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## Healthy Children: Well-Care Visits

It's important to complete at least one comprehensive well-care visit for children 3-21 years of age each year, even if they are only seeking care for an illness, school physical or specialist referral.

Well-care visits give the child and family an opportunity to:

- Learn about preventative care, such as immunizations and lab tests
- Track growth and development, especially during milestones where vital changes are taking place
- Raise concerns

Well-care visits also present an opportunity to create a team approach to care by building a trustworthy relationship between the provider, parent/guardian and child. Providers can take advantage of every office visit, including sick visits, to complete well-care visits.

Molina Healthcare of Ohio, Inc. will pay for both a new/established patient preventative/well visit and a new/established patient sick visit for the same member on the same date of service if the diagnosis codes billed support payment of both codes.

Note: A well-care visit must occur with a Primary Care Provider (PCP) or Obstetrics and Gynecology (OB/GYN) practitioner.

## Healthy Adults: Annual Wellness Visit

According to the Centers for Disease Control and Prevention (CDC), in 2023, for adults ages 18 to 64 in the United States with Medicaid or other public health insurance<sup>1</sup>:

- 84.7% had a doctor visit within the last twelve months
- 79.3% had a wellness visit within the last twelve months
- 88% had a usual place of care

The Adult Access to Preventative/Ambulatory Health Services (AAP) HEDIS<sup>®</sup> measure focuses on the percentage of members, 20 years of age and older, who had an ambulatory or preventative care visit during the measurement year. To increase the annual visit rates for adults, the tips below may be helpful:

- Use appropriate billing codes to ensure accurate payment.
- Contact patients to schedule an appointment and offer telehealth when appropriate.
- Remind patients of their visit and allow time for scheduling transportation assistance to decrease no-show rates.
  - Molina members should call (866) 642-9279 (TTY 711) at least 48 hours before their visit to schedule a ride. A member can call 24 hours a day, seven days a week and up to 30 days before their visit.

<sup>1</sup>National Center for Health Statistics. *Interactive Summary Health Statistics for Adults*. National Health Interview Survey. Generated interactively: April 09, 2025, from [www.cdc.gov/NHISDataQueryTool/SHS\\_adult/index.html](http://www.cdc.gov/NHISDataQueryTool/SHS_adult/index.html)

## Women's Health: Breast and Cervical Cancer Screenings

Provider messaging is the most powerful communication method for patients.

The American Cancer Society (ACS) has studied the utilization of cancer prevention services. Per the ACS, the patient's physician/practice is the best way to communicate messages encouraging them to get their breast and cervical cancer screenings<sup>2</sup>.

The most trusted messengers are patients' personal doctors, followed by most doctors, medical professionals, national health organizations, government health organizations and insurance plans.

The preferred channels to deliver messages are:

- A discussion with their doctor
- Patient web portal
- Website
- Email
- Handouts from health care providers

Oftentimes, women put off preventive services and cite the needs of family members, their own worsening health needs or other responsibilities. Many women go without their mammogram or pap smear as a result of prioritizing others or other needs. A conversation between doctor and patient could be just the push necessary to help women prioritize their screenings<sup>3</sup>.

As a preferred provider, consider using the messages below, recommended by the ACS, and outreach to your patients. End the message with a call to action for your patients.

- Catch cancer early when it's easier to treat. Regular screening tests can improve and save your life.
- One in three Americans will get cancer, but finding cancer early means it may be easier to treat.
- Screening tests increase the chance of detecting some cancers early when they may be easier to treat.

Another talking point for you to share with Molina members is an incentive: those who complete their breast and/or cervical cancer screening will receive a \$50 reloadable gift card for completing each.

### References:

<sup>2</sup>All about cancer. (n.d.). American Cancer Society. [cancer.org/cancer.html](https://www.cancer.org/cancer.html)

<sup>3</sup>Staff, C. (2025, February 12). *Early detection Saves lives: The essential cancer screenings you can't afford to skip*. Cancer Research Institute. [cancerresearch.org/blog/february-2025/early-detection-saves-lives-the-essential-cancer-screenings-you-cant-afford-to-skip](https://www.cancerresearch.org/blog/february-2025/early-detection-saves-lives-the-essential-cancer-screenings-you-cant-afford-to-skip)

## Chronic Conditions: Hypertension

While May is recognized as National High Blood Pressure Education Month or Hypertension Awareness Month, May 17 is observed as World Hypertension Day.

According to 2023 data from America's Health Rankings, 37.1% of adults in Ohio had been informed by a health professional that they had hypertension<sup>4</sup>. Across the United States, nearly half the adult population has high blood pressure, with only one in four of these individuals having their values under control<sup>5</sup>.

A recent article published by the CDC discussed team-based care as a means to improve blood pressure control. This type of approach aims to improve patient care by including health professionals across disciplines to work collaboratively with the patient and their PCP<sup>6</sup>.

Four key strategies to support the implementation of team-based care include:

- Patient Follow-up

- Medication Management
- Medication Adherence Support
- Self-Management Support

Alongside these efforts, it's essential that providers continue having open discussions with their patients to address healthy lifestyle habits, stress management and medication concerns while also assisting patients with getting connected to self-monitoring supplies, community resources and health plan benefits.

During May, ensure your office is reaching out to patients with hypertension who have yet to schedule an appointment for 2025. Additionally, for patients who are actively receiving care, utilizing Current Procedural Terminology (CPT) II codes is an effective method that allows Managed Care Organizations (MCOs) to see which members are struggling to control their hypertension and could benefit from further assistance. CPT II codes related to the Controlling High Blood Pressure (CBP) HEDIS® measure can be found below:

CPT II Code	Description
3074F	Most recent systolic blood pressure less than 130 mm Hg.
3075F	Most recent systolic blood pressure 130-139 mm Hg.
3077F	Most recent systolic blood pressure greater than or equal to 140 mm Hg.
3078F	Most recent diastolic blood pressure less than 80 mm Hg.
3079F	Most recent diastolic blood pressure 80-89 mm Hg.
3080F	Most recent diastolic blood pressure greater than or equal to 90 mm Hg.

#### References

<sup>4</sup> America's Health Rankings analysis of CDC, Behavioral Risk Factor Surveillance System. United Health Foundation, [AmericasHealthRankings.org](https://AmericasHealthRankings.org). Accessed 2025.

<sup>5</sup> Centers for Disease Control and Prevention. *Hypertension cascade: hypertension prevalence, treatment and control estimates among US adults aged 18 years and older applying the criteria from the American College of Cardiology and American Heart Association's 2017 Hypertension Guideline—NHANES 2017–March 2020*. Published 2023. Accessed April 21, 2025. [millionhearts.hhs.gov/data-reports/hypertension-prevalence.html](https://millionhearts.hhs.gov/data-reports/hypertension-prevalence.html)

<sup>6</sup> Centers for Disease Control and Prevention. (2024, December 13). *Team-based care to improve blood pressure control*. Centers for Disease Control and Prevention. [cdc.gov/high-blood-pressure/php/data-research/team-based-care/index.html#print](https://cdc.gov/high-blood-pressure/php/data-research/team-based-care/index.html#print)

## Behavioral Health

### Improving Initiation and Engagement in Substance Use Disorder (SUD) Care.

Molina is dedicated to improving the health and well-being of our members, particularly those facing the challenges of substance use disorders (SUD). We recognize that our provider partners are crucial in ensuring members receive timely and effective care. To that end, we are committed to working closely with you to enhance access to SUD treatment.

A key part of this strategy is our work to promote telehealth services, which aims to:

- Improve member outcomes
- Support providers in the initiation and engagement of members in appropriate care

## The Value of Telehealth in SUD Treatment

Telehealth offers a transformative approach to delivering SUD treatment, addressing many of the barriers that hinder access to traditional care. By leveraging technology, our network can provide:

- **Increased Access to Care:** Telehealth removes geographical barriers, ensuring that members in underserved rural areas and those with limited mobility can connect with qualified SUD providers.
- **Enhanced Convenience and Flexibility:** Virtual appointments offer greater flexibility and convenience, allowing members to integrate treatment into their daily lives, reducing the need for transportation and minimizing disruptions to work or family responsibilities.
- **Greater Privacy and Comfort:** Receiving treatment in a secure and confidential setting can reduce stigma, foster trust and promote greater engagement in the treatment process.
- **Improved Continuity of Care:** Telehealth facilitates more frequent and consistent communication between members and their treatment providers, leading to better treatment plan adherence and long-term recovery.

To help providers close gaps in care and improve member outcomes, Molina encourages the following practices:

- **Early Identification:** Utilize validated screening tools (e.g., CAGE-AID, National Institute on Drug Abuse [NIDA]) or incorporate screening questions into standard evaluations to identify potential substance use issues.
- **Accurate Documentation:** Ensure accurate documentation of identified substance use in the member's chart and submit claims with the correct billing codes. Avoid inappropriate use of diagnosis codes that may unintentionally ascribe a diagnosis to the member.
- **Timely Follow-Up:** Schedule follow-up visits within 14 days and at least two additional visits within 30 days of an SUD diagnosis.
  - When appropriate, refer members immediately to a behavioral health provider. Send appointment reminders (e.g., 72 hours prior) to improve attendance. Telehealth and telephone appointments within the required timeframe are compliant.
- **Care Management Collaboration:** Partner with Molina Care Managers (or refer members to Molina Care Management) to enhance member access, address barriers to treatment and improve member motivation.
- **Comprehensive Resources:** Provide the member with educational materials and resources on the treatment process and options, including information on 12-step or mutual support meetings, the importance of a sponsor and other community-based programs.
- **Telehealth and Home-Based Therapy:** Utilize telehealth and home-based therapy when clinically appropriate to improve access and convenience for members.
- **Facilitation of Technology Access and Support:** Molina is committed to ensuring that both providers and members have the necessary technology and support to utilize telehealth services effectively. We are exploring partnerships and resources to address potential barriers to technology access. Find additional information on our Molina [Member Telehealth](#) page of our Provider Website.

## A Call to Collaborative Action for Providers

Molina recognizes that providers are essential partners in this effort. We urge all SUD treatment providers within our network to:

- **Integrate Telehealth into Practice:** We encourage providers who are not currently offering telehealth services to explore the feasibility and benefits of incorporating this modality into their practice.
- **Champion Telehealth with Members:** Educate members about the availability of telehealth for SUD treatment, emphasizing its convenience, privacy and effectiveness.

- **Engage in Collaborative Care Coordination:** Work closely with Molina to coordinate care for members receiving telehealth services, ensuring seamless transitions and optimal outcomes.

**Telehealth Training Opportunities:** Molina will host a [You Matter to Molina Introduction to Telehealth Forum](#) on Thurs., May 29<sup>th</sup> from 10 to 11 a.m. Topics will include:

- Getting started with telehealth
- Claims and billing, including information for specialist providers
- Member eligibility and benefits
- Telehealth provisions
- Teladoc Health® services
- And more!

By working in close collaboration, we can transform the delivery of SUD treatment and improve the members' health and well-being.

### Older Adults: Continuous Glucose Monitoring

Advances in technology have had a meaningful impact on the management of diabetes. Continuous glucose monitoring (CGM) has become the standard of care for many people living with diabetes, including older adults.

- The 2021 American Association of Clinical Endocrinology (AACE) Clinical Practice Guideline<sup>7</sup> for the use of technology in diabetes highlighted potential benefits of CGM use in older adults, including reduced A1c, improved quality of life and reduced incidence of hypoglycemia.
- The 2025 Standards of Care in Diabetes<sup>8</sup> also addresses older adults with diabetes. It notes that for older adults with type 1 diabetes, CGM is a useful approach to predict and reduce the risk of hypoglycemia.

The evidence demonstrating the clinical benefits of CGM for people with type 2 diabetes using insulin is growing. However, any device used in diabetes management will only work optimally for the individual if there is education, training and ongoing support.

There are advantages and benefits for the older adult using a CGM. For example, if the older adult has cognitive or physical impairments, their caregiver can monitor the glucose readings and receive an alarm when glucose levels are out of range. Thus, any follow-up actions that the CGM might indicate will not be delayed. In addition to access to an app, the CGM manufacturers provide education and training to facilitate proper use of the CGM.

Lending support to the efficacy of CGM, the American Diabetes Association<sup>9</sup> recently reported that people with type 1 and type 2 diabetes who use a CGM have fewer instances of hypoglycemia and a lower A1c. However, studies show that poorer, older, Black and Brown Americans and Americans on Medicaid have less access to CGMs than their counterparts.

Molina and the Ohio MCOs promote and facilitate the use of CGMs as an effective support in diabetes management. Prior authorization (PA) is not required for Ohio Medicaid members who receive a CGM through pharmacy or durable medical equipment (DME) providers. If you would like to request CGM samples for your practice and in-office training and support, contact your Dexcom and/or Abbott representative or visit their websites via the links below.

CGM Provider	Email	Website
Abbot	<a href="mailto:Melissa.davis1@abbott.com">Melissa.davis1@abbott.com</a>	<a href="http://freestylelibre.us">freestylelibre.us</a>
Dexcom	<a href="mailto:Mary.mcclain@dexcom.com">Mary.mcclain@dexcom.com</a>	<a href="http://dexcom.com">dexcom.com</a>

<sup>7</sup>Use of Continuous Glucose Monitoring in Older Adults: A Review of Benefits, Challenges and Future Directions. [touchENDOCRINOLOGY.com](https://touchENDOCRINOLOGY.com).

<sup>8</sup>American Diabetes Association Professional Practice Committee; 13. *Older Adults: Standards of Care in Diabetes—2025*. Diabetes Care January 01 2025; 48 (Supplement\_1): S266–S282. [doi.org/10.2337/dc25-S013](https://doi.org/10.2337/dc25-S013).

<sup>9</sup>Continuous Glucose Monitors (CGMs) – Everything You Need to Know. American Diabetes Association. [diabetes.org/advocacy/cgm-continuous-glucose-monitors](https://diabetes.org/advocacy/cgm-continuous-glucose-monitors).

Questions and Quick Links

Provider Services: (855) 322-4079 Mon. – Fri. Medicaid 7 a.m. to 8 p.m., MyCare Ohio 8 a.m. to 6 p.m., Medicare and Marketplace 8 a.m. to 5 p.m.	Email: <a href="mailto:OHProviderRelations@MolinaHealthcare.com">OHProviderRelations@MolinaHealthcare.com</a>	Provider Website: <a href="https://MolinaHealthcare.com/OhioProviders">MolinaHealthcare.com/OhioProviders</a> .
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