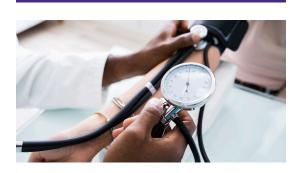
## **Provider** Newsletter





#### **BULLETINS**

- Medical Formula and Nutritional's Request Form
- Asthma Preventive Services
   (APS) and Asthma
   Remediation (AR) Billing
   Transition
- <u>Telehealth Guidelines</u> Reminder
- Prior Authorization List Changes
- Community Support Services
- DSNP Invitation
- <u>ePayment Center/Payspan</u>
  <u>Transition</u>



# **Vital** Updates

## Importance of Accurate Blood Pressure Readings

#### Why It Matters

Accurate blood pressure (BP) measurement is essential to delivering high-quality care and avoiding false positives. Many elevated BP readings are due to improper technique, leading to unnecessary follow-up, anxiety, or missed diagnosis.

#### Repeat When It's High

If a member's BP is greater than or equal to 140/90, Medical Assistants should always recheck before the visit ends - especially when the reading is borderline or unexpected.

#### **Best Practices for a Quality BP Reading:**

- 1. Use a chair with back support
- 2. Ensure patient is sitting straight, feet flat and legs uncrossed
- 3. No talking during reading
- 4. Place the cuff on a bare arm
- 5. Use the correct cuff size
- 6. Support the arm at heart level, fully extended. If the reading is >139/89, repeat after 1 minute or before discharge.

Taking just a moment to ensure proper BP technique and repeating high readings can make a major difference in patient outcomes and HEDIS compliance. Let's work together to provide best quality care for our members.

Click *here* for Common Codes for 2025 MCAS measures.

### **New August Vendors**

#### **ECM CASE MANAGEMENT**

• Community Action Partnership of Kern (DBA: CAPK)





# Initial Health Appointment (IHA) for the New KHS Members: A Key Step in Population Health Management



As a primary care provider, you play a pivotal role in ensuring that new KFHC members receive a comprehensive **Initial Health Appointment (IHA)** within the first 120 days of enrollment—or sooner, depending on the child's age and American Academy of Pediatrics guidelines. This is not just a regulatory requirement, it's an opportunity to assess and manage the health of your patients, setting the stage for better long-term outcomes.

Here's the good news: The IHA can be completed over multiple visits and even include

telehealth for certain compounds (although not all elements of the IHA can be done virtually). And if the member's medical record is up to date with complete information from the past 12 months, your assessment may waive the IHA requirement—just document your findings in the medical record!

So, what does an IHA include? It is a thorough check-up that covers:

- A complete history of physical and mental health
- Identification of any health risks
- Assessment for preventative screenings or services
- Health education for the member and family
- Diagnosis and treatment plan for any identified conditions
- A dental exam (required for all ages)
- A dental referral for ages 3 to under 21

Remember, the IHA is crucial for your patients' ongoing care, and it's a powerful tool for improving population health management. However, if a member dis-enrolls before 120 days, refuses the IHA, or if multiple attempts to contact them fail (all of which must be documented), you are no longer required to perform the IHA.

Make the IHA a priority, it's a win for your practice and a major step toward better health for your patients! For any questions or further details, don't hesitate to reach out to our **Population Health Management Team** at **1-661-426-7760 or 711 TTY/TDD**, Monday through Friday, 8:00 a.m. to 5:00 p.m.

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