual risks

The New York State Department of Health recommends individualized blood pressure targets, with follow-up for patients when readings are elevated. For older adults or those with multiple comorbidities, a more conservative blood pressure target may be appropriate.

## Small lifestyle wins add up

The DASH eating plan has been shown to lower systolic blood pressure. Encourage patients to adopt healthy habits such as eating more fresh produce and whole grains, and limiting sodium intake. Also, promote regular physical activity — ideally up to 150 minutes of exercise per week.

Consider referrals to dietitians, exercise programs, and community support groups. Even modest changes can significantly reduce blood pressure and improve outcomes. Help patients set short-term, personalized goals to stay motivated.

## Schedule follow-ups

Frequent follow-up is key. Encourage patients to track home blood pressure readings between visits. Automated cuff loan programs may be available via Medicaid or state programs.

## Behavioral health resources

Mental health is just as important as physical health. If your patient needs support, MetroPlusHealth offers a range of behavioral health services. Find the resources **here**.

You can also view our **Good4YouHealth Library**, a valuable tool filled with helpful articles and resources to support your patients' well-being.

Thanks, as always, for the great care you provide our members.



Get *MetroPulse* delivered to your inbox by emailing [ProviderRelationsOps@metroplus.org](mailto:ProviderRelationsOps@metroplus.org).



# Partnering with heart failure patients for better outcomes

The importance of self-care in the treatment of heart failure cannot be overstated. When patients are actively engaged in their health, they feel better, live longer, and have slower disease progression.

While patients may feel overwhelmed at first, working together to identify and overcome barriers can be a big help. Discuss the following to empower them in their treatment management:

## **Weighing daily**

Encourage patients to weigh themselves at the same time each morning while wearing the same clothing. Have them watch for any sudden weight changes. Ask that patients alert you if they have gained (or lost) more than 2 pounds in one day or 4 to 5 pounds in a week.

## **Recognizing early warning signs**

Patients should pay close attention to their bodies on a daily basis, which will allow them to catch and act on any changes. Advise patients to examine their extremities daily for any swelling as well as note changes in breathlessness. Ensure that patients know how and when to report these problems.

## **Adopting a healthier diet**

Encourage patients to eat a whole food diet and avoid processed foods, which are often high in sodium, added sugars, and unhealthy fats. Patients can easily improve their diets by cooking at home more often and choosing foods with simple ingredients.

## **Increasing exercise**

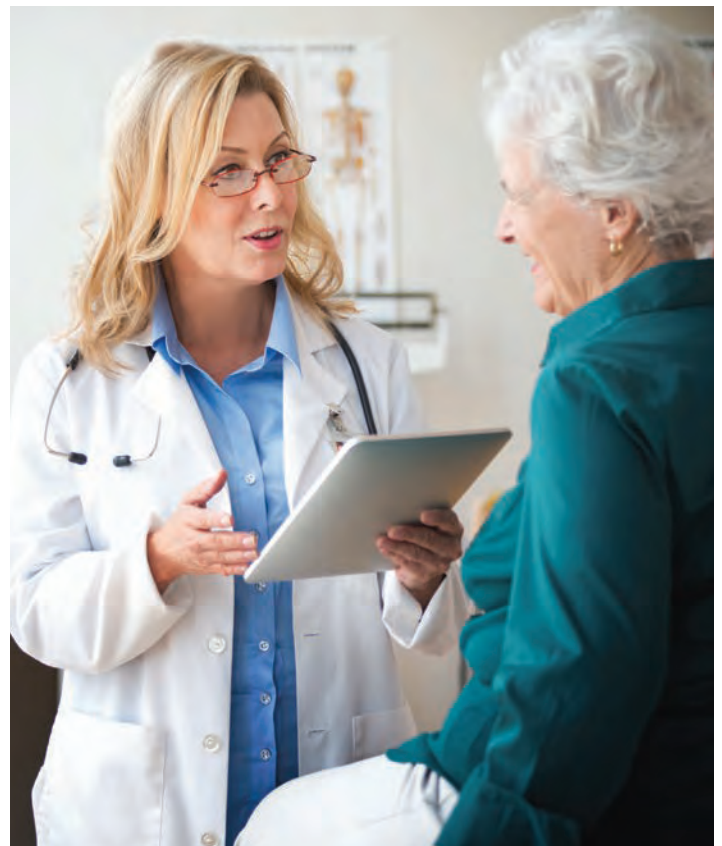
Although exercise is not always comfortable for people with heart failure, patients should know that it can actually strengthen their heart. Encourage them to begin with short walks and slowly build up endurance.

## **Considering fluid intake**

Heart failure patients are not only at risk of overhydrating but also becoming dehydrated — especially if they are severely limiting fluids. Talk with patients about how to balance fluid intake for their individual needs.

## **Addressing sleep and stress**

The impact of sleep problems and stress on people with heart failure can be significant, and may make symptoms worse. Patients should prioritize getting good rest and see a specialist if they suspect a sleep disorder. Patients who struggle to keep stress under control may benefit from a referral to a counselor or support group.



## **CARDIAC REHAB TOOLKIT**

Cardiac rehabilitation programs can significantly improve the health and well-being of patients with heart failure. For a Cardiac Rehabilitation Communications Toolkit from Million Hearts®, click [here](#).

# Overcoming mammography myths



Breast cancer is the second leading cause of cancer deaths in American women. Screening mammograms can help detect the disease early — sometimes, up to three years before a lump can be felt.

Early detection can improve treatment options and

outcomes, but their benefits must be known in order to be taken advantage of. Talk with your patients about options that are right for them, and answer questions about risks or their worries.

## **Myth: Every woman's screening schedule is the same.**

The U.S. Preventive Services Task Force (USPSTF) recommends that women ages 40 to 74 get a mammogram every other year. But a different strategy may apply to those who have:

- A personal history of breast cancer
- A family history of breast cancer or a known genetic risk factor
- Had high-dose radiation therapy to the chest before age 30
- Previous high-risk lesions

For these patients, options include starting as young as age 30, more frequent screening, and combining mammography with magnetic resonance imaging (MRI).

## **Myth: There's nothing patients or providers can do to improve the experience.**

Because they involve compressing the breasts, mammograms can be uncomfortable or even painful for some women. You can suggest that patients, especially those with sensitive breasts:

- Avoid scheduling their mammograms the week before or the week of their periods. Breasts tend to be more tender and swollen at this time.
- Wear a top and a skirt or pants, rather than a dress, so they only have to disrobe from the waist up.
- Tell their technician if they have breast implants.

## **Myth: An abnormal mammogram always means cancer.**

Follow-up testing may include additional mammograms, ultrasound, or a biopsy. Explain to patients that false positives are more common in younger women, those taking estrogen, and those with a family history of breast cancer.

### **REMINDER: DOCUMENT ALL VISITS**

Make sure to document all breast screening visits. Breast cancer screenings are a measure in the MetroPlusHealth Pay-for-Performance (P4P) program, and your data is used as part of the program. Access your gaps in care list by reaching out to your MetroPlusHealth Quality Management contact or by calling the Provider Services Call Center at **800.303.9626**, Monday to Friday, 8 a.m. to 6 p.m.

## Tuberculosis cases are rising

Tuberculosis (TB) remains a concern for New York City residents. New data shows cases of this bacterial disease are rising. If you encounter a patient, including children, with suspected or confirmed TB, it's mandatory to report it to the New York City

Health Department, which provides guidelines for TB treatment, referrals, and reporting. For more information, click [here](#). To reach the TB Provider Hotline, call **844.713.0559**. For provider resources on tuberculosis, click [here](#).

Get *MetroPulse* delivered to your inbox by emailing [ProviderRelationsOps@metroplus.org](mailto:ProviderRelationsOps@metroplus.org).

# Improve oral health, one smile at a time



As a provider, the role you play in identifying early signs of disease and reinforcing preventive habits is key. A healthy mouth supports better overall health for children and adults. The opposite is also true.

Problems like gum disease and cavities increase the risk for:

- Diabetes complications, such as trouble controlling blood sugar
- Heart disease, including heart attack and stroke
- Infections that spread to other parts of the body
- Poor nutrition that affects physical growth and development
- Pregnancy complications, like premature birth and low birth weight

Conversely, patients are more likely to experience oral health problems if they are pregnant or have chronic conditions like:

- Attention-deficit/hyperactivity disorder (ADHD)
- Diabetes
- Gastroesophageal reflux disease (GERD)

## Care reminders

During well-child and preventive visits, you should:

- **Ask questions about oral health.** Learning about a patient's oral status, diet, and daily habits can help you gauge their health risks and whether topical fluoride is needed, make referrals, and provide relevant self-care information.
- **Look for physical signs of problems that require dental or other care.** These include tooth decay, gingivitis, and plaque.
- **Recommend regular dental exams.** Children should start checkups by age 1. Most people need to see their dentist at least once a year. Those with chronic conditions or other elevated risk factors for oral disease may need more frequent checkups.

- **Share appropriate anticipatory guidance.**

Topics include oral care and hygiene and nutrition. Discuss **local resources** to help with any challenges.

For Bright Futures guidance on dental care topics, click **here**. Under Oral Health Supervision, select from "Pregnancy and Postpartum," "Infancy," "Early Childhood," "Middle Childhood," and "Adolescence."

Remember to use the following codes when providing treatment or making referrals:

- **Oral Evaluation, Dental Services (Medicaid Child and CHP):** D0120, D0145, D0150
- **Adult (Cleaning):** D1110 & D4910

## Have your patients used their dental benefits yet?

Regular checkups and cleanings help your patients maintain healthy smiles and may prevent painful, costly problems down the road.

Through our partnership with DentaQuest, MetroPlusHealth offers high-quality dental care across all five boroughs.

Coverage may include:

- Routine and preventative care
- Emergency services
- Diagnostic imaging
- Restorative treatments

For more information, visit **[metroplus.org/members/health-information/dental-health/](https://metroplus.org/members/health-information/dental-health/)**.

Remind your patients to use their dental benefits — and direct them to MetroPlusHealth **Find a Dentist**.

**Note:** For Medicaid members, dental benefits are governed by NYS Medicaid. All Medicaid Managed Care Plans follow the same benefit structure.

*Stay tuned for our upcoming 2025 Provider Webinar Trainings. More to come soon.*



## Compliance hotline

If you suspect fraud or abuse, possibly illegal or unethical activities, or any questionable activity, call MetroPlusHealth's Compliance Hotline at **888.245.7247**. You may choose to give your name, or you may report anonymously.

## Help us grow the MetroPlusHealth provider network

We're seeking exceptional providers — especially those you trust with your referrals. Expanding our network helps enhance the member experience and more referral opportunities for your practice.

*Why join our network?*

- Nearly 40 years of service
- Dedicated Provider Call Center
- Access to Provider Network Specialists
- 90% of electronic claims processed within 30 days
- Provider engagement events
- Pay-for-performance initiatives and more

Do you know a provider who would be a great addition? Refer them **here**. It's quick and easy. They'll be joining our more than 34,000 providers delivering high-quality patient-centered care. And remember to refer your patients to our in-network providers. You can find them through our provider search **here**.

## Lifestyle medicine scholarship opportunities

The American College of Lifestyle Medicine offers scholarships and awards for health professionals dedicated to advancing lifestyle medicine.

To explore scholarships and grants, click **here**.

## Quality management program

MetroPlusHealth wants all New Yorkers to have access to good health care. Our goal is to be the top health plan for the communities we serve. To learn more about the Quality Management Program, click **here**.

## Medication therapy management program



MetroPlusHealth Medicare members have access to the **Medication Therapy Management (MTM)** program. Members who take eight or more Medicare Part D covered maintenance drugs, have three or more chronic health conditions, and are likely to spend more than \$1,623 in prescription drug costs in 2025 are automatically enrolled in this free, voluntary program. Participants in the MTM program are provided with a comprehensive medication review (CMR) and a targeted medication review (TMR). Encourage patients to take advantage of this important service provided by MetroPlusHealth. During the CMR, the member discusses the medications they take with a pharmacist. At the end, the pharmacist gives the patient a medication list with the medications discussed during the CMR as well as a medication action plan, with suggestions from the pharmacist of things the patient should discuss with their provider. With a TMR, MetroPlusHealth will mail or fax suggestions to providers every three months about prescription medications that may be safer or work better than the current medications a member is taking. As always, the prescribing provider will decide whether to consider our suggestions. The prescription medications will not change unless the provider and patient decide to change them.

## Report 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 **212.908.3961** or by calling the Provider Services Call Center at **800.303.9626**, Monday to Friday, 8 a.m. to 6 p.m. Providers who are delegated for credentialing should coordinate all changes through their credentialing team, who regularly sends updates to MetroPlusHealth.