

## Women's Health

### **A completed PRAF = A win-win for the Provider and Member!**

Molina Healthcare and the other Managed Care Plans (MCPs) are working together to raise awareness and utilization of the Prenatal Risk Assessment Form (PRAF). A completed PRAF helps pregnant people receive the best support for a healthy pregnancy. The electronic PRAF (e-PRAF) is submitted through the NurtureOhio site, and a claim can be submitted for \$90 for each PRAF. The e-PRAF has multiple benefits with one submission:

- Automatically notifies the Ohio Department of Job and Family Services (ODJFS) County Office, MCP, and Home Health Care provider of the pregnancy, need for progesterone, and any other needs indicated on the form.
- Allows an Ohio Board of Pharmacy-approved progesterone prescription to be printed and faxed to the appropriate pharmacy.
- Allows provider staff updates by multiple users prior to submission.
- Maintains a pregnant member's Medicaid eligibility without disruption in coverage, equating to prompt provider payment for services throughout the member's pregnancy.

A complete e-PRAF submission is important for the care and referral of members. When vital information is missing, it prevents optimum care of the member and baby. Please fill out each blank on the form. Every pregnant member with Medicaid coverage should be linked to needed services on their very first prenatal visit. An e-PRAF submission ensures a pregnant member doesn't lose coverage and allows the MCPs to assist with the member's needs: transportation, baby supplies, and other wellness needs like smoking cessation help.

The e-PRAF can be found at [nurtureohio.com](https://nurtureohio.com). Below are some links to help your office staff submit a PRAF:

- Provider User Manual: [medicaid.ohio.gov/resources-for-providers/special-programs-and-initiatives/praf/praf-2.0-provider-user-manual](https://medicaid.ohio.gov/resources-for-providers/special-programs-and-initiatives/praf/praf-2.0-provider-user-manual)
- Claim submissions for e-PRAFs have been enhanced: H1000 + 33 modifier should be used to indicate that an e-PRAF has been completed in NurtureOhio in order to receive the \$90.00 rate.
- NurtureOhio PRAF 2.0 Staff Training: [youtube.com/watch?v=ZbhkC8VEQps](https://youtube.com/watch?v=ZbhkC8VEQps)
- Questions or issues: Submit a help ticket or email the Ohio Department of Medicaid (ODM) at: [Progesterone\\_PIP@medicaid.ohio.gov](mailto:Progesterone_PIP@medicaid.ohio.gov)

## Healthy Children

### **Annual dental and well-care visits for school-age children initiative**

Molina continues to stress the importance of overall wellness for children by launching a new quality improvement initiative focusing on Annual Dental and Well-Care Visits. Improving the overall wellness of a child aids in preventing poor academic performance due to absenteeism due to illness. The goal of this initiative is to increase Annual Dental and Well-Care Visits in our Medicaid school-aged children population. As of Aug. 31, 2022, less than half of Molina's school-aged children completed their annual dental visit. Well-care visit rates for Molina's school-aged children were even lower, with less than one-third completion.

According to Healthcare Effectiveness Data and Information Set (HEDIS®)\* measure guidelines, children and adolescents ages 2-20 years should complete at least one dental visit per measurement year. Additionally, children and adolescents ages 3-21 should complete at least one comprehensive well-care visit with a primary care provider (PCP) or an OB/GYN practitioner per measurement year.

We have learned from members that a key driver for increasing dental visits is creating access to pediatric dental services. We will be targeting care deserts and exploring options for mobile services to members in areas that could benefit from them the most. Competing family priorities sometimes outweigh preventive wellness visits.

Providers should take advantage of every office visit, including sick visits, to complete a well-care visit, give needed immunizations, and assess the child's body mass index (BMI). Other best practices include:

- Discussing the importance of preventive care with the member and parent or guardian.
- Reviewing member charts prior to appointments for gaps in care.
- Providing appointment reminders at least 48 hours in advance, which helps remind members to get transportation assistance
- Sending reminders to members that are due for a wellness visit even when they have not been previously seen but have been assigned to the office.

If you are interested in partnering with Molina to improve Well-Child and Dental Visits for school-age children, please reach out to Jamie Keener at [Jamie.Keener@molinahealthcare.com](mailto:Jamie.Keener@molinahealthcare.com).

*\*The Healthcare Effectiveness Data and Information Set (HEDIS) is a registered trademark of NCQA.*

## Chronic Conditions

### All-MCP improvement initiative: DSME and CGM intervention testing

The All-MCP project team is working to increase the number of members who attend Diabetes Self-Management Education (DSME) courses and the number of members with Continuous Glucose Monitors (CGMs). The All-MCP is collaborating with provider practices to make self-management resources easier for members and providers to access. Currently, there are two quality improvement interventions being tested. The DSME group is testing pre-paid DSME slots with the Cleveland Clinic, and the CGM group is testing having CGM-compatible phones in-office with Northeast Ohio Neighborhood Health Services, Inc. (NEON) in collaboration with Pulsewrx.

#### Pre-paid DSME slots

In previous tests of change, care managers were successful in facilitating DSME scheduling. The availability of dedicated DSME appointments increased DSME scheduling and uptake; however, appointments were not always completed, and no-shows were frequent. In the current test cycle, the physician order is eliminated, and pre-paid dedicated DSME appointments are available. The Plan-Do-Study-Act (PDSA) team hypothesized that the removal of the physician order would help to facilitate a seamless referral to DSME and reduce provider abrasion.

From a member perspective, we hope that using the Cleveland Clinic pre-paid dedicated slots will help to increase DSME uptake and decrease no-shows. During the call to schedule the DSME appointment for the member, the care manager uses the Patient Activation

Measure (PAM) tool to assess member readiness. In addition, reminder calls are made 24-48 hours in advance to each member who is scheduled for a DSME appointment. If the member is a no-show or cancels, a care manager will outreach to the member for feedback. By removing barriers to access and facilitating seamless referrals, the project team is looking to increase the utilization and spread of DSME.

### **CGM Pulsewrx phones in-office**

Pulsewrx utilizes the Federal Lifeline Phone Program that gives members phones and service at no cost to them that is compatible with FreeStyle Libre and Dexcom monitoring applications. This allows members to reduce the number of visits to their provider's office by transmitting the data remotely to the respective CGM device's monitoring site for the provider to review. With the ease of viewing the data and real-time monitoring, providers can make informed care decisions such as medication adjustments and recommendations for lifestyle changes quickly to improve their members' conditions.

The project team is also collaborating with NEON and Pulsewrx to test having interested CGM members enroll with the Pulsewrx Phone Program and have their new cell phone shipped to NEON, where they will then sign up for remote monitoring once the phone arrives to the office. The practice staff will assist them in setting up a compatible phone for tracking their health. This concept aims to test the effectiveness of having stocked phones on hand to set new members up with CGM and a compatible phone for remote monitoring. Ideally, this initiative will reduce the number of visits a member will need to make to their provider. This remote monitoring gives the provider the opportunity to see how members are doing with self-management of their diabetes and allows providers to care for more members with available visit times.

With the combination of DSME classes and access to technology such as CGM-compatible cell phones, the project team is empowering members to self-manage their diabetes and, in turn, help the provider in managing their care.

### **Questions?**

Provider Services – [OHProviderRelations@MolinaHealthcare.com](mailto:OHProviderRelations@MolinaHealthcare.com)

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