

June 2021



## Who we are...

The Innovative Health Alliance of New York, LLC. (IHANY) is a collaboration among doctors, health systems and health care providers in New York's Capital Region aimed at improving the health of the communities we serve by working together in new, more coordinated ways. In today's evolving health care landscape, clinical integration is essential to achieving better health for the community, better care for individuals and lower costs of health care.

## This Month's Priorities

- 1. Schedule your data review meeting with the IHANY team:** On Wednesday May 5th, Brian sent out your May IHANY Population Health Analytic Reports. We have asked that every team that has received this report reach out to Brian to schedule a meeting to discuss the data, next steps and the support IHANY can provide to align these efforts with your current work and move forward together.
- 2. 2020 Shared Savings Program Reporting is over but 2021 Education has begun:** In preparation for next year's GPRO/Promoting Interoperability (PI) reporting we will begin holding monthly educational sessions to discuss best practices, lessons learned and the "why" around the Quality Measures for the Shared Savings Program and resources for Promoting Interoperability (PI). CMS released their **2021 Promoting Interoperability Guide**, please review and let us know if you have any questions. You will also find the meeting information for the third volume of the GPRO education series under the Education section later in this notice. Each session will be recorded for future reference.
- 3. We need your EMR information:** By **Monday June 14th** we need your EMR name and version number. This is in preparation for 2022 Quality data collection and the technical requirements that will be coming with it. Please email this information to [brian.pinga@sphp.com](mailto:brian.pinga@sphp.com) ASAP. Thank you.

### **Monthly Repeat: Schedule your patients for their Annual Wellness Visits**

**(AWV):** For 2021 CMS has determined that you can utilize telehealth to do an AWV.

**REMINDER:** You can also do **advance care planning (ACP)** via telehealth and/or during an AWV. See the Population Health News section later in this notice for 2021 Medicare telehealth code updates.

## Spotlight

## IHANY Network Specialty Practices: Endocrinology

As a Clinically Integrated Network, continuing to promote in-network referrals will allow for our system to grow and manage costs.

With that in mind, we will have feature spotlights on IHANY partners and affiliates within this newsletter to ensure we keep you informed of our diverse resources.

This month we would like to highlight the endocrinology practices within IHANY's network which cover the Greater Capital District with offices in Albany, Clifton Park, Rensselaer, Troy and Schenectady.

### St. Peter's Diabetes & Endocrine Care

At St. Peter's Diabetes and Endocrine Care, our multi-disciplinary team of endocrinologists, advanced practitioners and Certified Diabetes Educators® are dedicated to helping individuals with diabetes improve their quality of life. We strive to provide innovative treatment strategies for our patients by teaching them how to effectively control and manage the disease. Our practice provides diagnosis, treatment and long-term care for individuals with diabetes, and other endocrine and metabolic disorders. We offer the latest diabetes care technology, including insulin pump/sensor download and professional continuous glucose monitoring (CGM) for diagnosis.

Our specialized services include: complication screening, prevention and treatment, medication management, foot care, smoking cessation, onsite HbA1c testing, weight management and nutritional counseling, diabetes support groups, and individual and group diabetes education classes.

Our diabetes educators are experienced health care professionals, including registered nurses and registered dietitians, who offer self-management programs (individual and small group sessions) for adults with type 1, type 2 and gestational diabetes. Day, evening and all-day comprehensive classes are available. In addition, we offer free diabetes support groups.

### CDC Diabetes Prevention Program

Our **FREE**, Lifestyle Change Program will help you make lasting changes to prevent type 2 diabetes. The program offers ---

- A CDC-approved curriculum
- The skills you need to lose weight, be more physically active and manage stress
- A trained lifestyle coach to guide and encourage you
- Support from other participants with the same goals as you
- Follow-meetings to help you maintain a healthy lifestyle

To be eligible for this free program you must score a 5 or greater on the CDC Self-Assessment Quiz or be diagnosed with prediabetes by your physician. You can locate the quiz here: <https://www.sphp.com/find-a-service-or-specialty/diabetes/diabetes-prevention-program>

This year-long program meets weekly for 16 weeks, then bi-weekly, and then monthly for the remainder of the time.

Located in Albany, Clifton Park, Troy and Rensselaer. For more contact information, directions and more details visit : <https://www.sphp.com/find-a-service-or->

*specialty/diabetes/*

## Ellis Endocrine Care

Comprehensive care for people with diabetes, metabolic disorders and other endocrine-related disorders

The multidisciplinary program provides diagnosis, treatment and long-term care for individuals with Type 1 and Type 2 diabetes, and other endocrine and metabolic disorders.

Among the specialized services provided will be:

- complication screening
- prevention and treatment
- medication management
- foot care
- smoking cessation
- onsite HbA1c testing
- weight management and Medical Nutrition Therapy
- diabetes support groups
- ADA recognized diabetes education program
- insulin pump therapy
- continuous glucose monitoring
- gestational diabetes education program

The program will treat individuals with pre-diabetes, those with newly diagnosed diabetes, and those who have been coping with diabetes for years utilizing a team approach that includes:

- endocrinologists
- nurse practitioners
- certified diabetes educators
- registered dietitians

### Contact Us

- Schenectady -**Now Accepting Patients**
- McClellan Street Health Center
- 624 McClellan Street. Suite 202, Schenectady, NY 12304
- 518.612.8600

*If you are an IHANY Network Specialty practice and would like your location featured in a future IHANY Monthly, please email [Brian Pinga](mailto:brian.pinga@constantcontact.com).*

## Education

### GPRO 2021 Quality Measure Education Series Volume 3:

**Prev 5: Breast Cancer Screening**

**Prev 7: Colorectal Cancer Screening**

**Prev 10: Preventive Care and Screening Tobacco Use:  
Screening and Cessation Intervention**

**Care 2: Falls: Screening for Future Fall Risk**

**Tuesday June 29th 12:00pm-1:00pm**  
**Click [here](#) for the meeting link to save.**  
**Brian has sent a meeting invite to all who receive this notice.**

GPRO is a process that takes planning and education throughout the year. Please join us to review measures specifications, best practices and lessons learned from our 2020 GPRO reporting period so that we are ready to report for 2021.

***Did you miss Volume 1 or Volume 2? Here are links to the recordings:***

**Volume 1:** <https://trinity-health.webex.com/webappng/sites/trinity-health/recording/708eafeaaa464ecd97df3f17e9b69e61/playback>

**Volume 2:** <https://trinity-health.webex.com/recordingservice/sites/trinity-health/recording/547e5abf9fa010399b7d0050568117d8/playback>

---

## **Register for the CMS 2021 MIPS Improvement Activities and Promoting Interoperability Performance Categories Webinar on June 9th**

**PLEASE NOTE:** **IHANY** participants get automatic credit for Improvement Activities but each TIN is required to report Promoting Interoperability (PI) directly to CMS during the 2021 reporting period (Q1 2022).

The Centers for Medicare & Medicaid Services (CMS) is hosting a webinar on Wednesday, June 9, 2021 from 1:00 – 2:30 p.m. ET to provide an overview of the requirements for the improvement activities and **Promoting Interoperability** performance categories for the 2021 performance year of the Merit-based Incentive Payment System (MIPS).

During the webinar, CMS subject matter experts will provide information on:

- Participation basics for the improvement activities and Promoting Interoperability performance categories
- Reporting and scoring requirements
- Resources and support

CMS will answer questions from attendees at the end of the webinar as time permits.

### **Webinar Details**

Title: MIPS Improvement Activities and Promoting Interoperability Performance Categories for the 2021 Performance Year

Date: Wednesday, June 9, 2021

Time: 1:00 – 2:30 p.m. ET

**Registration Link:** <https://app.webinar.net/Y86JVGJw702>

---

## **CE Opportunity!**

### **Clinical Condition Documentation (CCD)**

### **A Quality Coding Accuracy Program**

## Click [here](#) to access the course

For details on CE credits contact Eileen Jones @ [jonesei@trinity-health.org](mailto:jonesei@trinity-health.org)

Dr. Amy Frankowski is a physician executive consultant for Trinity Health. She previously served as Chief Medical Officer of the clinically integrated networks at Bon Secours Mercy Health. She is well versed in population health management, clinically integrated networks, and accountable care organizations. She will be speaking on risk adjustment for providers.

### Learning Objectives

1. Discuss how achieving complete and accurate Clinical Condition Documentation (CCD) requires reflecting the patient's clinical status as accurately as possible.
2. Discuss how medical record documentation must support CCD coding for purposes of compliance and clinical accuracy.
3. Discuss the need to consider risk adjustment at all appropriate visits for the purpose of annually re-validating relevant diagnoses.

---

## SPHP Medical Grand Rounds – Save the June Dates

St. Peter's Health Partners Medical Grand Rounds is held virtually at 8 a.m. on the first and third Wednesdays of the month. **These sessions are open to all IHANY providers.**

CME credits are available for the live events, and recordings will be posted 30 days after the event.

- June 2, 2021 | 8 a.m.

### **Everything we know about Covid-19 monoclonal antibody treatments**

Presented by Dr. Melissa Fiorini

[Click HERE](#) to join

- June 16, 2021 | 8 a.m.

### **Acute Kidney Injury in 2021: What are we doing to make it better sooner**

Presented by Dr. Jorge Cerda

[Click HERE](#) to join

*Please note:* We will be taking summer break for July and August and will resume Medical Grand Rounds September 1, 2021.

For questions, interested presenters, and feedback, contact:

- Beth Wyman, Provider Engagement Consultant, [elizabeth.wyman@sphp.com](mailto:elizabeth.wyman@sphp.com)
- Kathy Kindness, Medical Librarian, [kathy.kindness@sphp.com](mailto:kathy.kindness@sphp.com)

## Contract Update

### New IHANY Contract Opportunities

**IHANY will begin outreach soon about two exciting contract opportunities:**

- **Trinity Health Integrated Care (THIC) Enhanced Medicare ACO - IHANY** has been accepted into THIC, a national ACO made of CINs like IHANY from 6 states. THIC participates in CMS's Enhanced Track which is an advanced version of the Medicare Shared Savings Program that has upside and downside risk. This program will replace IHANY's Medicare Shared Savings Program which expires 12/31/2021. Just like with the MSSP program, IHANY groups (at the TIN-level) will have the opportunity to participate. Details, including contract, will be coming soon.
- **Concordia Health Network**, - an Upstate NY "Super CIN" made up 4 CINs in Upstate NY, including IHANY. Concordia Health Network has two Alternative Payment Model contracts – MediGold, a new Medicare Advantage Plan entering the Capital Region in 2022, and FidelisCare Level One Shared Savings Agreement for 2021. Groups that participate in the Concordia Health Network will automatically be included in all Concordia APMs whenever the group has a direct fee-for service agreement w the payer.

## CMS Billing Update

### Cognitive Impairment: Medicare Provides Opportunities to Detect & Diagnose

Medicare covers a separate visit for a cognitive assessment so you can more thoroughly evaluate cognitive function and help with care planning.

#### 3 Things You Need to Know:

1. If your patient shows signs of cognitive impairment at an **Annual Wellness Visit** or other routine visit, you may perform a more detailed cognitive assessment and develop a care plan
2. The Cognitive Assessment & Care Plan Services (CPT code 99483) typically start with a 50-minute face-to-face visit that includes a detailed history and patient exam, resulting in a written care plan
3. Any clinician eligible to report Evaluation and Management (E/M) services can offer this service, including: physicians (MD and DO), nurse practitioners, clinical nurse specialists, and physician assistants

**Effective January 1, 2021, Medicare increased payment for these services to \$282 (may be geographically adjusted) when provided in an office setting, added these services to the definition of primary care services in the Medicare Shared Savings Program, and permanently covers these services via telehealth.**

Get details on Medicare coverage requirements and proper billing at [cms.gov/cognitive](https://www.cms.gov/cognitive).

*Taken from 5/13/21 MLN Connects Newsletter*

---

## Mental Health: Medicare Covers Preventive Services

Medicare covers mental health preventive services, including the initial preventive physical examination, annual wellness visit, and depression screening. Your patients pay nothing if you accept assignment. Talk to your patients about their emotional, psychological, and social well-being.

More Information:

- [Medicare Wellness Visits](#) educational tool
- [Medicare Preventive Services](#) educational tool
- [Preventive Services](#) webpage
- [CDC Mental Health](#) webpage
- Information for your patients on ["Welcome to Medicare" preventive visit](#), [yearly "Wellness" visits](#), and [depression screenings](#)

Taken from 5/20/21 MLN Connects Newsletter

## CMS COVID Vaccine Update

### COVID-19 Vaccine Resources: What Partners Need to Know

(originally sent by CMS 5/10/2021)

With information coming from many different sources, CMS has up-to-date resources and materials to help you share important and relevant information on the COVID-19 vaccine with the people that you serve. You can find these and more resources on the [COVID-19 Partner Resources Page](#) and the [HHS COVID Education Campaign page](#).

#### VACCINES.GOV MAKING IT EASIER TO FIND VACCINES

Access to a vaccine should not be an obstacle for someone to get vaccinated. Here are three vaccine tools to bring to your communities right now:

1. Visit [vaccines.gov](#) (English) or [vacunas.gov](#) (Spanish) to search and find a vaccine near you.
2. Text GETVAX (438829) for English or VACUNA (822862) for Spanish to receive three vaccine sites on your phone within seconds.
3. Call the National COVID-19 Vaccination Assistance Hotline at 1-800-232-0233 for those who prefer to get information via phone call.

#### NEW COVID-19 RESOURCES: SPREAD THE WORD

##### COVID-19 Community Champions

On May 5, 2021, CMS debuted the first social media videos highlighting long-term care staff, also referred to as Community Champions, who moved from being initially uncertain about receiving the COVID-19 vaccine to accepting the vaccine--and encouraging their peers to do the same.

Throughout the COVID-19 pandemic, staff in nursing homes have been providing ongoing care to our nation's most vulnerable. This social media campaign is intended to help increase vaccine acceptance amongst long-term care staff. CMS is asking that you like and share their Community Champions video: <https://youtu.be/k0WbAhveyDY>

##### COVID-19 conference cards

Conference cards are available to order from the [CMS Product Ordering web site](#) in multiple languages. They can be found under the Featured Medicare button:

- [Bring Your Medicare Card When You Get Your Covid-19 Vaccine](#)
- [Stay Protected from Covid-19 – Medicare Covers the Vaccine](#)

Other Medicare publications are available to download in several languages [here](#). You can also find helpful tips on CMS product ordering [here](#).

### COVID-19-RELATED COVERAGE AND PAYMENT

HRSA COVID-19 Coverage Assistance Fund (CAF)  
On May 3, 2021, HHS, through the Health Resources and Services Administration (HRSA), announced a new program covering the cost of administering COVID-19 vaccines to patients enrolled in health plans that either do not cover vaccination fees or cover them with patient cost-sharing. This new program is called the HRSA COVID-19 Coverage Assistance Fund (CAF). See the press release on this announcement [here](#).

Learn more about CAF [here](#). Also, see the CAF [Fact Sheet](#) and [Frequently Asked Questions](#) about the program.

**Increased Medicare Payment for Administering Monoclonal Antibodies**  
CMS has increased Medicare payment for administering monoclonal antibodies to treat beneficiaries with COVID-19, continuing coverage under the Medicare Part B COVID-19 Vaccine Benefit. This means more providers and suppliers are readily able to administer these treatments. Beneficiaries are not responsible for any cost sharing, regardless of where the service is furnished – including in a physician’s office, other healthcare facility or at home.

The national average payment rate has increased from \$310 to \$450 for most health care providers. In support of providers’ efforts to prevent the spread of COVID-19, CMS will also establish a higher national payment rate of \$750 for at-home monoclonal antibodies treatment.

See updated [toolkits for providers, states and insurers](#) to help the health care system swiftly administer monoclonal antibody treatment with these new Medicare payment rates, [here](#).

In addition, CMS is updating coding resources for providers. More information can be found [here](#).  
For more information, visit [www.cms.gov/covidvax](http://www.cms.gov/covidvax).

For more information, visit the [CMS COVID-19 Policies and Guidance page](#), originally sent by CMS 5/10/2021

## Population Health News

### IHANY's whole person care integrated model: ONEcare

IHANY launched its integrated whole person model of care called ONEcare in 2020. Despite the disruptions of COVID, our steering committee felt it was essential to re-design care so that we could integrate access to behavioral health with our primary care sites and also attend to social determinants of health via our partnership with Healthy Together IPA. *Click the image to the right to read about our initial success in the attached case study.*

**Collaborative ONEcare Network in Upstate NY has Helped Thousands of Patients with Undiagnosed Behavioral Health Disorders Receive Timely Access to Integrated Care Resulting in Lower ED, Inpatient, and Crisis Utilization.**

The behavioral health (BH) Mental Health Substance Use system in America is in a state of crisis. According to the National Alliance on Mental Illness, 51.7 million Americans adults, or one in five, experience mental illness in a given year. For hospitals and health systems, one in eight Emergency Department (ED) patients present for BH issues, and an additional 40% present with psychiatric medical and BH issues in their cost of care (3.5% average) for the full duration of their stay as well as 20% of inpatient days reported by one in 10. 25% of the country budget for the associated BH patients being treated and 30% of total acute inpatient payments. At the same time, unmet BH needs, along with other factors, create pressure on the system, leading to higher ED, inpatient, and crisis utilization.

**It All Begins with the Question**  
Signs of a health system under strain to avoid and one that is in the right region of New York, Innovative Health Alliance of New York (IHANY), decided to tackle the challenge head-on. Many IHANY primary care practices had been hindered to deliver for BH conditions because they were impeded by several factors: (1) navigating fragmented or siloed behavioral health BH resources, (2) long access delays, and (3) limited treatment communication. IHANY launched the ONEcare model of care in an effort to address the needs of care for population health management. To address the whole person care, IHANY partnered with Healthy Together, a network of community-based social care and BH organizations to engage in timely integrated network of medical providers. In addition, IHANY leveraged their existing Integrated Care Coordination System to provide transitional care management support to these care gaps and direct medical care needs while referring to IHANY and community partner organizations for timely support. This partnership came to a strategic conclusion to align the social and medical care needs with referring to IHANY and community partner organizations for timely support. This partnership came to a strategic conclusion to align the social and medical care needs with referring to IHANY and community partner organizations for timely support. This partnership came to a strategic conclusion to align the social and medical care needs with referring to IHANY and community partner organizations for timely support.

**30-day medication, treatment/adherence, and available inpatient bed days.**  
Leveraging essential elements from primary care, specialty healthcare partners, and community-based providers, the IHANY ONEcare model utilizes integrated care approaches to implement systematic disease detection through chronic and acute care, and a comprehensive, coordinated access to appropriate level of care, and improved treatment initiation and whole person care coordinated for long-term patterns. Real-time consultation and care monitoring alerts allow for timely response to patient need as opposed to waiting for a visit to occur when the highest, most appropriate response may be needed.

**ONEcare Provider/Clinic**  
• Behavioral and Mental Health  
• Behavioral Health and Substance Use  
• Community Health Workers  
• Caregivers and Family Care Managers  
**ONEcare Network**  
• Behavioral Health and Substance Use  
**ONEcare Neighborhood**  
• Behavioral Health and Substance Use  
• Behavioral Health and Substance Use  
• Behavioral Health and Substance Use  
• Behavioral Health and Substance Use

**If you're interested in learning more about building an effective ONEcare Network within your community, please contact us at (800) 618-2826 or [info@onecarenetwork.com](mailto:info@onecarenetwork.com).**

---

## Complex Case Discharge Delay Problem

*Our very own Deb House LMSW, CCM, ACHP-SW, CCI, Sr. Director, Clinical Executive, Integrated Care Coordination System & Director, System Social Work at St. Peter's Health Partners contributed to this published white paper from HANYS!*

### Background:

"Our healthcare delivery system has undergone significant transformation to reduce unnecessary hospitalization; payers have developed payment models to incentivize providers; New York state has allocated billions of dollars to initiatives such as the Delivery System Reform Incentive Program;<sup>6</sup> and hospitals have formed partnerships, invested in population health and adopted tools like Lean and high reliability. Despite these investments, patients with complex care needs continue to become stuck in EDs and inpatient units for weeks, months or years, with catastrophic ramifications. In this paper, HANYS describes the unintended consequences of a system that does not "see" complex case patients, based on the experiences of hospitals and patients."

For the report click the links below.

[Part 1](#)

[Part 2](#)

---

## Reminder: Medicare and Telehealth 2021

Telehealth has become a very useful tool to keep connected with our patients during the pandemic. To find what services are covered under telehealth for 2021 click [here](#) for the link from CMS.

Some important services to note that can be done via Telehealth:

- Advance Care Planning
- The Medicare AWW codes (HCPCS codes G0438 and G0439) are on the list of approved Medicare telemedicine services. **CMS states that self-reported vitals** may be used when a beneficiary is at home and has access to the types of equipment they would need to self-report vitals. The visit must also meet all other requirements.

## We are here to help you.

### Your IHANY Practice Support Team

**Ashley Zapp**, Manager of Care Coordination

**Brian M. Pinga**, Director of Quality Improvement & Practice Operations

**Eileen M. Jones**, Director of Clinical Condition Documentation

**James Renner**, Sr. Project Management Specialist

**Lisa Kelly-Armstrong**, Director of Network Mgmt. & Operations.

Learn more about IHANY

IHANY | 15 Columbia Drive, Albany, NY 12203

[Unsubscribe {recipient's email}](#).

[Update Profile](#) | [Constant Contact Data Notice](#)

Sent by brian.pinga@sphp.com powered by



Try email marketing for free today!