



# MedStar Family Choice

DISTRICT OF COLUMBIA



# Provider Newsletter

4th Quarter 2023

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Government of the District of Columbia  
Department of Health Care Finance.



\*\*\* WE ARE WASHINGTON \*\*\*  
GOVERNMENT OF THE  
DISTRICT OF COLUMBIA  
MURIEL BOWSER, MAYOR

# A Message from Dr. Tu



Raymond Tu, MD

Dear Provider,

We recognize November as a month for giving thanks. We also recognize November as Lung Cancer Awareness Month. According to the American Lung Association, more people die from lung cancer annually than any other type of cancer, exceeding the total deaths caused by breast cancer, colorectal cancer, and prostate cancer combined. The greatest risk factor for lung cancer is duration and quantity of smoking. Black Americans have the highest risk of developing lung cancer. Screening for lung cancer with annual low-dose CT scans among those at high risk can reduce the lung cancer death rate by up to 20% by detecting tumors at early stages when they are more likely to be curable.

Let's work together to reduce barriers to early lung cancer detection and help save lives. We can do this by providing our Enrollees with educational materials on lung cancer detection, diagnosis, and risk reduction; and emphatically endorsing the importance of prevention, early detection, and the value of low-dose CT scans for lung cancer screening.

Also, please take every opportunity to mention health coverage renewal to your patients. All DC residents with Medicaid and Alliance must renew their coverage to continue receiving benefits. The first step is for Enrollees to ensure that their contact information is up to date with the Department of Health Care Finance by visiting [DistrictDirect.DC.gov](https://DistrictDirect.DC.gov).

If you have questions or if we can assist you in any way, please call the Provider Relations department, at **855-798-4244** (select option 2 for Provider and then option 2 for Provider Relations). You can also email us at [mfc-dc-providerrelations@medstar.net](mailto:mfc-dc-providerrelations@medstar.net).

We are so thankful for you and everything you do everyday to care for our Enrollees. Thank you! And we wish all of you and your families peace and joy this holiday season.

Warmest regards,

Raymond Tu, M.D., M.S., F.A.C.R., Chief Medical Officer  
MedStar Family Choice District of Columbia

# Welcome to MedStar Family Choice District of Columbia!



We are proud to welcome the following new physical and behavioral health provider groups to our network.

**GroupName**

- Activision Fidelity Psychiatric Mental Health LLC
- Aglow Recovery Healthcare Services LLC
- Altruist Healthcare Inc
- Brighterlife Healthcare Services Inc
- Counseling Solutions LLC
- Dare to Care Too LLC
- Kristal Gardiner FNP-C
- Leadeth Stillwaters LLC
- Mabri & Associates LLC
- Marjorie B Mcknight MD PC
- RoyalTouch Integrated Healthcare Services
- The Healthy Place
- The Rivers of Hope Counseling Center LLC
- Virtual Access Care LLC

In addition, we are happy to welcome the following ancillary providers into our network:

**GroupName**

BHG XLVI LLC  
Clean and Sober Streets  
KINARA  
Life Enhancement Services LLC  
Umbrella Therapeutic Services Inc

**Specialty**

Rehabilitation  
Residential Treatment Center  
Mental Health Clinic  
Mental Health Clinic  
Mental Health Clinic



## Notice of Privacy Practices

MedStar Family Choice District of Columbia recognizes the importance of keeping health information private and maintains a Notice of Privacy Practices (Notice). This important document in part describes how we may use and disclose medical information, how Enrollees can access this information, and how to report a complaint if an Enrollee feels their privacy has been violated. Our Notice was recently updated.

- We updated the list of entities that are part of the MedStar Health Affiliated Covered Entity (ACE). MedStar Family Choice DC is part of the MedStar Health ACE.
- We simplified many parts of the Notice.
- We added more information on laws that provide additional privacy protections, including ones protecting behavioral health and genetic information.
- We also updated information on how we may use and disclose Enrollee information, including among clinical observers and to entities such as CommonWell Health Alliance Services, accountable care organizations, or other insurers.
- Information on ways Enrollees can opt-out of data sharing with certain recipients were added to the Notice.

- We also added information on how we protect Enrollee rights and the rights of parents, minors, and guardians; and on an Enrollee’s right to confidential communications with us. We added more information on an Enrollee’s right to an accounting of disclosures.
- We added Virginia as a state that MedStar Health is located in.

A copy of our revised Notice is available online at [MedStarFamilyChoiceDC.com/Privacy-Practices](https://www.MedStarFamilyChoiceDC.com/Privacy-Practices). If you have any questions related to protecting Enrollee health information or would like to request a copy of the Notice please call the Provider Relations department, Monday through Friday, 8 a.m. to 5:30 p.m., at **855-798-4244** (select option 2 for Provider and then option 2 for Provider Relations).

## Lead Screening Requirements—Test Every Child, Twice by Two

As a MedStar Family Choice District of Columbia provider, you have a legal obligation to perform Blood Lead Level (BLL) screenings as part of a well-child visit for all children you serve in our plan. Missed opportunities to screen **“every child, twice by two”** for blood lead as part of a well-child visit, put children who live in the District at risk for serious and irreversible harm from lead exposure.

District law requires a BLL screening test for all children between 6 months and 14 months of age and another BLL screening test between 22 months and 26 months of age, unless an identical test was performed in the previous 12 months. If a child over 26 months of age has not been tested for lead, the law mandates two BLL tests before the child turns six years of age. District law also requires you to conduct a BLL screening test when a child is at risk for high-dose lead exposure. Risk indicators include living in or frequently visiting deteriorated or renovated housing built before 1978, presumed by District law to include lead-based paint; having a household member who may be exposed to lead at work; exhibiting pica; or having neurological, behavioral, developmental, or other symptoms consistent with lead exposure.

For a summary of lead screening and reporting requirements from the Department of Energy and Environment and Department of Health Care Finance, [click here](#). To review your full responsibilities under the lead screening and reporting law, visit [DCRegs.DC.gov/Common/DCMR/RuleList.aspx?ChapterNum=22-B73](https://DCRegs.DC.gov/Common/DCMR/RuleList.aspx?ChapterNum=22-B73).

### It’s New on the Website!

#### Click here for the Claims Billing Manual

The Claims Billing Manual provides guidance for billing both professional (CMS-1500) and institutional (UB04) paper and electronic claims.

# Our Provider Community at Work

## Spotlight on: Woodley House DC

Woodley House was founded in 1958 as an alternative to institutionalization for adults with mental health disorders. Their founders believed that with therapeutic housing, residents could live with their illnesses, set goals, reintegrate into the community, and work toward recovery. Their mission continues today. They work to enable DC residents with mental health disorders to live full and healthy lives with dignity by providing supportive housing and services. They help adults whose illnesses, such as depression, schizophrenia, and bipolar disorder, make it difficult to work, keep a stable home, and function with healthy life skills. They offer several residential programs, across a continuum of care.

Crossing Place is an 8-bed psychiatric crisis bed program that offers an alternative to hospitalization, it is located in Woodley Park. Access to this crisis bed program is very low barrier, it takes just a phone call to make a referral (202-830-3517). Valenti House is a large, 20-bed group home also located in Woodley Park (202-830-3516). Holly House is an 8-bed group home located in Shepherd Park (202-830-3512). Both group homes are certified by the DC Department of Behavioral Health as Mental Health Community Residential Facilities, with staff on-site 24/7.

Their other residential department is called Supported Independent Living (SIL) where they provide housing and as needed support services in apartments and one group house. Most of the housing for SIL residents is in Northwest DC. Their support services include life skills training to help residents move toward independent living, recovery support for residents with co-occurring substance use disorders, case management, and assistance with obtaining and sustaining permanent housing. They also operate a food pantry, which serves SIL residents and their DC neighbors in need.

Woodley House is also certified by the DC Department of Human Services as a Permanent Supportive Housing (PSH) provider. As of July 2023, they have been accepting referrals for clients who are homeless, both single adults and families, and connecting them with new homes with their PSH vouchers. There are thousands of unhoused people in DC, and Woodley House is expanding their services to be a part of the solution.

Woodley House is proud of their strong record of stability for their residents—last year 97% remained housed. Their future plans include further expansion of their services to meet the deep need in our community.





# Let's Talk Behavioral Health

## Supporting Provider Resilience

As MedStar Family Choice District of Columbia begins its integration of behavioral health into the plan's services and supports, it is more important than ever to acknowledge the challenges that providers often face in caring for patients with multiple complexities. In this issue of **Let's Talk Behavioral Health**, we shine a light on the challenges for providers and opportunities to build resilience and support their quality of life.

Research shows that medical providers, in particular those in primary care settings, face high levels of **burnout** and **compassion fatigue**. Burnout refers to the physical and emotional exhaustion that can occur when an individual is overwhelmed, unsatisfied, and unsupported in their work. Burnout often co-occurs with compassion fatigue, which describes feelings of being run down to the point of not being able to be present or connected at work or with patients. These symptoms correlate with increased feelings of anxiety and depression, and high turnover.

Recognizing the signs of burnout and compassion fatigue is the first step to getting support. In addition to an increase in feelings of depression or anxiety, one may notice feelings of avoidance, irritability, disconnection or apathy, as well as physical changes such as increased

headaches, stomach aches, or fatigue. Tools such as the **Professional Quality of Life Scale** or **University at Buffalo Self-Care Assessment** can help make sense of the symptoms you are experiencing and highlight opportunities for greater support and self-care.

MedStar Family Choice DC recognizes the tremendous resilience of its provider network, despite these common challenges. **Resilience** refers to the capacity to adapt to and recover from stress, and can be strengthened by personal and organizational practices that prioritize wellness. This can look like individual stress regulation techniques that reverse the body's stress response, such as rhythmic breathing or visual meditations, or an organization's commitment to protecting time for self-care during the work day.

With awareness that many practices may not have as much time to focus on provider care, MedStar Family Choice DC invites you to take advantage of its free technical assistance and training support offered by Rooting Resilience. Rooting Resilience will work directly with your practice to develop the language of resilience and identify trauma-informed practices that can improve satisfaction and reduce provider turnover. If you are interested in building the resilience of your teams, contact Rooting Resilience at [info@rootingresilience.com](mailto:info@rootingresilience.com).

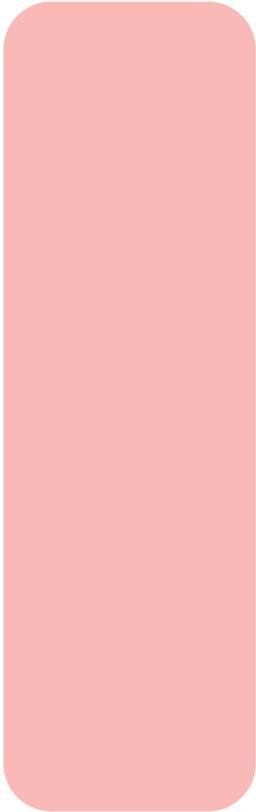


- 5 things that you can see
- 4 things that you can touch
- 3 things that you can hear
- 2 things that you can smell
- 1 emotion you can feel

5-4-3-2-1 is an example of a regulation exercise that can support grounding during times of stress.

(Source: <https://www.youtube.com/watch?v=30VMIEmA114>).





## **HEDIS® Highlights**

As a managed care plan (MCP), we are in a critical position to keep our fingers on the pulse of our Enrollees. As we return to a more normal life from the various changes that occurred during the pandemic, we want to emphasize HEDIS® measures that apply to the mental and physical health of our Enrollees. HEDIS (Healthcare Effectiveness Data and Information Set) is a set of standardized performance measures developed by the National Committee for Quality Assurance (NCQA) to objectively measure, report, and compare quality across health plans. NCQA develops HEDIS measures through a committee represented by purchasers, consumers, health plans, healthcare providers, and policy makers. As state and federal governments move toward a quality-driven healthcare industry, HEDIS rates are becoming more important for both health plans and individual providers.

### **HEDIS Spotlight: Breast Cancer**

We should be aware of breast cancer every month, not just October. National Breast Cancer Awareness Month was first organized in 1985 as a national movement to bring attention to the dangers of breast cancer. This movement began as a weeklong awareness campaign by the American Cancer Society. It eventually became a monthlong event and, in 1992, the pink ribbon became the symbol of breast cancer awareness.

Here are some tips to help increase breast cancer screening compliance:

- The first step toward early detection is talking to your patients between the ages of 40 to 49 about when to start annual screening and how often they should get a mammogram.
- Women aged 50 to 54 years should be screened with a mammography annually.
- For women aged 55 years and older, screening with a mammography is recommended once every two years for those with normal risk or once a year for those with increased risk.
- Have your staff chart-prep and flag patients that need an annual screening order placed during their visit.
- Help boost compliance by offering your patients a “standing order” for their annual screening mammogram, allowing them to complete the screening mammogram before their annual visit with you.
- Be sure your documentation meets CMS standards and that your provider credentials are attached to the correct ICD-10 codes when ordering to ensure accurate data capture (if you need help contact your provider representative).

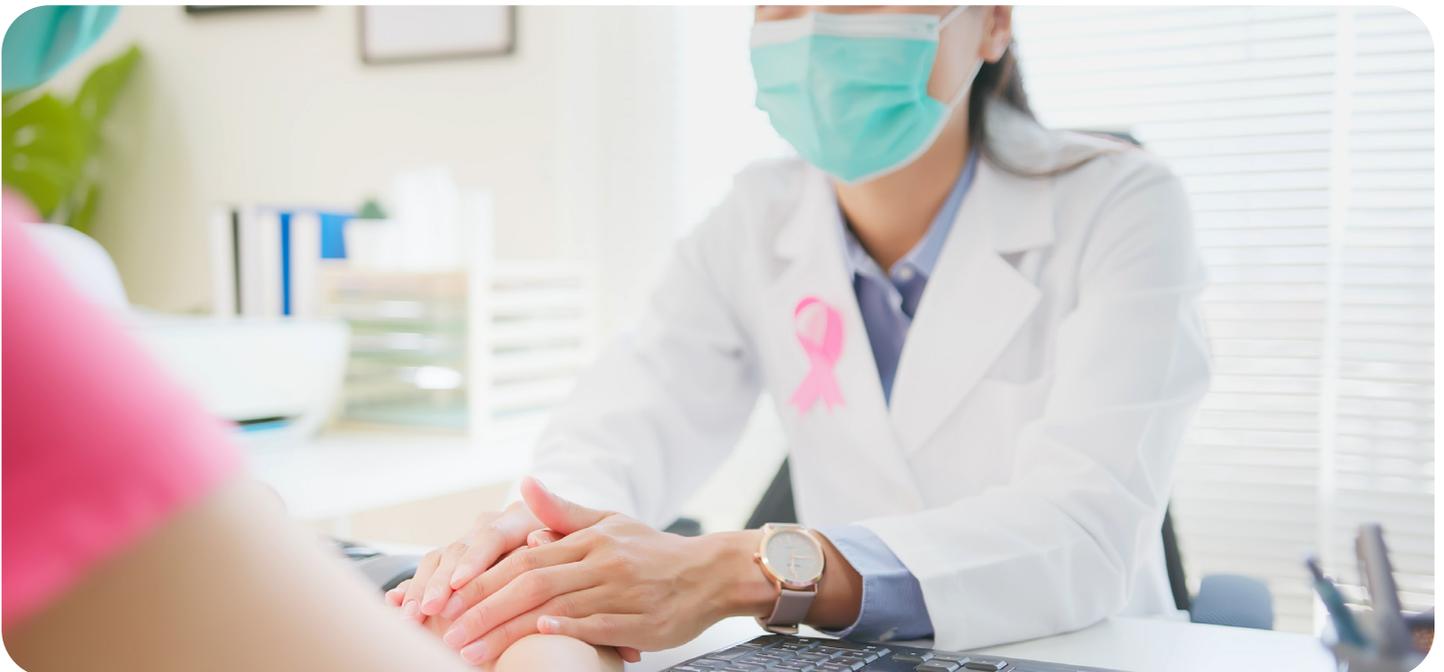
Here are some things you could do at your office to help raise awareness:

- Wear pink ribbons and give them out to everyone at the office.
- Volunteer together.

Additional resources for providers and Enrollee can be found at [cdc.gov](https://www.cdc.gov) and at [komen.org](https://www.komen.org).

If you have any questions, please email Dianna Lee-Sam, Director of Quality and Outreach at: [dianna.lee-sam@medstar.net](mailto:dianna.lee-sam@medstar.net) or Meghan Myer, Manager of Quality at [meghan.e.myer@medstar.net](mailto:meghan.e.myer@medstar.net).

\*HEDIS® is a registered trademark of the National Committee for Quality Assurance



# Compliance Corner

## Compliance Program Guidance for Individual and Small Group Physician Practices

The Office of Inspector General (OIG) has developed a series of voluntary compliance program guidance documents (CPGs), directed at various segments of the healthcare industry for Individual and Small Group Physician Practices, to encourage the development and use of internal controls to monitor adherence to applicable statutes, regulations, and program requirements.

On April 24, 2023, **OIG announced** its plans to improve and update existing CPGs and to deliver new CPGs specific to segments of the healthcare industry or entities involved in the healthcare industry that have emerged in recent years. In modernizing OIG's CPGs, their goal is to produce useful, informative resources—as timely as possible—to help advance the industry's voluntary compliance efforts in preventing fraud, waste, and abuse in the healthcare system. The existing CPGs and supplemental CPGs will remain available for use as an ongoing resource as the OIG develops and publishes the new guidance. Refer to [OIG.HHS.gov/Documents/Compliance-Guidance/801/physician.pdf](https://oig.hhs.gov/Documents/Compliance-Guidance/801/physician.pdf) for relative guidance for Physician Practices.



# Formulary Updates for Providers

MedStar Family Choice District of Columbia Pharmacy and Therapeutics Committee meets quarterly. During the October 2023 meeting, formulary changes were made for DC Healthy Families and DC Healthcare Alliance. **Bolded** names indicate a brand medication; other listed medications are generic.

## CHANGES BELOW BECOME EFFECTIVE ON OR AROUND JANUARY 1, 2024

### Additions:

*adalimumab-fkjp, adalimumab-adaz injection*

**AirSupra** (*albuterol and budesonide*) inhaler

**Ajovy** (*fremanezumab*) injection

**Alvesco** (*ciclesonide*) inhaler

**Austedo XR** (*deutetrabenazine*) titration kit

**Corlanor** (*ivabradine*) tablets

**Cosentyx UnoReady** (*secukinumab*) 300 mg/2 mL injection

*disopyramide CR capsules*

**Lantus, Lantus Solostar** (*insulin glargine*), pens and vials

**Lokelma** (*sodium zirconium cyclosilicate*) packets

*mexiletine capsules*

**Nayzilam** (*midazolam*) nasal spray

*nitazoxanide tablets*

**Novolog** (*insulin aspart*) products

**Perseris** (*risperidone*) injection

**Rezvoglar** (*insulin glargine*) KwikPen

**Siklos** (*hydroxyurea*) tablets

**Soliqua** (*insulin glargine and lixisenatide*) pen

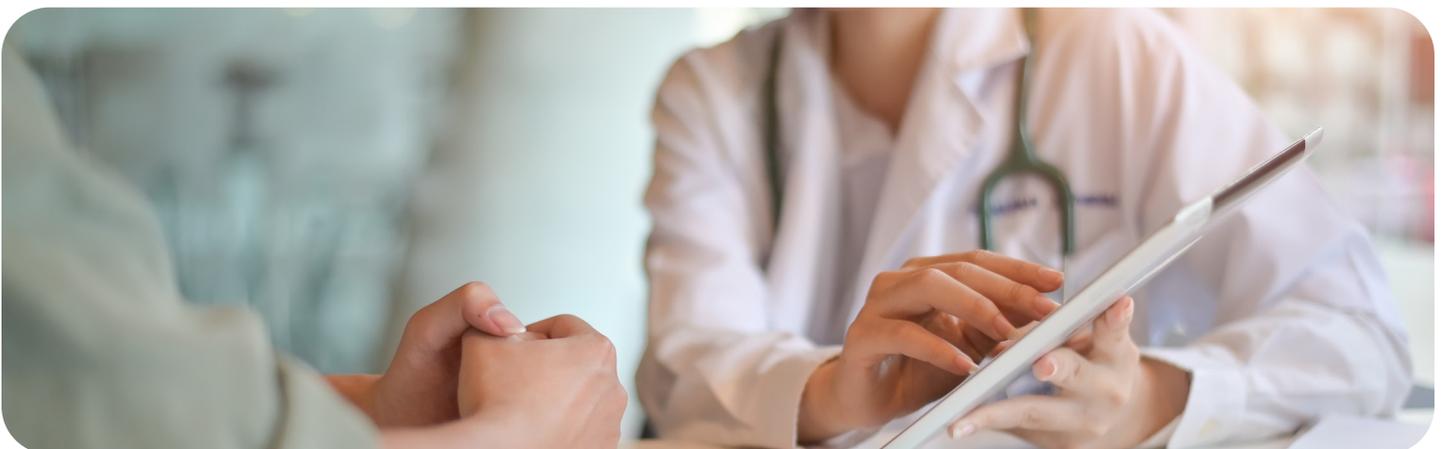
*tinidazole tablets*

**Trinate** prenatal tablets

**Valtoco** (*diazepam*) nasal spray

**Visco-3** (*sodium hyaluronate*) injection

**Zejula** (*niraparib*) tablets



**Removals:**

**Aimovig** (ereenumab) auto-injector  
carbidopa 25 mg tablets

**Creon** (pancrelipase) capsules **Flovent** (fluticasone) Diskus, HFA inhalers  
gemfibrozil tablets

**Flovent** (fluticasone) Diskus, HFA inhalers  
gemfibrozil tablets

**Guardian** continuous glucose monitoring (CGM) system

**Hyalgan, Supartz FX** (hyaluronidase derivatives) injection

**Ingrezza** (valbenazine) capsules

insulin aspart generic pens, vials

insulin glargine generics (including Basaglar) pens, vials

insulin lispro generics (including Admelog) pens, vials

**Leukine** (sargramostim) injection

meloxicam oral suspension 7.5 mg/5 mL

**Nouriaz** (istradefylline) tablets

**Nurtec** (rimegepant) tablets

**ProAir Respiclick** (albuterol) inhaler

**Procrit, Epogen** (epoetin alfa) injection

**Reyvow** (lasmiditan) tablets

**Risperdal Consta** (risperidone) 12.5 mg injection

**Steglatro, Segluromet** (ertugliflozin,  
ertugliflozin/metformin) tablets

**Victoza** (liraglutide) injection

**Viokace** (pancrelipase) tablets

**Xofluza** (baloxavir) tablets

**Xultophy** (insulin degludec/liraglutide) injection

**Additions with Prior Authorization:\***

**Auryxia** (ferric citrate) tablets

**Cablivi** (caplacizumab) injection

**Cerezyme** (imiglucerase [glucocerebrosidase]) injection

**Korlym** (mifepristone) tablets

**Krystexxa** (pegloticase) injection

**NovoSeven** (Factor VIIa, activated) injection

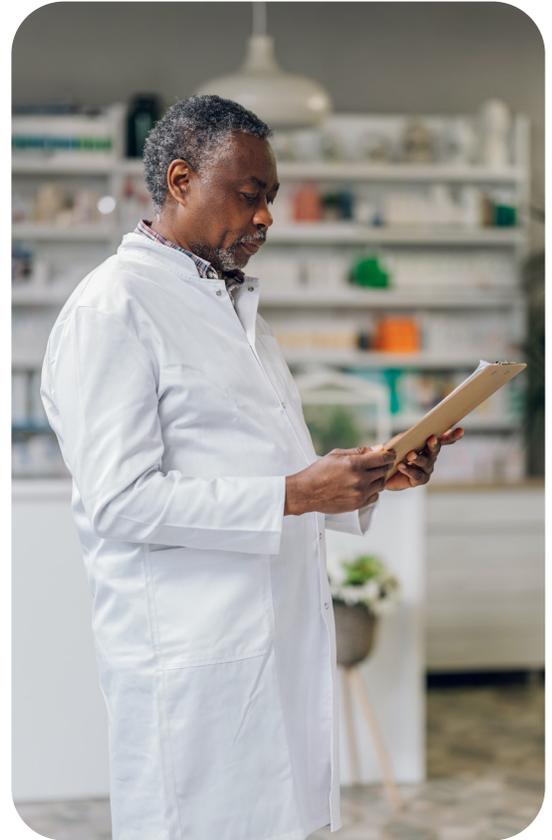
**Piqray** (alpelisib) tablets

**Takhzyro** (lanadelumab) injection

teriparatide pen-injector

**Tymlos** (abaloparatide) pen-injector

**Vraylar** (cariprazine) capsules



### **Addition of Quantity Limits:**

Inhaled corticosteroids (**Alvesco, Asmanex, Asmanex HFA, Flovent HFA** authorized generic)  
aprepitant capsules

Calcitonin gene-related peptide (CGRP) Receptor Antagonists

cyclosporine eye drops

diphenoxylate/atropine tablets

Long-acting injectable antipsychotics (**Abilify Maintena, Aristada, Aristada Initio, Invega Sustenna, Invega Trinza, Invega Hafyera, Perseris, Risperdal Consta, Zyprexa Relprevv**)

**Nayzilam** (midazolam) nasal spray

Proton Pump Inhibitor medications

**Santyl** (collagenase) ointment

Sickle Cell Disease agents (**Adakveo, Droxia, Oxbryta, Siklos**)

**Valtoco** (diazepam) nasal spray

### **Prior Authorization Removed:**

**Dexcom** CGM systems

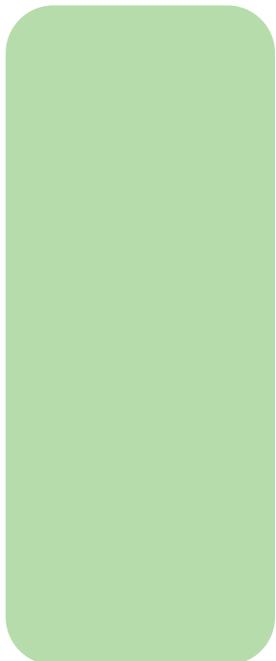
**Emgality** (galcanezumab) injection

**Santyl** (collagenase) ointment

The full formulary and list of formulary updates are available on the MedStar Family Choice DC Provider Website at [MedStarFamilyChoiceDC.com/providers/pharmacy](https://www.MedStarFamilyChoiceDC.com/providers/pharmacy).

**NEW!** The MedStar Family Choice DC P&T Committee welcomes your feedback. Providers can email feedback or requests for formulary additions or changes to: [MFC-FormularyFeedback@MedStar.net](mailto:MFC-FormularyFeedback@MedStar.net)

\*Please see the Prior Authorization and Step Therapy Table for clinical criteria. **The table is updated regularly.** Please use the most current version found on the pharmacy page of the MedStar Family Choice DC Provider Website at [MedStarFamilyChoiceDC.com/providers/pharmacy](https://www.MedStarFamilyChoiceDC.com/providers/pharmacy).



# Know our access and availability standards

As a MedStar Family Choice District of Columbia participating provider, your office is expected to meet the following appointment guidelines:

- Waiting time in the office may not exceed 45 minutes.
- Initial appointments for new Enrollees age 21 and older must be within 45 days of their enrollment date or within 30 days of the request, whichever is sooner.
- Initial appointments for new Enrollees under the age of 21 must be within 60 days of enrollment or earlier if needed to comply with the EPSDT periodicity schedule.
- Initial assessment of pregnant or postpartum women and those requesting family planning services must be within 10 days of the request.
- Routine primary or specialty care (including EPSDT appointments that are due, IDEA services and physical exams) must be within 30 days of the request.
- Urgent care appointments must be within 24 hours of the request.
- Primary care providers must maintain twenty-four (24) hours per day, seven (7) days per week access for Enrollees. During after-hours, this can be accomplished via an answering machine or answering service. Both methods must provide the Enrollee with instructions on how to access their PCP or an on-call PCP. In the case of an emergency, the Enrollee is to be instructed to call 911 or go to the nearest emergency room.

MedStar Family Choice DC conducts secret shopper surveys throughout the year to ensure that providers are in compliance with the above requirements. If your office is found non-compliant with any of the above requirements, your provider relations associate will contact you with the specific details. Your office will then be re-surveyed within the next 60 days. If the office remains non-compliant; you will be asked to submit a thirty (30) day corrective action plan to resolve the deficiency.

For questions concerning these standards, please contact the MedStar Family Choice DC Provider Relations department, Monday through Friday, 8 a.m. to 5:30 p.m. or **855-798-4244**, Option 2 or [mfcdc-providerrelations@medstar.net](mailto:mfcdc-providerrelations@medstar.net).





# MedStar Family Choice

DISTRICT OF COLUMBIA



3 YEARS

If you have questions regarding information in this newsletter, please call us, Monday through Friday, 8 a.m. to 5:30 p.m., at **855-798-4244** (select option 2 for Provider and then option 2 for Provider Relations).

You can also email us at **[mfcdc-providerrelations@medstar.net](mailto:mfcdc-providerrelations@medstar.net)**. This Provider Newsletter is a publication of MedStar Family Choice District of Columbia. Submit new topics for subsequent publication consideration to **[mfcdc-providerrelations@medstar.net](mailto:mfcdc-providerrelations@medstar.net)**.

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Carl Chapman, Director Provider Networks

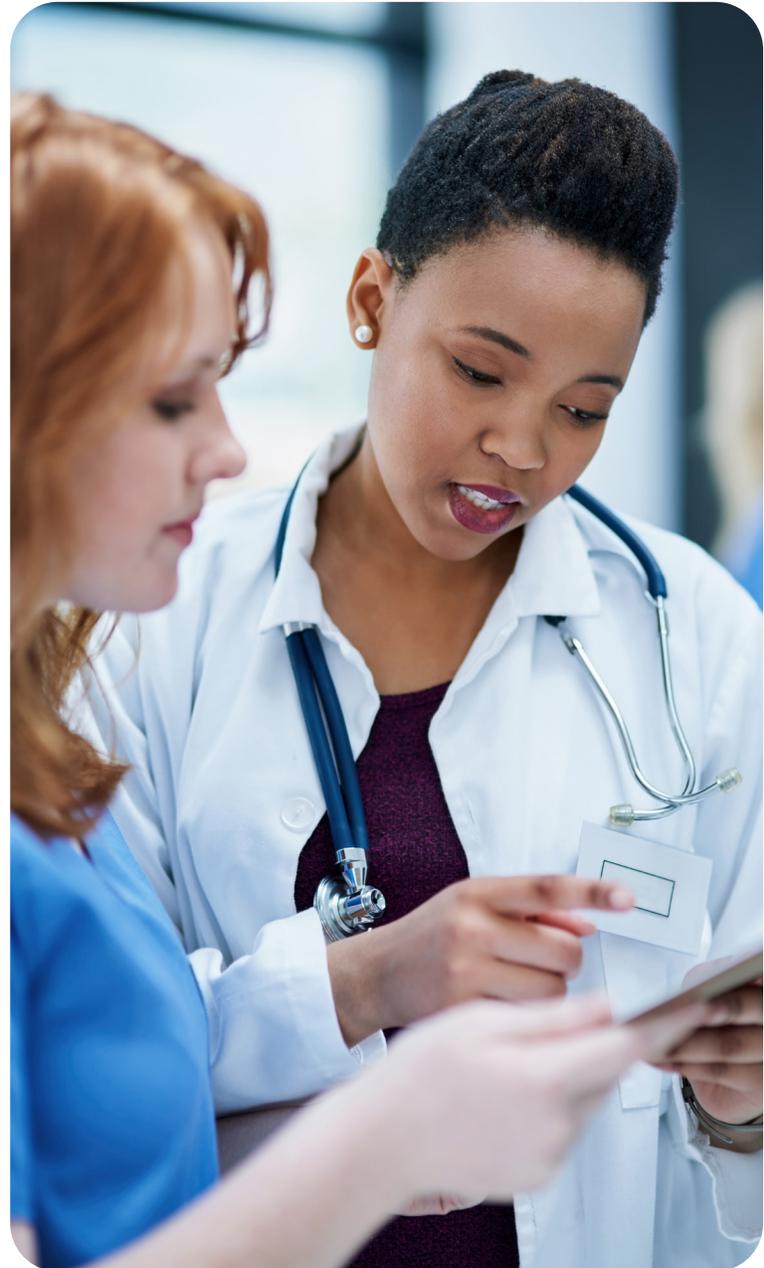
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**855-798-4244** (toll-free)

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**It's how we treat people.**