



All Providers

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Did You Know?



Chlamydia screening

According to the Centers for Disease Control and Prevention (CDC), one of the largest growing populations for chlamydia are teens and young adults. Chlamydia infection is often asymptomatic, and screening for asymptomatic infection is a cost-effective strategy to reduce transmission and prevent pelvic inflammatory disease among females.

Talking to a teenager about sexual health issues like chlamydia can be difficult. But, left untreated, an affected individual may develop conditions such as pelvic inflammatory disease (PID), infertility, ectopic pregnancy and chronic pelvic pain. Provider resources can help get the conversation started. Visit the National Chlamydia Coalition website at ChlamydiaCoalition.org* for a free chlamydia screening implementation guide for health care providers. The National Chlamydia Coalition is an independent organization that provides health information you might find helpful.

GUIDELINES

PRACTISES

RULES

REGULATIONS

COMPLIANCE

STANDARDS

MCG care guidelines 26th edition — reminder

Effective Sept. 1, 2022, we will upgrade to the 26th edition of MCG care guidelines for the following module: Inpatient/surgical care (ISC).

To view a detailed summary of customizations, go to provider.

HealthyBlueSC.com/south-carolina-provider/medical-policies-and-

clinical-guidelines, select Other Criteria, and then select Customizations to MCG Care Guidelines 26th Edition.



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HEDIS 2022: Summary of changes from NCQA

The National Committee for Quality Assurance (NCQA) has changed, revised and retired HEDIS® measures for measurement year 2022.

Race and ethnicity stratifications were added to the following HEDIS measures:

- Colorectal Cancer Screening (COL)
- Controlling High Blood Pressure (CBP)
- Hemoglobin A1C Control for Patients With Diabetes (HBD)
- Prenatal and Postpartum Care (PPC)
- Child and Adolescent Well-Care Visits (WCV)

The following new measures have been added:

- Colorectal Cancer Screening (COL)
- Antibiotic Utilization for Respiratory Conditions (AXR)
- Use of Imaging Studies for Low Back Pain (LBP)

For a complete summary of 2022 HEDIS changes, visit www.ncqa.org/blog/hedis-2022-see-whats-new-whats-new-whats-retired/.*



The cost of alcohol use disorder

The total economic cost of alcohol use disorder (AUD) was estimated to be \$249 billion as of 2019, according to the CDC, with \$27 billion coming from health care costs. The CDC projected the total AUD economic impact on society to be \$807 per person per year.

AUD and health care spending Alcohol contributes to the highest amount of Healthy Blue spending related to substance use. Thirty-six percent of Medicaid substance use claims were related to alcohol in



2020, accounting for over \$129 million, an increase of 16 percent from 2019. Additionally, people with AUD are more likely to be high-cost claimants. In government and commercially insured patients across the country, the top 5 percent of high-cost claimants have either an existing AUD or health conditions resulting from alcohol use.

AUD and the workforce AUD also has a significant economic effect on the workforce by way of tardiness, absenteeism, employee turnover and conflict. It causes a reduction in potential employees, customer base and the taxpayer base.

AUD and mortality Alcohol use was directly tied to 95,000 deaths annually between 2011 and 2015, according to the CDC. This was more than all other illicit substances combined, including opioids, heroin, fentanyl and methamphetamines. The CDC estimates alcohol-attributed disease resulted in almost 685,000 years of potential life lost (YPLL) for the same period. YPLL is the estimation of the average time a person would have lived had they not died prematurely.



DID YOU KNOW? Did you know you can receive payments electronically? You can register and manage electronic fund transfers (EFT) through EnrollSafe. For more information, visit EnrollSafe.PayeeHub.org/.*







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*Some links in this newsletter lead to third-party sites. Those organizations are solely responsible for the content and privacy policies on these sites.

The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information.

To report fraud, call our confidential Fraud Hotline at 877-725-2702. You may also call the South Carolina Department of Health and Human Services Fraud Hotline at 888-364-3224 or email fraudres@scdhhs.gov.

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