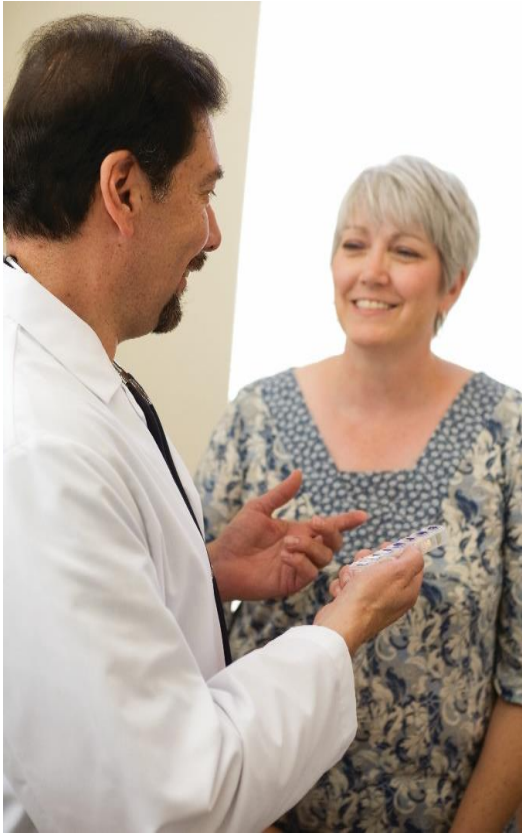


PROVIDER NEWSLETTER

A newsletter for Passport Health Plan by Molina Healthcare

First Quarter 2022



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The Benefits of the Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits. **It not only helps to increase patient retention but can also help increase compliance with physician recommendations and improve patient outcomes.**

Focusing together on a positive patient experience will have many important benefits to your practice, including:

- Increased patient retention
- Increased compliance with physician clinical recommendations
- Improved patient's overall wellness and health outcomes
- Ensured preventive care needs are addressed more timely
- Reduced no-show rates

Additional resources to impact the member experience are available for office staff and patients:

- For additional after-hours coverage, Passport members can call the **24-Hour Nurse Advice Line** at **800-606-9880**.
- Members can access Interpreter Services at no cost by calling **Member Services** at **800-578-0603**.
- Providers can access the Provider Portal at Availity.com/MolinaHealthcare to:
 - Search for patients & check member eligibility
 - Submit service request authorizations and/or claims & check status
 - Review Patient Care Plan
 - Obtain CAHPS® Tip Sheets
 - Participate in online Cultural Competency trainings (also available at PassportHealthPlan.com, under Health Resources tab)

Please encourage your patients who will receive the CAHPS® survey to participate.

Listed below are several questions asked in the survey regarding patient care:

- When you needed care right away, how often did you get care as soon as you needed?
- When you made an appointment for a check-up or routine care at a doctor's office or clinic, how often did you get an appointment as soon as you needed?
- How often was it easy to get the care, tests, and treatment you needed?
- How often did your personal doctor listen carefully to you?
- How often did your personal doctor spend enough time with you?
- How often did your personal doctor explain things in a way that was easy for you to understand?
- How often did you and your personal doctor talk about all the prescription medicines you were taking?
- How would you rate your personal doctor?

Passport 2021 Quality Improvement Results

Passport conducts an **annual program evaluation** to assess how well we meet the performance goals and objectives for improving the quality and safety of clinical care and services specified within the **Quality Improvement Program Description and Annual Work Plan**. Below are highlights from the annual evaluation.

CAHPS®

As outlined in the previous article, the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is a survey that assesses members' satisfaction with their health care. It allows us to better serve our members.



Passport has received the CAHPS® results of how our members rated our providers and our services.

Medicaid: In 2021, Passport achieved the target goal (66.67th percentile/4 Stars) for the following CAHPS measures: Rating of Health Care, Rating of Health Plan and How Well Doctors Communicate. We need to make improvements in Rating of Personal Doctor.

2021 Clinical Practice Guidelines and 2021 Preventive Health Guidelines are available [here](#)

HEDIS®

Another tool used to improve member care is the Healthcare Effectiveness Data and Information Set or HEDIS®. HEDIS® scores allow Passport to monitor how many members are receiving the services they need. Measures include immunizations, well-child exams, Pap tests and mammograms. There are also scores for diabetes care, and prenatal and after-delivery care.

Medicaid: In 2021, Passport achieved the target goal (66.67th percentile) for the following HEDIS® measures:

- Cervical Cancer Screening (CCS)
- Appropriate Testing for Pharyngitis (CWP) – Total
- Asthma Medication Ratio (AMR) – Total
- Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET) - Total Engagement of AOD Treatment
- Well-Child Visits in the First 30 Months of Life (W30) - First 15 Months

Additionally, we need to make improvements in:

- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - BMI Percentile
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - Counseling for Nutrition
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - Counseling for Physical Activity
- Childhood Immunization Status (CIS) - Combination #10
- Immunizations for Adolescents (IMA) - Combination #2
- Breast Cancer Screening (BCS)
- Chlamydia Screening in Women (CHL) - Total, Comprehensive Diabetes Care (CDC) - HbA1c Control (<8.0%)
- Comprehensive Diabetes Care (CDC) - Eye Exam (Retinal) Performed
- Comprehensive Diabetes Care (CDC) - Blood Pressure Control (<140/90 mm Hg)
- Follow-Up Care for Children Prescribed ADHD Medication (ADD) - Initiation Phase
- Follow-Up Care for Children Prescribed ADHD Medication (ADD) - Continuation and Maintenance (C&M) Phase
- Appropriate Treatment for Upper Respiratory Infection (URI) - Total
- Prenatal and Postpartum Care (PPC) - Timeliness of Prenatal Care
- Prenatal and Postpartum Care (PPC) - Postpartum Care

Culturally and Linguistically Appropriate Services/Disability Resources

Passport also assesses the cultural, ethnic, racial and linguistic needs and preferences of members on an ongoing basis. Information gathered during regular monitoring and annual network assessment is used to identify and eliminate cultural and/or linguistic barriers to care through the implementation of programs and interventions.

Medicaid: Between January 1 and September 30, 2021, 7,120 interpreter services were requested by Passport Medicaid members. This represents 2% of the plan's Medicaid members and 74% of Passport members whose preferred language is not English. Spanish was the top language requested followed by Arabic and Swahili. Passport is a new acquisition for Molina Healthcare; therefore, 2020 data is not applicable/available for comparison. Year over year trending will be available in future analyses.

Overall, Passport found that the current Culturally and Linguistically Appropriate Services program resources, structure, and practitioner and community participation are sufficient based on member needs. Additionally, Passport has a series of short Cultural Competency training videos (Health Disparities, LGBTQ+, Immigrants/Refugees, etc.) available [here](#) and at PassportHealthPlan.com on the Culturally and Linguistically Appropriate Resources/Disability Resources page listed under Health Resources. Disability resources are also available at this location under Passport Provider Education Series: Americans with Disability Act (ADA), Members who are Blind or have Low Vision, Service Animals and Tips for Communicating with People with Disabilities & Seniors.

The progress related to the goals that Passport has set for the annual CAHPS® survey results and the annual HEDIS® measures can be viewed in more detail on the Passport Website. You can also view information about the Quality Improvement Program and print a copy if you would like one. Please visit the provider page on Passport's website at PassportHealthPlan.com.

Requirements for Submitting Prior Authorization (PA) for Passport



Passport requires prior authorization (PA) for specific services. Passport offers three tools on the PassportHealthPlan.com website to assist you in knowing what services require Prior Authorization: the **PA Code Matrix**, the **PA Guide**, and the **PA Code Lookup Tool**. (NOTE: Always refer to the DMS fee schedules to ensure the service requested is a covered benefit.)

Both the [PA Code Matrix](#) and the [PA Lookup Tool](#) offer detailed information by CPT and HCPCS code regarding PA requirements. The PA Code Lookup Tool is conveniently located on the “home” page of Provider area of PassportHealthPlan.com. The most efficient prior authorization submission method is through our [Provider Portal](#).

When submitting a prior authorization request, it is important to include all clinical information and medical records necessary to support the medical necessity of the requested service/item.

The following is an example of documentation needed:

- Current (up to six months) patient history related to the requested service/item
- Relevant physical examination that addresses the medical need for the requested service(s)
- Relevant lab or radiology results to support the request (including previous MRI, CT, lab or X-ray report/results)
- Relevant specialty consultation notes
- Any other information or data specific to the request showing the member meets the criteria for approving the service/item

By providing all necessary clinical information with the initial request, Passport will be able to make a more timely and complete decision based on the member's current health condition while potentially avoiding a need to request additional supporting documentation. The Urgent/Expedited service request designation should only be used if the treatment is required to prevent serious deterioration in the member's health or could jeopardize their ability to regain maximum function. Requests outside of this definition will be handled as routine/non-urgent. The goal is to have all necessary information to make the appropriate decision during the initial review of the service/item and avoid the need for an appeal if the service/item is denied.

NOTE: In the event a denial is issued and subsequently appealed, please be sure to reference the original decision. If the denial was due to missing information needed to justify coverage, not providing that information with your appeal request will not change the decision and could further delay medically necessary covered services/items. Let's work together to ensure timely and appropriate care for your patients.

Strengthening the Primary Care Setting with Trauma-Informed Care

Passport is dedicated to promoting the importance of **Trauma Informed Practice**.

According to the **National Council for Mental Wellbeing**, an "individual's experience of trauma impacts every area of human functioning – physical, mental, behavioral, social, and spiritual." Implementing a Trauma Informed Care approach in the Primary Care setting can benefit providers, members, and office staff alike. The National Council of Mental Wellbeing reports that Trauma-Informed primary care settings can:

- Create safer spaces for staff
- Improve clinical decision-making
- Equip providers to identify and respond to trauma
- Build collaborative care networks to increase provider capacity to address holistic needs

Passport has adopted the guideline for **Fostering Resilience and Recovery: A Change Package for Advancing Trauma-Informed Primary Care** from **The National Council for Mental Wellbeing**. For more information, please visit our Clinical Program Guidelines on our provider website or visit the **National Council for Mental Wellbeing** to access the guideline [here](#).

Secure Messaging from Claim Status Screen Enabled in Availity Essentials Portal

Passport strives to offer tools to our provider partners so you can get more done with less effort. Passport now offers an integrated messaging feature from the Claim Status screen in the [Availity Essentials](#) portal.

You can submit secure messages from the Claim Status screen directly to Passport using Availity's Messaging Application.

(Note: You will need the Claim Status and the Messaging App roles to access this function. If you're an administrator for your organization, you can assign roles by selecting Maintain User from your account dashboard. Then, select the user and View/Edit their roles.)

Accessing Secure Messaging: Go to Claims & Payments | Claims Status

1. Initiate a message via the "Message this payer" option on the claim status results page. Important: The message must pertain to the current claim listed on the claim status results page.
2. Allow up to two business days for a response.
3. Access the Messaging Queue from the top right corner of your Availity home page.
4. Conversations display as cards. The color of the cards indicates the status.
5. All users have sorting and filtering options. If a message is missing from your queue, clear your filter options.



Availity's Messaging App is a faster, more effective platform for resolving simple queries. The next time you have a question about the status of a claim, try messaging.

Customer Support: If you have questions about Messaging from Claim Status, you can reach Availity Client Services at (800) 282-4548 from 7 a.m. to 7 p.m. CT, Monday through Friday.

Additional Questions? We're here to help. You can reach the Provider Contact Center at **800-578-0775**, or go here to identify and reach out to your [Provider Services Representative](#).

Availity Essentials Portal: We are pleased to offer our providers the Availity Essentials portal, a tool that streamlines your claims management, authorizations, and eligibility/benefit verification. Are you registered yet? [Click here](#) to get started.

Clinician Administered Preferred Drug List 2022

A clinician-administered drug is an outpatient drug other than a vaccine that is typically administered by a health care provider in a clinician's office or other outpatient clinical setting. For example, drugs that are infused or injected are typically clinician-administered drugs.

Passport's **Medical Preferred Drug List** encourages utilization of clinically appropriate and lower net cost products within the following therapeutic drug classes.

The List includes the listed products only; other products may be available under a plan's medical benefit. The listed preferred products must be used first. An exception process is in place for specific circumstances that may warrant a need for a non-preferred product.

Medicaid Medical Preferred Drug List through October 2022

Drug Class	Non-Preferred Product(s)	Preferred Product(s)
Alpha-1 Antitrypsin Deficiency	Aralast® (Alpha-1-Proteinase Inhibitor), Glassia® (Alpha-1-Proteinase Inhibitor), Zemaira® (Alpha-1-Proteinase Inhibitor)	Prolastin C® (Alpha-1-Proteinase Inhibitor)
Hematologic, Colony Stimulating Factors – Short Acting	Granix® (tbo-filgrastum) Leukine® (sargramostim) Neupogen® (filgrastim) Nivestym® (filgrastim-aafi)	Zarxio® (filgrastim-sndz)
Hematologic, Colony Stimulating Factors – Long Acting	Fulphila™ (pegfilgrastim-jmdb), Udenyca® (pegfilgrastim-cbqv), Neulasta® (pegfilgrastim) Nyvepria™ (pegfilgrastim-apgf)	Ziextenzo® (pegfilgrastim-bmez)
Infliximab	Remicade® (infliximab)	Inflectra® (infliximab-dyyb) Renflexis® (infliximab-abda) Avsola™ (infliximab-axxq)
Lysosomal Storage Disorders – Gaucher Disease	VPRIV® (velaglucerase alfa) Elelyso® (taliglucerase alfa)	Cerezyme® (imiglucerase)
Multiple Sclerosis (Infused)	Lemtrada® (alemtuzumab)	Tysabri® (natalizumab) Ocrevus® (ocrelizumab)

Osteoarthritis, Viscosupplements - <i>currently under review</i>	Gelsyn-3 [®] (sodium hyaluronate 8.4mg/ml) GenVisc [®] 850 (sodium hyaluronate) Hyalgan [®] (1% sodium hyaluronate) Hymovis [®] (hyaluronic acid 8mg/ml) Orthovisc [®] (1% sodium hyaluronate) Supartz [®] FX (1% sodium hyaluronate) TriVisc [®] (sodium hyaluronate) Visco-3 [®] (1% sodium hyaluronate) Synvisc [®] (hylan (Avian) 8 mg/mL)	Euflexxa [®] (1% sodium hyaluronate)
Oncology	**Avastin [®] (bevacizumab)	Mvasi [™] (bevacizumab-awwb) Zirabev [®] (bevacizumab-bvzr)
	Herceptin [®] (trastuzumab) Herceptin Hycelta [™] (trastuzumab and hyaluronidase-oysk)	Herzuma [®] (trastuzumab-pkrb) Kanjinti [™] (trastuzumab-anns) Ogivri [™] (trastuzumab-dkst) Ontruzant [®] (trastuzumab-dttb) Trazimera [™] (trastuzumab-qyyp)
Paroxysmal Nocturnal Hemoglobinuria	Ultomiris [®] (ravulizumab-cwvz)	Empaveli [®] (pegcetacoplan)
Rituximab	Rituxan [®] (rituximab) Rituxan Hycela [®] (rituximab-hyaluronidase)	Truxima [®] (rituximab-abbs) Ruxience [®] (rituximab-pvvr) Riabni [™] (rituximab-arrx)
Retinal Disorders (Eye)	Eylea [®] (aflibercept) Lucentis [®] (ranibizumab)	**Avastin [®] (bevacizumab)

Marketplace Medical Preferred Drug List through October 2022

Drug Class	Non-Preferred Product(s)	Preferred Product(s)
Alpha-1 Antitrypsin Deficiency	Aralast [®] (Alpha-1-Proteinase Inhibitor), Glassia [®] (Alpha-1-Proteinase Inhibitor), Zemaira [®] (Alpha-1-Proteinase Inhibitor)	Prolastin C [®] (Alpha-1-Proteinase Inhibitor)
Autoimmune	Actemra [®] (tocilizumab) IV, Cimzia [®] (certolizumab pegol), Orencia [®] (abatacept)	Enyvio [®] (vedolizumab), Ilumya [™] (tilgrakizumab-asmn), Simoni Aria [®] (golimumab), Stelara [®] (ustekinumab)
Botulinum Toxins	Myobloc [®] (rimabotulinumtoxin B)	Botox [®] (onabotulinumtoxin A), Dysport [®] (abobotulinumtoxin A), Xeomin [®] (incobotuliniumtoxin A)
Hematologic, Colony Stimulating Factors – Short Acting	Granix [®] (tbo-filgrastim) Leukine [®] (sargramostim) Neupogen [®] (filgrastim)	Nivestym [®] (filgrastim-aafi), Zarxio [®] (filgrastim-sndz)
Hematologic, Colony Stimulating Factors – Long Acting	Fulphila [™] (pegfilgrastim-jmdb), Udenyca [®] (pegfilgrastim-cbqv), Nyvepria [™] (pegfilgrastim-apgf)	Ziextenzo [®] (pegfilgrastim-bmez), Neulasta [®] (pegfilgrastim)
Hematologic, Erythropoiesis - Stimulating Agents	Epogen [®] (epoetin alfa), Mircera [®] (methoxy polyethylene glycol-epoetin beta), Procrit [®] (epoetin alfa)	Aranesp [®] (darbepoetin), Retacrit [®] (epoetin alfa-epbx)

Hemophilia, Factor VIII	Eloctate® (antihemophilic factor recombinant Fc fusion protein), Helixate® [Antihemophilic Factor (Recombinant), Formulated with Sucrose], Nuwiq® [antihemophilic Factor (recombinant)]	Adynovate® [antihemophilic factor (recombinant), PEGylated], Jivi® [antihemophilic factor (recombinant), PEGylated], Kogenate® [antihemophilic factor (recombinant), Kovaltry® [antihemophilic factor (recombinant), Novoeight® [antihemophilic factor (recombinant)]
Infliximab	Remicade® (infliximab)	Inflectra® (infliximab-dyyb) Renflexis® (infliximab-abda) Avsola™ (infliximab-axxq)
Long-Acting Reversible Contraceptives	Liletta® (levonorgestrel-releasing intrauterine system) Nexplanon® (etonogestrel implant)	Kyleena® (levonorgestrel-releasing intrauterine system), Mirena® (levonorgestrel-releasing intrauterine system) Skyla® (levonorgestrel-releasing intrauterine system)
Lysosomal Storage Disorders – Gaucher Disease	VPRIV® (velaglucerase alfa) Cerezyme® (imiglucerase)	Elelyso® (taliglucerase alfa)
Multiple Sclerosis (Infused)	Lemtrada® (alemtuzumab)	Tysabri® (natalizumab) Ocrevus® (ocrelizumab)

Osteoarthritis, Viscosupplements	Gelsyn-3 [®] (sodium hyaluronate 8.4mg/ml) GenVisc [®] 850 (sodium hyaluronate) Hyalgan [®] (1% sodium hyaluronate) Hymovis [®] (hyaluronic acid 8mg/ml) Supartz [®] FX (1% sodium hyaluronate) TriVisc [®] (sodium hyaluronate) Visco-3 [®] (1% sodium hyaluronate) Synvisc [®] (hylan (Avian) 8 mg/mL)	Euflexxa [®] (1% sodium hyaluronate) Orthovisc [®] (1% sodium hyaluronate) Monovisc [®] (sodium hyaluronate)
Oncology	NA	Firmagon [®] (degarelix)
	**Avastin [®] (bevacizumab)	Mvasi [™] (bevacizumab-awwb) Zirabev [®] (bevacizumab-bvzr)
	Herceptin [®] (trastuzumab) Herzuma [®] (trastuzumab-pkrb) Herceptin Hycelta [™] (trastuzumab and hyaluronidase-oysk) Trazimera [™] (trastuzumab-qyyp) Ontruzant [®] (trastuzumab-dttb)	Kanjinti [™] (trastuzumab-anns) Ogivri [™] (trastuzumab-dkst)
Paroxysmal Nocturnal Hemoglobinuria	Ultomiris [®] (ravulizumab-cwvz)	Empaveli [®] (pegcetacoplan)
Retinal Disorder Agents (Eye)	Eylea [®] (afibercept) Lucentis [®] (ranibizumab)	**Avastin [®] (bevacizumab)
Rituximab	Rituxan [®] (rituximab) Rituxan Hycela [®] (rituximab-hyaluronidase)	Truxima [®] (rituximab-abbs) Ruxience [®] (rituximab-pvvr) Riabni [™] (rituximab-arrx)
Severe Asthma	Cinqair [®] (reslizumab)	Dupixent [®] (dupilumab) Fasenra [®] (benralizumab) Nucala [®] (mepolizumab) Xolair [®] (omalizumab)

Quality Corner: Annual Well Checkups for Adolescents and Adults

Preventive care is a critical component of everyone's health and well-being. PCPs are our health care leaders in ensuring that health conditions of our adolescent and adults are caught as early as possible for best outcomes and providing the preventive health interventions needed to keep people healthy.

For adolescents and young adults (EPSDT-eligible patients):

- The annual exam must include a comprehensive, unclothed exam, height and weight/BMI, nutrition and physical activity counseling, behavioral health screenings, screening for substance misuse including nicotine products, as well as recommendations for dental, hearing and vision screenings. Follow the Bright Futures/AAP Periodicity table for their once a year well check-up – it provides a complete breakdown of all screening elements for each year.
- Well check-ups should be spaced by about a year as much as possible to ensure that there isn't a longer gap between checkups during which time needs may go unidentified and unaddressed.
- Follow the CDC/ACIP immunization schedule, noting any special situations that may require a different timing. You can provide these through the Vaccines for Children Program or from the vaccine supplies you keep in your office for any patient. To reduce barriers to care, it is best to provider immunizations at the time of the well visit and they can be billed in conjunction with that visit E&M code. Patients may need to be brought back for their seasonal flu vaccination depending on time of year.
- Remember that the AAP recommends healthcare transition planning for all teens starting at age 12. This critical process helps teens learn to make appropriate use of healthcare when they become independent for such care at age 18, learn to manage their chronic physical and behavioral health conditions and ensures that they are able to find the right providers for their adult care needs when appropriate.



For adults:

- Use the guidelines for Adult Preventive Services Recommendations from the USPSTF following recommendations by both age and gender.
- If you cannot get an adult patient in for an annual exam, take advantage of a sick visit to set them up for any preventive care screenings they may need.
- Gender or a specific health condition may play a role in where a patient seeks out care for their annual exam. It is important for PCPs and specialists to coordinate care in these instances.
- Telehealth visits can be used when appropriate.
- Adults need immunizations too! Refer to the CDC/ACIP Adult Immunization Schedule for those 19 and over.

Reimbursement for Pediatric Members' Immunizations

Passport will reimburse for the immunization administration billed code for all recommended childhood and adolescent immunizations.



Passport covers the administration of each vaccine dose at the reimbursement rate set by Kentucky's Department for Medicaid Services. When multiple vaccines are given at the same visit, Passport will reimburse for all recommended childhood and adolescent immunizations.

When vaccines are given in conjunction with an Early and Periodic Screening, Diagnosis and Treatment (EPSDT) visit or a physician office visit, Passport will reimburse for the administration of the vaccine in addition to the reimbursement for the visit.

If your practice is a VFC provider, you should submit claims using the SL modifier when billing for the administration of a vaccine provided through the VFC. This communicates to Passport that the cost of the vaccine for the provider was already covered by the VFC Program.

Providers do not have to participate in the VFC program to provide and be reimbursed for immunizations to Passport members.

Providers who offer immunizations during regular visits or well-child visits play a critical role in reducing barriers to this important care for our members.

Go to [Vaccines for Children Program](#) for more information!

Members' 24/7 Nurse Advice Line

Members can call our **Nurse Advice Line** 24 hours a day, 7 days a week to talk to a nurse for health care advice in their language and get the care they need.

Every year, Molina's Nurse Advice Line receives more than **350,000 calls** from members across the United States.

Our call center has been reviewed and approved by a national quality review organization (URAC) since 2007.

When you have a question, call the **Nurse Advice Line** at **(800) 606-9880**, TTY for Deaf and Hard of Hearing: 711.



Kentucky Diabetes Self-Management Education and Support Program (DSMES) Wants to Increase Referrals



Passport is working to increase referrals to Kentucky's **Diabetes Self-Management Education and Support (DSMES)**.

Additionally, we are enhancing care management and care coordination to provide education on exercise and nutrition for members with diabetes.

DSMES can help patients learn to manage their diabetes as part of their daily life and is proven to:

- Improve blood sugar control leading to decreased risk for diabetes complications
- Increase self-confidence about taking care of your diabetes
- Increase healthy eating and physical activity
- Improve quality of life

Passport is also offering members an incentive for completing these classes. Members with diabetes type 1 or type 2 can earn a **\$25 gift card** for completing (DSMES) classes.

We encourage providers to refer members to DSMES and refer to Passport for Care Management as needed.

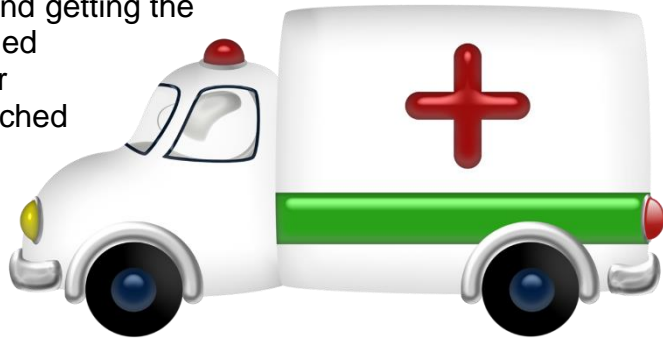
Go [here](#) for details and a link to the **online schedule for free DSMES classes**. Go [here](#) for the **Passport Health Education and Care Management Referral Form**.

Success Story: State-to-State Transport

Passport's **Transitions of Care (ToC)** department received a message that a member was hospitalized out of state. Facility staff requested a call back, but no other details were given. Our ToC Coach called to assist the facility and member and was informed that Sandra had recently been in a severe accident out of state and was now stable enough to return to Kentucky for continued hospitalization and treatment. Medical transportation needed to be arranged for Sandra to make the almost 900-mile journey back home.

Although Sandra was not working with ToC previously, many departments at Passport jumped in to help. ToC called the facility multiple times to help facilitate the safest transport for her situation – some days two or more phone calls to coordinate. When transporting someone, it's important to know when the transport will occur, the condition of the patient, and what special monitoring or care they might need.

After speaking with the staff at the hospital and getting the details of the medical needs, it was determined ambulance transport would be better than air transport for Sandra. Our ToC Coach outreached to Henry with provider services for a list of ambulance services. Some ambulance companies declined to transport as they are not licensed in the same county, which created a barrier. Henry reached out to the ambulance companies to get the denial documentation – this would allow another ambulance company to transport.



Our ToC Coach continued to discuss with the hospital and Passport staff on Sandra's status, along with the transportation details. This took coordination with the out-of-state facility, the receiving facility, ambulance services, and Passport staff. It's important that each facility is prepared for the transfer and the receiving facility must have an open bed for the patient. Our ToC Coach continued to keep the facility and Passport staff informed, and Passport coordinated with EMS to make sure they had all the clinical information needed to safely care for Sandra.

To safely transport Sandra from the out-of-state hospital to her home state of Kentucky, the following departments worked together for the long-distance travel: Transitions of Care/Care Management, Utilization Management, Provider Services, Provider Contracts, Operations, Management, as well as multiple hospital facility staff. Sandra safely transferred back to Kentucky. Once back in her home state and near her family and friends for support, she was able to continue her rehabilitation and soon after returned home.

Healthy Rewards Attestation Form for Members

Passport encourages all our members to regularly see their Primary Care Physician, have an annual comprehensive exam and receive recommended preventive care.

Passport has a Value Added Benefits program called **Healthy Rewards** for our Medicaid members only, which is designed to reward pediatric and adult members for completing annual preventive health exams, screenings, immunizations and follow-up care. More information can be found online [here](#).

Once an appointment is complete, members can request rewards by:

- Contacting Passport when the associated claim is processed, or
- Completing the [2022 Healthy Rewards Attestation Form](#), obtaining their provider's signature, and returning the form to Passport.

Gift cards range from **\$10 to \$50**, excluding the COVID-19 vaccine reward.

To learn more, please visit passporthealthplan.com/rewards or call Provider Services at **800-578-0775**.

The Importance of Fluoride in Oral Health

The [US Preventive Services Task Force](#) (USPSTF) recommends the application of **fluoride twice a year for children from the age of first tooth eruption**. For children who live in areas where fluoride is not in the water supply, it is recommended that PCPs prescribe oral fluoride supplementation as well. In other cases, fluoride in the water supply may not provide enough protection. Additionally, many children don't drink enough water and drink more soft drinks, thus reducing the fluoride exposure and effectiveness. Please see [My Water's Fluoride](#).

Fluoride is preferentially administered by a dentist, but for those children not seeing a dentist, the pediatrician or family physician can apply a **fluoride varnish** as a reasonable alternative twice a year through age 18. In December 2021, the USPSTF reiterated its position with the publication of [Prevention of Dental Caries in Children Younger than 5 Years: Screening and Interventions](#).



If your patient is not seeing a dentist, please provide an oral treatment to help prevent cavities and boost oral health for the child until the child begins seeing a dentist on a regular basis. An oral health home is just as important as a pediatric health home. If you are unable to help a child find an oral health provider in your area, our Member Services team can help. Just call **800-578-0603**, or go to our provider directory at [Home \(sapphirethreesixtyfive.com\)](https://Home.sapphirethreesixtyfive.com).