

# MedNotes

*For Managed Care Medicaid and Nevada Check Up Providers*

## Community Health Workers

Health Plan of Nevada is excited to introduce its new Community Health Worker program. Community Health Workers (CHWs) will contact members who frequently use the emergency room rather than go to an urgent care or visit their primary care physician (PCP). CHWs will reach out to members to help them navigate their health plan benefits. They will also help connect members to their PCPs and available social service resources.

CHWs can make home visits, follow up on medication issues, attend PCP visits with the member, provide transportation and conduct home assessments.

For more information on the Community Health Worker program, please call **702-797-2100**.



## News

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# Network Core Reporting is Now Available for Primary Care Physicians

Care Opportunities Reporting (CORE) is now available to Health Plan of Nevada SmartChoice/NorthernChoice/Nevada Check Up primary care physicians (PCP) that hold a member panel.

CORE reporting will track 20 HEDIS measures and will identify members who have a gap in care. PCPs will be provided with information on how to effectively close the gap in care for the member through the detailed reporting. CORE is updated weekly through encounter/claims data. **These reports are available in the online provider center (@YourService) under CORE Reports.**



## Measures Currently Identified in the CORE Reporting Tool

- Drug Therapy – Rheumatoid Arthritis
- Diabetes Care – HbA1C Value > 9.0%
- Diabetes Care – Nephropathy
- Breast Cancer Screening
- Diabetes Care – HbA1C Screening
- Colorectal Cancer Screening
- Osteoporosis – Fracture Management
- Access to Visits
- Annual Blood tests for Patients on ACE/ARB
- Annual Blood tests for Patients on Digoxin
- Annual Blood tests for Patients on Diuretics
- Cervical Cancer Screening Due
- Lead Screening in Children

If you have any questions, please contact your provider advocate directly or call Provider Relations at **702-242-7086** or toll-free **1-800-745-7065**.

## Lead Screening Reminder

All lead screening must be completed by a child's second birthday.

## Interested in Cultural Diversity and Sensitivity Training?

View our Developing Cultural Proficiency presentation and find other helpful resources at [myhpnonline.com/Provider/Quality-Corner](http://myhpnonline.com/Provider/Quality-Corner).

## Dental Predetermination Guidelines

All predetermination requests for full mouth treatment plans must be submitted via hard copy to Health Plan of Nevada (HPN).

The following **checklist** must be attached to all HPN Medicaid predetermination requests for dentures and partials (missing four teeth per arch anterior to the second molars or four teeth in a row per arch anterior to the third molars).

- Does the patient have existing dentures/partial? **YES** or **NO**
  - If yes, how old are the dentures/partial?
- Has the patient ever had dentures/partial? **YES** or **NO**
  - If yes, how old are the dentures/partial?
- No matter the age of existing dentures/partial, why do they need to be replaced and can they be repaired and/or relined?
- If the treatment plan is for partials, which teeth are missing, which teeth will be extracted and which teeth will be used as anchor teeth?
- If the treatment plan is for dentures/partial and extractions, list the extractions to be done by the oral surgeon in remarks or in an attachment. Use the tooth chart on the claim form to indicate teeth that are already missing.
- Appropriately submit codes for immediate dentures, D5130 and D5140 as opposed to D5110 and D5120.
- Submit full mouth/comprehensive treatment plans for both arches with diagnostic duplicated x-rays.
- Restorations on anchor teeth for partials must be specifically indicated. Medicaid does not cover root canals in any case for recipients 21 and over.

Please include this completed checklist, x-rays, and any other necessary documents when submitting the predetermination request. This checklist is available online at **myhpnmedicaid.com**.

If you have any questions, please call Dental Provider Relations toll-free at **1-866-253-8378**.

## Oral Surgery Reminder

The Mark Glyman, MD, DDS Group is Health Plan of Nevada's Medicaid and Nevada Check Up preferred provider group for medical and dental oral surgery benefits in Southern Nevada.

- Mark Glyman, MD, DDS
- Eric Swanson, MD, DDS
- James Schlesinger, III, MD, DMD

### Locations

2030 E Flamingo Rd., #288  
Las Vegas, NV 89119  
702-892-0833  
702-892-0906 (fax)

1775 Village Center Circle, #150  
Las Vegas, NV 89135  
702-507-5555  
702-946-1300 (fax)

If you have any questions, please contact the Dental Provider Relations toll-free at **1-866-253-8378**.

## OB Appointments

### Did you know?

- There's no referral or prior authorization required for OB appointments
- Members can choose any Health Plan of Nevada network OB provider
- Delivery is covered under a global prior authorization request
- You have a dedicated OB provider advocate to answer any questions or address concerns you may have.
  - Call Nicole Losoya in Southern Nevada at **702-242-7088**.
  - Call Christina Galan in Northern Nevada at **1-800-745-7065**.

## Do You Have a Behavioral Health Question?

Contact Behavioral Healthcare Options for mental health and substance abuse questions at **702-364-1484** or toll-free **1-800-873-2246**. You can also send a fax to **702-341-7681**.

P.O. Box 15645  
Las Vegas, NV 89114-5645

**MedNotes**<sub>SM</sub>

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