

April 2024 Provider Newsletter

Contents

[Education and Training](#) | Medicaid | Apr 1, 2024

New digital learning platform for providers

[Education and Training](#) | Medicaid | Apr 1, 2024

April is National Minority Health Month and Stress Awareness Month

[Policy Updates](#) | Medicaid | Mar 22, 2024

Notice of Material Amendment to Healthcare Contract

Carelon Medical Benefits Management, Inc. updates

[Medical Policy & Clinical Guidelines](#) | Medicaid | Mar 19, 2024

Notice of Material Amendment to Healthcare Contract

Clinical Criteria updates — December 2023

[Quality Management](#) | Medicaid | Mar 18, 2024

HEDIS[®] 2024 documentation for Colorectal Cancer Screening (COL-E)

ARSMT-CD-053378-24

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New digital learning platform for providers

Summit Community Care is thrilled to announce the ON24[®] platform for provider coding education and learning. As a valued Summit Community Care network provider, we invite you to experience the new digital learning platform. You'll simply register once to gain access to all the following:

- Live webcasts: Learn from instructors and earn continuing education credits.
- On-demand videos: Watch past webcasts at your convenience.
- Interactive modules: Engage in learning activities and practice coding skills at your own pace.
- Coding guides: Download handy references for accurate and complete coding.

Join us on the new digital platform today and take your learning to the next level.

To ensure the best experience, copy and paste the following registration link into a Google Chrome browser and use the Google Chrome browser when you access the ON24 platform: gateway.on24.com/wcc/eh/4109315/category/130265/ar-summit-community-care?partnerref=Providernews.

ARSMT-CD-049930-24

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April is National Minority Health Month and Stress Awareness Month

We strive to advance health equity so everyone has a fair opportunity to be at their healthiest. As we reduce barriers to whole health — physical, behavioral, and social — and personalize the healthcare journey, we can more effectively advance health equity. While focusing on understanding member needs, we actively develop educational tools for care providers.

In recognition of the American Heart Association designating April as National Minority Health Month and Stress Awareness Month, we are featuring two Continuing Medical Education (CME) courses offered in a comprehensive repository of resources on [My Diverse Patients](#). The site is designed to help care providers support the needs of diverse patients and address healthcare disparities.

For the month of April, our featured eLearning experiences are:

- **Reducing Health Care Stereotype Threat — course benefits:**
 - Understand Health Care Stereotype Threat (HCST) and its implications for multicultural patient groups.
 - Learn to recognize when patients may be experiencing HCST.
 - Explore shifts that you can make to reduce the likelihood that patients from diverse groups will experience HCST.
 - Identify the benefits of reducing HCST to both your patients and your practice.
- **Medication Adherence — course benefits:**
 - Recognize potential barriers to medication adherence and what influences your patients' thoughts and emotions.

- Understand the importance of meeting your patients where they are, and not where you want them to be.
- Learn how to navigate and break through barriers with C.A.R.E.

These courses are designed for: doctors (CME credit provided); nurses; health professionals; and medical office staff.

Providers can view these courses on their smartphone, tablet, or computer.

Through genuine collaboration, we can simplify access to care and help you deliver high-quality, equitable healthcare.

MULTI-ALL-CD-052948-24-CPN52169

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Carelon Medical Benefits Management, Inc. updates

Effective on June 30, 2024, the following *Carelon Medical Benefits Management, Inc. Clinical Appropriateness Guideline* updates for medical necessity review, will apply for Summit Community Care:

- Genetic testing:
 - Hereditary cancer testing
 - Carrier screening in the prenatal setting and preimplantation genetic testing
 - Genetic testing for inherited conditions

Existing precertification requirements have not changed. Please share this notice with other members of your practice and office staff.

ARSMT-CD-050467-24-CPN49779

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Clinical Criteria updates — December 2023

Summary: On December 11, 2023 and January 5, 2024, the Pharmacy and Therapeutic (P&T) Committee approved the following *Clinical Criteria* applicable to the medical drug benefit for Summit Community Care. These policies were developed, revised, or reviewed to support clinical coding edits.

Visit [Clinical Criteria](#) to search for specific policies. If you have questions or need additional information, use this [email](#).

Please see the explanation/definition for each category of *Clinical Criteria* below:

- New: newly published criteria
- Revised: addition or removal of medical necessity requirements, new document number
- Updates marked with an asterisk (*) notate that the criteria may be perceived as more restrictive.

Please note:

- **The *Clinical Criteria* listed below applies only to the medical drug benefits contained within the member’s medical policy. This does not apply to pharmacy services.**
- **This notice is meant to inform the provider of new or revised criteria that has been adopted by Summit Community Care only. It does not include details regarding any authorization requirements. Authorization rules are communicated via a separate notice.**

Effective date	<i>Clinical Criteria</i> number	<i>Clinical Criteria</i> title	New or revised
June 19, 2024	*CC-0255	Loqtorzi (toripalimab-tpzi)	New
June 19, 2024	*CC-0256	Rivfloza (nedosiran)	New
June 19, 2024	*CC-0257	Wainua (eplontersen)	New
June 19, 2024	*CC-0185	Oxlumo (lumasiran)	Revised
June 19, 2024	*CC-0107	Bevacizumab for Non-ophthalmologic Indications	Revised
June 19, 2024	*CC-0002	Colony Stimulating Factor Agents	Revised
June 19, 2024	CC-0075	Rituximab Agents for Non-Oncologic Indications	Revised
June 19, 2024	CC-0213	Voxzogo (vosoritide)	Revised
June 19, 2024	CC-0124	Keytruda (pembrolizumab)	Revised
June 19, 2024	*CC-0110	Perjeta (pertuzumab)	Revised

ARSMT-CD-051274-24-CPN50531

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HEDIS[®] 2024 documentation for Colorectal Cancer Screening (COL-E)

Only Electronic Clinical Data Systems (ECDS) reporting will be used for this measure.

Measure description

The percentage of members 45 to 75 years of age who had appropriate screening for colorectal cancer (revised the age range from 50 to 75 years of age to 45 to 75 years of age).

What we are looking for in provider records

Documentation in the medical record indicating the date when the colorectal cancer screening was performed and result or finding of one or more of the following:

- A pathology report that indicates the type of screening (for example, colonoscopy, flexible sigmoidoscopy) and the date the screening was performed
- Documentation of a Fecal Occult Blood Test (FOBT) during the measurement year (2024)
- Documentation of a flexible sigmoidoscopy during the measurement year or the four years prior to the measurement year (January 1, 2020, to December 31, 2024)
- Documentation of a colonoscopy during the measurement year or the nine years prior to the measurement year (January 1, 2015, to December 31, 2024)
- Documentation of a CT colonography during the measurement year or the four years prior to the measurement year (January 1, 2020, to December 31, 2024)
- Documentation of Stool DNA (sDNA) with FIT test during the measurement year or two years prior to the measurement year (January 1, 2022, to December 31, 2024)

- Documentation of members who are diagnosed with colorectal cancer on or before December 31, 2024
- Documentation of a total colectomy on or before December 31, 2024 (documentation must state total, not partial)
- Evidence of hospice services in 2024
- Evidence patient expired prior to January 1, 2025

Helpful hints:

- Recommend colorectal cancer screening to all patients 45 to 75 years of age.
- If a patient is hesitant, discuss different screening options.
- Educate that screening is recommended, even if there is no family history of colon cancer.

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ARSMT-CD-050269-24-CPN49873

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