

WINTER 2025

PROVIDER**TALK**

PG.
6

**Supporting Steps
Forward**

PG.
8

**Prior Authorization
Documentation**

PG.
12

**Postpartum Depression
Screening**

PG.
19

Ordering Statins



Feeling Better Changes Everything

Our Health Education and Disease Management programs are available at no additional cost to eligible members.



**WEIGHT
MANAGEMENT**



**DIABETES
PROGRAM**



**PREDIABETES
PROGRAM**



**ASTHMA
SUPPORT**



**KIDNEY
HEALTH**



**TOBACCO
CESSATION
PROGRAM**

CONTENTS

- 4** FQHC Week
- 5** Back To School Event
- 6** Supporting Steps Forward
- 7** CAHPS Survey
- 8** Prior Authorization Documentation
- 10** Tummy2Family App
- 11** Doula Support
- 12** Postpartum Depression Screening
- 13** Immediate Postpartum LARC Access
- 14** Health Education And Wellness Introduces Two New Programs
- 16** Asthma and COPD Care
- 18** Ordering Statins
- 21** Appeal Submission Tips
- 22** Provider Power Word Search

Questions?

Whether you have benefit questions or questions about claims, our Member Services team is here to assist you.

HPN:

1-800-777-1840

HPN On Exchange:

1-877-752-8026

HPN Off Exchange:

1-888-293-6831

HPN Medicaid:

1-800-962-8074

SHL:

1-800-888-2264

Or visit HealthPlanofNevada.com,
SierraHealthandLife.com, or
MyHPNMedicaid.com and sign in.

FQHC Week

FQHC Week is celebrated each year to highlight the essential contributions of Federally Qualified Health Centers (FQHCs) in delivering accessible health care to underserved communities. The clinical practice consultants and provider advocates delivered certificates and treated providers to popcorn or cookies.

Thank you to our valued providers for creating a healthier future for Nevada!



Back to School Event

SMA held a well-attended Back to School Health Fair with two resource tables. The event served 75 members—50 Medicaid and 25 commercial plan members. Wellness exams and women's health consultations were offered.

A total of 78 members aged 3 to 17 received well-child visits and school-required vaccinations. After their wellness exam, children received backpacks filled with goodies, while families enjoyed free youth haircuts, vendor booths, a photo booth, and delicious food.





Supporting Steps Forward

Focused on the Future.

Supporting Steps Forward connects members with a dedicated justice liaison who understands the challenges of re-entry and justice involvement. The liaison is here to walk alongside members, helping them take meaningful steps toward stability, wellness, and opportunity.

The justice liaison can help members:

- Find safe, stable housing and connect to re-entry programs
- Access job training, employment support, and workforce development
- Get referrals for behavioral health, substance use, and medical care
- Link to food, education, and child-care resources
- Navigate legal aid and community-based services
- Receive peer support from someone who's been there
- Coordinate with probation, parole, and justice system partners
- Build a personalized plan for long-term success

For more information, please contact our Supporting Steps Forward team at **Justicehpn@uhc.com**.



CAHPS Survey



The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey is an annual standardized survey conducted by a third-party vendor to assess members' experience with their health plan and health care services. A blinded random sample of members are surveyed across all lines of business, and the survey is fielded from February to May of each year.

The survey assesses patients' perceptions on aspects of quality of care such as the ease of access to providers and services and the patient/provider relationship including the communication skills of their provider.

Studies have shown patient satisfaction has many benefits including improved compliance and positive clinical outcomes. Quality organizations such as the Agency for Healthcare Research and Quality (AHRQ) and the National Committee for Quality Assurance (NCQA) use these results to rate patients' experiences with their health plan and contracted practitioners.

Here are some strategies to help improve patient experience and upcoming survey results:

- Use plain language, confirm patient understanding and encourage questions.
- Use direct eye contact, listen patiently and express compassion.
- Set aside time for same-day appointments for urgent needs.
- If you do not have an appointment available for urgent needs, provide an alternative (e.g. a list of urgent care options).
- Encourage patients to schedule routine visits far in advance.
- Call patients about test results as soon as they are available.
- Review authorization and referral processes to remove barriers to care and treatment.
- Help patients make specialist appointments before they leave the office.

Thank you for all you
do for our members,
your patients.



Prior Authorization Documentation

To comply with Nevada Assembly Bill 463 (NV AB463), effective January 1, 2026, all prior authorization requests must include relevant clinical documentation at the time of submission. This requirement is intended to support timely and efficient decision-making and to ensure compliance with the mandated response timeframe of two business days for routine requests.

Providers are encouraged to upload all supporting information directly in the Online Provider Center (OPC). Submitting complete clinical documentation helps prevent delays.

We appreciate your cooperation in aligning with these updated requirements to help streamline the prior authorization process and improve service for our members.

Prior Authorization Process for Applied Behavioral Analysis (ABA) Therapy Services

There are important updates to the prior authorization process for Applied Behavioral Analysis (ABA) therapy services. These changes apply to members enrolled in the following health plans:

- **Effective November 1, 2025**
 - o Health Plan of Nevada
 - o Sierra Health and Life
 - o Sierra Health-Care Options
- **Effective November 7, 2025**
 - o Health Plan of Nevada Medicaid

To enhance the quality of clinical reviews and support improved care for members with autism, the Behavioral Health pre-service review team will review all ABA therapy authorization requests according to InterQual guidelines. As part of this transition, prior authorization is required for all ABA therapy services, regardless of billed charges per service line.

Prior Authorization Submission Guidelines

- Contracted providers, please submit prior authorization requests including any supporting documentation via the Online Provider Center (OPC).
- Non-contracted providers may submit requests by phone or fax:
 - o Phone: **702-240-8733**
 - o Fax: **702-341-7681**

Need Help?

Contracted providers may contact Provider Services with any questions or concerns.

- Phone: **702-242-7088** or toll-free **1-800-745-7065**
- Email: **ProviderAdvocateTe@uhc.com**



We appreciate your continued partnership and commitment to delivering high-quality care to our members.

Tummy2Family App

Supporting Pregnancy and Family Health

Tummy2Family is the go-to app for pregnancy and family health with milestone tracking, personalized content, and 24/7 support. It can help families stay informed and connected from pregnancy through parenthood.

Key features

- Manage pregnancy through each milestone and trimester
- Easy setup with due date and birth date
- Seamless transition from pregnancy to parenthood
- Track pediatric and adult health milestones
- Monitor child's height and personal weight history
- Track daily habits for long-term wellness

Popular app clicks

- Personalized clinical content for a week-by-week guide
- Answers to questions about symptoms
- Resources and health benefits in your area
- Click-to-call 24/7 advice nurse

Getting started

Members can scan the QR code to download the Tummy2Toddler app.



Tummy2Family app



Doula Support



As of June 2023, Nevada Medicaid has broadened its benefits to include doula services, underscoring a strategic commitment to enhancing maternal health outcomes across the state. This expansion is especially impactful for families in rural communities, where access to comprehensive health care resources is often limited.

The Centers for Disease Control and Prevention (CDC) has identified doula access as a key strategy for improving birth outcomes and reducing maternal and infant mortality. These efforts are most effective when supported by multi-sector collaborations and Medicaid reimbursement programs.

By integrating doula services into Medicaid coverage, Nevada is taking meaningful steps to address disparities in maternal care. Doulas offer continuous emotional and physical support throughout pregnancy, labor, and the postpartum period—support that has been shown to improve health outcomes for both mothers and infants. Evidence-based research highlights that such support can reduce the likelihood of cesarean delivery and enhance overall satisfaction with the childbirth experience.

Benefits of doula support

- Reduced labor duration
- Lower need for labor-inducing medications (e.g., oxytocin)
- Fewer requests for epidural anesthesia

Why choose a doula?

- Many women report a more positive and empowered birth experience
- Doulas help alleviate fear and anxiety, fostering a more informed and supported childbirth journey

For assistance in locating a doula, please contact the Joyful Journeys case management team at **HPNOBTeam@UHC.com** or call **1-844-851-7830**, TTY **711**.

Sources:

National Institutes of Health (NIH)
CDC – Improving Birth Outcomes:
Access to Doulas & Evaluation
Across Sectors

Postpartum Depression Screenings



The American College of Obstetricians and Gynecologists recommends screening for depression, anxiety, and mood disorders during pregnancy and postpartum. The standardized screening tool is the Edinburgh Postpartum Depression (EPD) screening tool which determines the severity of symptoms.

Health Plan of Nevada (HPN) encourages providers to complete the screening tool for all pregnant and postpartum women. The goals of the screening are early identification of behavioral health needs to improve care opportunities and continuity of care through behavioral health therapy and to support healthy families.

To assist our members, please submit a postpartum depression screening referral for patients who meet the following criteria:

1. Score of 10 or higher on the EPD screening tool
2. Answer, "Never" to question number 10 on the EPD screening tool

HPN will assist members in scheduling behavioral health therapy appointments. To facilitate these appointments, HPN has updated the postpartum depression screening referral process.

Please call **702-838-2055** for instructions on how to submit completed EPD screenings that meet the above-stated criteria. We will make appointments with HPN's therapist team available through a NowClinic virtual visit, in-person at our Southwest Medical (SMA) Montecito and Siena clinics, or with another contracted therapist.

Immediate Postpartum LARC Access:

What Nevada Providers Need to Know

Effective June 1, 2023, Nevada Senate Bill 280 mandates that hospitals must offer long-acting reversible contraception (LARC)—such as IUDs or implants—immediately after childbirth if requested by the patient.

Why immediate postpartum LARC matters

Nevada has historically had low LARC usage among teens (ages 15–19), with only 0–5% accessing LARC at Title X-funded clinics.¹

Immediate postpartum LARC placement is seen as a key strategy to improve access and reduce unintended pregnancies. Benefits include:

- High patient motivation and satisfaction
- No need for a separate visit to confirm non-pregnancy
- Coverage under presumptive Medicaid
- Cost savings for health care systems

Professional support

Both the American College of Obstetricians and Gynecologists (ACOG) and the American Academy of Family Physicians (AAFP) support immediate postpartum LARC as a safe and effective option.² It helps with birth spacing and reduces risks associated with short interpregnancy intervals.

Medicaid reimbursement update

Nevada Medicaid allows separate billing for immediate postpartum LARC insertion using CPT code 58300-51.³ This applies to several provider types and is reimbursed outside of the bundled delivery payment.

**For full billing guidance,
refer to Medicaid Service
Manual Chapter 600.**

Sources:

¹www.dpbh.nv.gov/siteassets/programs/Community_Action_Plan_20_2_4_2020__002.pdf

²www.aafp.org/pubs/afp/issues/2018/0101/pg.html

³www.dpbh.nv.gov/search/?q=LARC+reimbursement



Health Education and Wellness Introduces Two New Programs

We are pleased to introduce two new wellness programs designed to deliver flexible, personalized support.

Heart health

This comprehensive program empowers patients to proactively manage their cardiovascular health. Through a multidisciplinary approach, participants receive tailored guidance to help reduce risk factors and adopt sustainable, heart-healthy habits.

Program features:

- Virtual heart health overview led by a registered dietitian
- Individual nutrition consultations with a registered dietitian
- Medication and lab review with a registered nurse
- Customized exercise and lifestyle planning with a health coach

Cannabis and your health

This confidential program offers patients the opportunity to explore cannabis use in a supportive, judgment-free environment. Licensed Alcohol and Drug Counselors (LADCs) provide education and personalized guidance to help patients make informed decisions.

Program highlights:

- Virtual or phone appointments available
- Services offered in English and Spanish
- Referrals to additional resources as needed



Referrals to these Health Education and Wellness programs can be placed through your standard referral process. For more information, please call Health Education and Wellness at **702-877-5356** Monday through Friday 8 a.m. to 5 p.m. or fax referrals to **702-838-1404**.

Asthma and COPD Care

Let's make asthma and COPD care proactive. Start with an action plan, every patient, every time. Asthma and COPD are among the most preventable chronic conditions in Nevada. According to America's Health Rankings, 8.8% of adults in Nevada have been diagnosed with asthma, and 7.1% have been diagnosed with COPD. These conditions contribute to avoidable emergency visits, missed workdays, and rising health care costs. Yet many patients lack a personalized action plan to manage their condition.



Why action plans matter

Action plans help patients:

- Understand when and how to use controller vs. rescue medications
- Recognize early warning signs and respond appropriately
- Know when to seek emergency care

Take action as a provider:

- Create or update action plans for every asthma/COPD patient
- Review inhaler technique and medication adherence at each visit
- Identify patients who may benefit from using a spacer for improved delivery
- Educate patients on environmental triggers and symptom tracking
- Coordinate with schools and caregivers for pediatric patients
- Ensure patient/parents can read and understand the instructions on the action plan

Small changes lead to impact

Providers who consistently use action plans see:

- Fewer emergency visits
- Better medication adherence
- Improved quality scores like asthma medication ratio (AMR)

Take 10 minutes this week to review your asthma and COPD patient panel.

- ✓ Identify patients without action plans
- ✓ Start the conversation
- ✓ Use these guidelines to guide your next visit

Refer your asthma patients ages five and up to Health Plan of Nevada's disease management asthma program where a registered nurse specializing in asthma is available. For more information, please call disease management at **702-242-7346**.

Together, we can reduce preventable hospitalizations and improve lives, one action plan at a time. Boost your impact with the following resources:

- Free CEU-accredited asthma training for health care professionals - **[Living with Asthma | Asthma | CDC](#)**
- Downloadable templates and guidance for creating personalized plans - **[Training & Certification | American Lung Association](#)**

Sources:

Explore Asthma in Nevada | AHR

Explore Chronic Obstructive Pulmonary Disease in Nevada | AHR

Ordering Statins

In 2025, several updated guidelines and clinical considerations have emerged that reflect the latest evidence and a continued emphasis on patient-centered care. Health care providers who prescribe statins should remain informed of these developments to ensure optimal therapeutic outcomes.



The following is a summary of key updates and recommendations:

1. Updated U.S. Preventive Services Task Force (USPSTF) Recommendations for Primary Prevention:

- Initiating statins for adults aged 40–75 years with ≥ 1 cardiovascular risk factor (e.g., dyslipidemia, diabetes, hypertension, smoking) and a 10-year CVD risk $\geq 10\%$ (Grade B).
- Selective offering of statins for those with a 7.5%–10% risk (Grade C), based on shared decision-making.
- No recommendation for adults 76+ years due to insufficient evidence.

These guidelines apply to individuals without existing cardiovascular disease or familial hypercholesterolemia (LDL-C >190 mg/dL).

2. 2025 Cholesterol Guidelines Emphasize:

- Age 40 is a critical threshold for considering statin therapy, even in the absence of other risk factors.
- Non-fasting lipid panels are now preferred for adults over 40, improving convenience and reflecting real-world physiology.
- Expanded screening for high-risk ethnic groups, including South Asians, Filipinos, and certain Hispanic populations, due to distinct lipid profiles and elevated ASCVD risk.
- Revised screening intervals based on risk:
- Low-risk young adults: every 5 years
 - Middle-aged with multiple risk factors: every 1–2 years
 - Older adults: annually
 - Diabetics: annually regardless of age

3. American Association of Clinical Endocrinology (AACE) 2025 Dyslipidemia Guidelines:

- Using the GRADE framework for evidence-based decisions.
- Prioritizing patient-important outcomes and shared decision-making.
- Considering newer lipid-lowering agents alongside statins for high-risk patients.
- Recognizing gaps in literature and tailoring therapy to individual risk profiles.

4. Clinical Practice Tips:

- Use validated CVD risk calculators (e.g., ASCVD Risk Estimator Plus).
- Discuss benefits vs. risks of statin therapy, including potential side effects (e.g., myalgia, liver enzyme elevations).
- Monitor adherence and lipid levels regularly.
- Consider moderate to high-intensity statins depending on risk level and LDL-C targets.

Despite clear clinical indications, many patients eligible for statin therapy either choose not to initiate treatment or discontinue it prematurely. This trend represents a substantial public health challenge, particularly considering the well-established efficacy of statins in reducing cardiovascular morbidity and mortality. Clinicians can play a pivotal role in enhancing patient awareness and adherence by fostering open dialogue, providing evidence-based education, and supporting shared decision-making throughout the treatment process.

Resources:

- Statin Use for the Primary Prevention of Cardiovascular Disease in Adults: Clinical Summary of the USPSTF Recommendation. [aafp.org](https://www.aafp.org)
- Cholesterol Guidelines 2025: Should Age 40 Be the New Threshold for Statin Therapy? [globalrph.com](https://www.globalrph.com)
- Statin Therapy for Patients with Cardiovascular Disease (SPC). [bluecrossnc.com](https://www.bluecrossnc.com)
- USPSTF Releases Updated Statin Guidelines for Primary Prevention of CVD. [acc.org](https://www.acc.org)
- 2025 Clinical Practice Guideline for the Pharmacologic Management of Adults with Dyslipidemia. [pro.aace.com](https://www.pro.aace.com)
- Clinician pocket guide. Treatment of high blood cholesterol. [heart.org](https://www.heart.org)
- Circulation - AHA/ASA Journals. [ahajournals.org](https://www.ahajournals.org)
- Coding Reference Guide Measure Year 2025 Statin Therapy for Patients with Cardiovascular Disease (SPC). [mvphealthcare.com](https://www.mvphealthcare.com)



Appeal Submission Tips:

Required Medical Documentation

To ensure timely and effective review of your appeal, please include the following relevant medical records based on the type of request:

Inpatient Hospitalizations

- History & Physical
 - Assessment, Psychiatric Evaluation, or Psychosocial Evaluation (for mental health-related admissions)
- Daily Progress Notes
 - Including therapy, physician (MD), and nursing (RN) documentation
- Physician Orders
- Discharge Summary
- Operative/Procedure Reports (if applicable)
- Pain Scale Documentation
- Medication Administration Record

Pre-Service Denied Medical Prior Authorization

- Physician Notes with patient history and clinical evaluation
- Diagnostic Imaging Reports
- Laboratory Results
- Operative Report (if applicable)

Pre-Service Denied Pharmacy Prior Authorization

- Most recent Physician Notes with history and evaluation
- Diagnostic Imaging Reports
- Most recent Laboratory Results
- Current Medication List

Provider Power:

Stay Covered, Stay Informed!

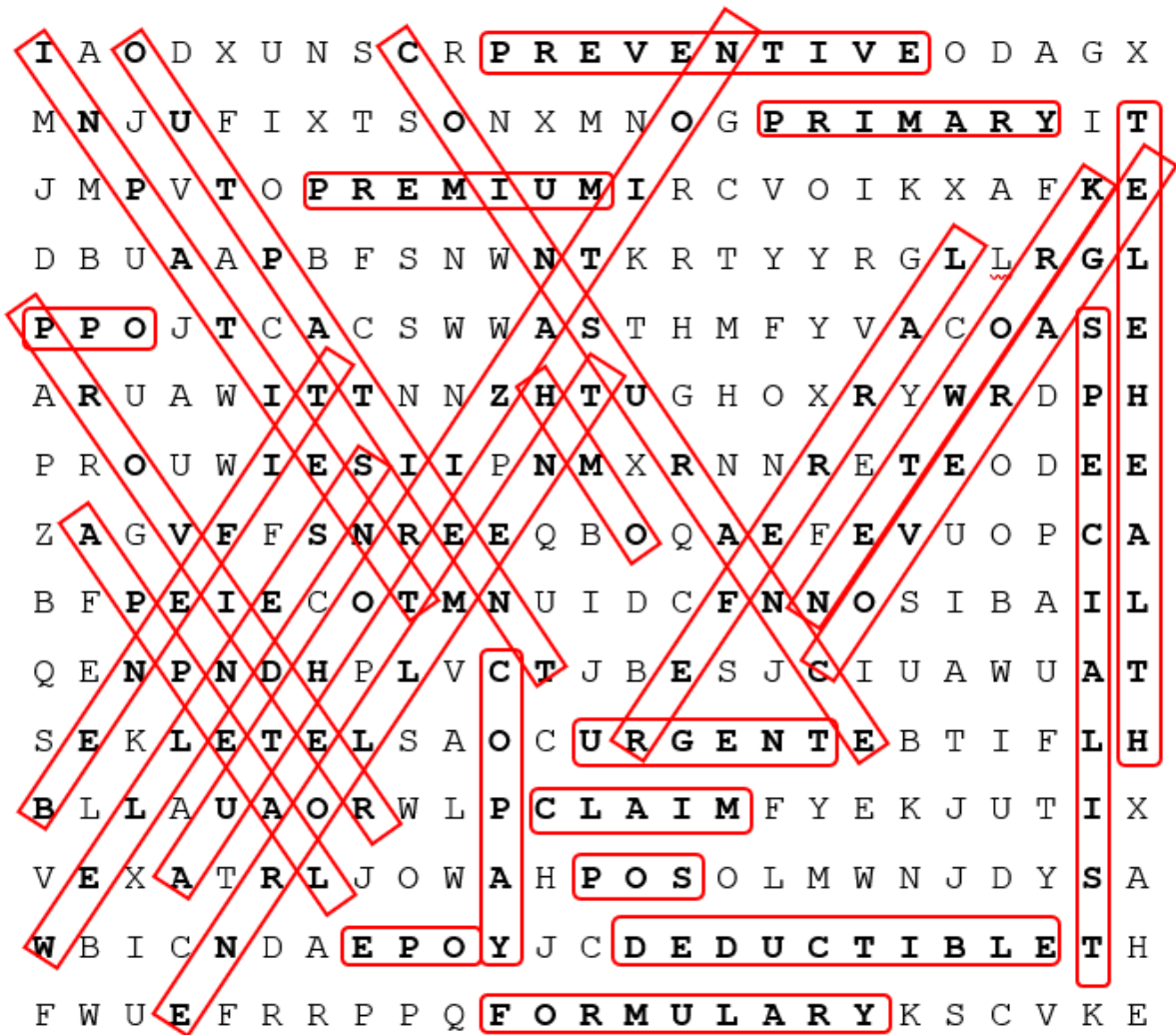
Find and circle key health insurance terms every provider should know.

Find the following terms:

Appeal, Authorization, Benefit, Claim, Coinsurance, Copay, Coverage, Deductible, EPO, Enrollment, Formulary, HMO, Inpatient, Network, Outpatient, POS, PPO, Premium, Preventive, Primary, Provider, Referral, Specialist, Telehealth, Urgent, Wellness

I A O D X U N S C R P R E V E N T I V E O D A G X
M N J U F I X T S O N X M N O G P R I M A R Y I T
J M P V T O P R E M I U M I R C V O I K X A F K E
D B U A A P B F S N W N T K R T Y Y R G L L R G L
P P O J T C A C S W W A S T H M F Y V A C O A S E
A R U A W I T T N N Z H T U G H O X R Y W R D P H
P R O U W I E S I I P N M X R N N R E T E O D E E
Z A G V F F S N R E E Q B O Q A E F E V U O P C A
B F P E I E C O T M N U I D C F N N O S I B A I L
Q E N P N D H P L V C T J B E S J C I U A W U A T
S E K L E T E L S A O C U R G E N T E B T I F L H
B L L A U A O R W L P C L A I M F Y E K J U T I X
V E X A T R L J O W A H P O S O L M W N J D Y S A
W B I C N D A E P O Y J C D E D U C T I B L E T H
F W U E F R R P P Q F O R M U L A R Y K S C V K E

Health Insurance Word Find Solution Key



PO Box 15645
Las Vegas, NV 89114-5645

PRSRT STD
U.S. POSTAGE
PAID
Las Vegas, NV
Permit No. 952

UHC8336_25.1 (12/25)