

Medicaid MCO SURVEY

The Rhode Island Department of Health (RIDOH) and Rhode Island Medicaid are surveying the RI Managed Care Organizations (MCOs) to understand the landscape of covered benefits that target hypertension control services for Medicaid members. To assist us in our efforts, please fill out the survey below by August 16, 2019.

General Questions:

- How many Medicaid members does your plan serve?
- How does your plan identify members who are hypertensive?
- What percent of your Medicaid members have you identified as hypertensive? Hypertensive as defined by the CDC is a blood pressure of 140/90 mmHg or more.

Plan Activities:

- Please describe any clinical, educational, case management or administrative hypertension control activities geared to members or to providers. Such activities might include: additional services co-incident to primary care visits, care management programs, chronic disease self-management education, home visits, or equipment like blood pressure cuffs.

Covered Benefits:

- Please list the benefits that your plan covers for hypertension control services and the associated diagnosis codes, billing codes, billing units (hours, minutes, units), and benefit limits. Examples of hypertension control services include individual counseling, telephonic counseling, evidence-based lifestyle change programs offered in a group setting, such as the National Diabetes Prevention Program (NDPP).
- Does your health plan reimburse for Medication Therapy Management (MTM) services provided by a pharmacist? What are a member's eligibility requirements to use this benefit?
- Do you reimburse for at-home blood pressure cuffs so that patients can self-monitor their blood pressure at home? If yes, do you reimburse for the clinical support needed to administer a self-measurement of blood pressure (SMBP) monitoring program? What are a member's eligibility requirements to use this benefit?
- Does your health plan reimburse licensed personnel for providing hypertension counseling or education to Medicaid members? (e.g., Certified Cardiovascular Disease Outpatient Educator (CVDOE))?
- Does your health plan reimburse non-licensed personnel (e.g., patient navigators, Community Health Workers (CHWs))?

- Does your plan provide coverage for community-based resources for hypertension control? If yes, describe what kind of community-based resources and describe how these referrals are made and documented. Is there a follow-up protocol for referrals?
- Where can Medicaid members find information about your plan's hypertension control benefits? Please provide a link if available.
- Where can providers find information about your plan's hypertension control benefits? Please provide a link if available.