SEPTEMBER 2026

MPM PROVIDER QUALITY NEWSLETTER

To access the materials referenced in this newsletter, please go to:

- https://www.medpointmanagement.com/provider-resources/
- Click on **"Quality Management Information"** and then **"2026 Quality Newsletters."**
- All materials are listed in one PDF document.
- Please also note that MedPOINT's Reference Guides are available under **"HEDIS 2026 Health Plan Guides and Resources"** and **"MedPOINT Resources"**.

MedPOINT MANAGEMENT

Join the MPM Quality Discussion Board!

MPM's Quality Management Discussion Board has an all-new landing page! Be sure to check out the Discussion Board's new look here: Pointing Healthcare In The Right Direction - MedPOINT Management. ➔

By joining the discussion forum, you can connect with a vibrant community of network providers, clinicians, and staff who are actively involved in exchanging ideas, seeking answers, and discussing optimal strategies for effectively implementing quality measures.

Our platform fosters collaboration and promotes the sharing of best practices to ensure the delivery of high-quality, cost-effective healthcare. The discussion board hosts various topics that you can peruse but be sure to make your own post to make the most of the platform. We look forward to reading and interacting with your discussions!

Your source for up-to-date information

- Standard vs. non-standard supplemental data — Quality Measures
- Role of MPM Quality Specialists compared to Health Plan QM Staff Roles — Quality Measures
- HEDIS vs. STARs vs. IHA AMP — Quality Measures
- Cancer Screening Reporting & CPT-II Codes — Quality Measures, Coding Tips and Tricks

Supporting Hispanic and Latino Members Through Culturally Responsive Care

September 15 through October 15 marks National Hispanic Heritage Month, a time to recognize and celebrate the contributions, cultures, histories, and traditions of Hispanic and Latino communities throughout the United States. In California, where a significant portion of the population identifies as Hispanic or Latino, healthcare providers have an important opportunity to strengthen patient engagement by delivering culturally and linguistically appropriate care.

Providing culturally responsive care goes beyond language translation. It involves understanding the cultural values, health beliefs, communication preferences, and social factors that may influence how patients access healthcare services, make healthcare decisions, and manage their health conditions. When providers acknowledge and respect these differences, they help build trust, improve communication, and support better health outcomes.

Understanding Cultural Influences on Healthcare

While every patient is unique, some Hispanic and Latino members may share cultural perspectives that can affect healthcare interactions, including:

- **Family-Centered Decision Making:** Many patients prefer to involve family members in healthcare discussions and treatment decisions.
- **Respect and Personal Relationships:** Establishing rapport and demonstrating respect can play a significant role in building trust between patients and providers.
- **Use of Traditional Remedies:** Some patients may use home remedies or traditional treatments alongside medical care. Providers are encouraged to discuss these practices openly and respectfully.
- **Health Literacy Considerations:** Patients may have varying levels of familiarity with medical terminology, insurance concepts, or preventive care recommendations.

Understanding these factors can help providers tailor communication approaches while continuing to support evidence-based care.

The Importance of Language Access

Effective communication is essential to high-quality patient care. Language barriers can contribute to misunderstandings regarding diagnoses, medications, preventive screenings, and follow-up care instructions.

Providers are encouraged to:

- Document each patient's preferred spoken and written language.
- Offer qualified interpreter services when needed.
- Avoid relying on family members, especially children, as interpreters for medical discussions.
- Utilize translated member education materials whenever available.
- Confirm understanding using the Teach-Back Method.

Providing information in a language the patient understands helps promote informed decision-making and increases patient confidence in managing their healthcare needs. Several MPM and health plan resources are available to assist providers in meeting language access requirements and supporting effective communication with members, should you need them. Please visit the MPM website for more information.

Building Trust Through Culturally Responsive Communication

Simple communication strategies can help improve patient engagement and strengthen provider-member relationships:

- **Use Plain Language:** Avoid medical jargon and explain health conditions and treatment recommendations using clear, everyday language.
- **Encourage Questions:** Create an environment where patients feel comfortable discussing concerns, asking questions, and sharing barriers that may affect their care.
- **Recognize Cultural Perspectives:** Approach cultural beliefs and practices with curiosity and respect rather than assumptions.
- **Tailor Health Education:** Whenever possible, use culturally relevant examples and educational materials that reflect the communities you serve.
- **Confirm Understanding:** The Teach-Back Method remains one of the most effective tools for ensuring that patients understand important health information and follow-up instructions.

Advancing Health Equity Through Cultural Competence

Culturally and linguistically appropriate services are a key component of health equity. By addressing language barriers, improving communication, and recognizing cultural influences on healthcare, providers help ensure that all members have an equal opportunity to understand their health conditions, participate in treatment decisions, and access preventive services.

As we recognize Hispanic Heritage Month, we encourage providers to reflect on ways to strengthen culturally responsive care within their practices and continue fostering welcoming environments for the diverse communities we serve.

Provider Resources

For Additional Cultural & Linguistic resources, interpreter information, training opportunities, and member education materials, please visit MPM's Provider Resources and Quality Management Information pages.

Provider Satisfaction Survey Winner!!

Congratulations to **Dr. Giselle Carvalho with HCLA,** for this month's Provider Satisfaction Survey winner!

Thank you, Dr. Carvalho, for taking the time to participate in our surveys. We truly appreciate your feedback and continued support!

Flu Season is Here

The decision to get an influenza vaccine, or any vaccine, is a personal one. Research shows that a strong recommendation from a health care professional is an important factor in whether someone decides to get vaccinated. More information about how to talk to patients about influenza vaccination is available at Talking about Influenza Vaccine Recommendation.

For more information, please click on these links:

- Fall Season Respiratory Vaccine Codes
- Guidance for Influenza Vaccination
- Clinical Guidance for Seasonal Influenza Vaccine Safety
- Seasonal Influenza Vaccine Dosage & Administration
- Influenza Vaccine Benefit and Safety Considerations during Pregnancy or while Breastfeeding
- Interim Clinical Considerations for the Use of Seasonal Influenza Vaccines in the United States

Timely Responses to Grievances - DMHC

As part of our ongoing commitment to ensuring the highest standard of care and service, we want to remind providers of the requirements from the Department of Managed Health Care (DMHC) stated in the Cal. Code Regs. Tit. 28 1300.68. and the importance of responding to grievances in a timely manner.

DMHC defines the following:

- A grievance is any expression of dissatisfaction (written or oral) about any matter other than an adverse benefit determination. Grievances may include, but are not limited to, the quality of care or services provided, aspects of interpersonal relationships such as rudeness of a provider or employee, and the member's right to dispute an extension of time proposed by the Managed Care Plan (MCP) to make an authorization decision.
- A complaint is the same as a grievance. If the MCP is unable to distinguish between a grievance and an inquiry, it must be considered a grievance. A member does not need to use the term "grievance" for a complaint to be captured as an expression of dissatisfaction and processed. If the member expressly declines to file a grievance, the complaint must still be categorized as a grievance and not an inquiry.
- An inquiry is a request for information that does not include an expression of dissatisfaction. Inquiries may include, but are not limited to, questions pertaining to eligibility, benefits, or other MCP processes.
- Resolved is a grievance that has reached a final conclusion and there are no pending appeals. All levels of grievance resolution or appeals, must be completed within 30 calendar days on the receipt of the grievance.

When MedPOINT Management receives a grievance from a health plan, there is an investigation process. During this investigation process, any entity named in the grievance is given the opportunity to provide a response and submit any supporting documentation (i.e., medical records). The timeliness of your response to grievances directly impacts member satisfaction and the overall trust in our healthcare system. Delays in addressing grievances can result in member dissatisfaction, affecting in quality ratings and potentially lead to state audits or penalties. As a provider, your contract outlines clear obligations to respond to any grievances or complaints forwarded to you, and it is imperative that these are handled within the timeliness set forth by state and federal laws and regulations.

For any questions related to grievances, please contact MedPOINT Management's Grievance and Appeals team at membergrievance@medpointmanagement.com.

For additional information, please reference the MedPOINT Management website: https://www.medpointmanagement.com/member-resources.

- Member Grievance and/or Appeal Process
- Grievance Forms

SEPTEMBER IS

National Childhood Obesity Month

Childhood and adolescent obesity have reached widespread levels in the United States. Unfortunately, about 17% of children in the US have been diagnosed with obesity. (NIH, 2019). Not only does obesity accompany a societal stigma but it can wreak havoc on kids' psychological and cardiovascular health. It is considered a public health concern that affect children's lives years down the line. Due to the prevalence of obesity, the overall health risk factors remain tenuous.

As we schedule well child visits for our pediatric population between the ages of 3-21, let us be mindful of documenting for childhood obesity. Utilizing clinical decision support tools and prompts in our EHR systems to successfully document weight, nutrition counseling and physical activity on well-child encounters help align with important quality improvement initiatives and value-based health care standards (NIH, 2024). Failure to document and properly calculate percentiles at these important well child visits increase the likelihood that overweight children will not receive the necessary nutritional counseling and specialty referrals for treatment.

The primary methods for childhood obesity prevention include educating the parents early on and encouraging diet and exercise from a young age. The secondary avenue of prevention is to teach children healthy eating habits like "eating the colors of the rainbow," and preventing the overconsumption of sweets and processed foods. These combinations of primary and secondary habits are crucial to achieving the best results and overcoming the childhood obesity epidemic.

As children go back to school, and enter their formative learning years, kids will continue to grow and feed their minds with knowledge. As parents we have the capability to feed and nourish their bodies with healthy food choices. So, when we pack our kids' lunches or if they have the option to dine in their school cafeterias, let us also be mindful of the types of food our little ones enjoy.

https://pmc.ncbi.nlm.nih.gov/articles/PMC6887808/

September Resources

- **National Suicide Prevention Month –** Join L.A. Care and Carelon Behavioral Health for practical education focused on promoting suicide prevention, recognizing and responding to risk, common mental health signs and symptoms, and improving timely connection to mental health services for L.A. Care members. For more information this document is attached to our MPM Newsletter.
- **Healthy Lifestyle Adult Weight Management –** Learn about L.A. Care Health Plan's adult weight management program. Connect members with resources that support sustainable weight management and improved health outcomes. For more information this document is attached to our MPM Newsletter.
- **Women Aged 40-49 Are Now Part of the Breast Cancer Screening Measure –** This is a reminder from IEHP that women aged 40-49 are now included in the Breast Cancer Screening Measure. This update aligns with the final recommendation from the United States Preventive Service Task Force, Issued in April 2024. For more information this document is attached to our MPM Newsletter.
- **Los Angeles County Provider Workgroup to Improve Warm Handoffs for Doula Services –** Providers and their support teams in Los Angeles County are invited to join a workgroup with the Medi-Cal managed care plans, local health jurisdictions, and doula partners to share education and discuss best practices for integrating doulas into care delivery. All pregnant and postpartum Medi-Cal members are eligible to receive doula services as a Medi-Cal benefit. For more information this document will be attached to our MPM Newsletter.
- **Please Call ISI for telephone interpreting services not language line –** Blue Shield of California Health Plan recently changed vendors to ISI at (833) 220-8015. No client ID# is required. BSCHP no longer work with Language Line. For more information this document will be attached to our MPM Newsletter.
- **2026 Member Language Demographics survey results –** IEHP conduct an annual Member Language Demographics Survey to inform providers and community about our members' language needs as a best practice to remove linguistic barriers, health inequities, and anticipate potential needs for interpreter services. Free Interpret Services are available. For more information this document will be found on our MPM website.
- **Protocol for How to Access Interpreting Services –** Federal law requires that healthcare providers who see government program recipients provide free language assistance to persons with limited English proficiency ad who are hard-of-hearing or deaf. To help providers meet this legal requirements, Blue Shield of California Promise Health Plan is providing over-the-phone, face-to-face, and American Sign Language interpreting services at no cost to BSP providers and members. For more information this document will be found on our MPM website.
- **No Prior Authorizations Needed for Obstetrical Care, Breast Cancer Screenings, and Cervical Cancer Screenings –** This memo clarifies the contractual and legal requirements for providing obstetrical care, breast cancer screenings, and cervical cancer screenings to L.A. Care Health Plan (L.A. Care) members without needing prior authorization or referral from contracted provider groups or L.A. Care. For more information this document will be found on our MPM website.
- **Unsatisfactory Immigration Status (UIS) Member Transition to Full Scope Medi-Cal Fee-for-Service –** Effective January 1, 2027, L.A. Care Health Plan (L.A. Care) members with Unsatisfactory Immigration Status (UIS) will transition from Medi-Cal managed care to the Medi-Cal Fee-for-Service (FFS) delivery system. To support a smooth transition for you and your patients, the California Department of Health Care Services (DHCS) is providing the following important information regarding provider enrollment, billing, and ongoing care responsibilities. For more information this document will be found on our MPM website.
- **Interpreter Service Contact Information for Health Plans Affiliated with MedPOINT Management –** This document will be found on our MPM website for more information.
- **Transitioning Member with Unsatisfactory Immigration Status to the Medi-Cal Fee-For-Service Delivery System –** Message from Blue Shield of California Health Plan to network providers. To support a smooth transition for you and your patients, the California Department of Health Care Services (DHCS) is providing the following important information regarding provider enrollment, billing, and ongoing care responsibilities. For more information this document will be found on our MPM website.

We heal and inspire the human spirit.

To: PCPs & OB/GYNs

From: IEHP – Provider Relations

Date: August 20, 2026

Subject: **Women Aged 40-49 Are Now Part of the Breast Cancer Screening Measure**

This is a reminder that **women aged 40–49 are now included in the Breast Cancer Screening measure**.

This update aligns with the final recommendation from the United States Preventive Services Task Force (USPSTF), issued in April 2024. The Task Force now advises that all women begin biennial breast cancer screenings starting at age 40. This marks a change from the previous guidance, which suggested screenings for women aged 40 to 50 should be based on individual discussions with their clinician. Now, all women are encouraged to start screening at age 40.

Call to Action

- **Identify Eligible Patients:** Women aged 40–49 should now be considered for routine screening, along with those ages 50–74.
- **Review your Provider Portal Reports:** Check for patients listed in the Breast Cancer Screening (BCS) care gap list for women ages 40–49 and ensure appropriate outreach and screening opportunities are provided.
    - Provider Portal > Reports > Preventive Care *or* P4P
- **Educate Patients:** Discuss the benefits, risks, and screening frequency through age-inclusive counseling.
- **Follow Screening Guidelines**: Adhere to current USPSTF recommendations for screening modalities - biennial mammography, which may increase to annual based on individual risk factors.
- **Documentation and Claims:** Ensure that mammogram services are accurately coded and included in member preventive care records to support performance evaluation. Confirm that mammogram claims are submitted within standard reporting windows for accurate measurement.

For more information about provider incentives for breast cancer screening, please review our *Pay for Performance Programs Guide* by visiting:

www.providerservices.iehp.org > Programs & Services > Provider Incentive Programs > Pay for Performance.

If you have any questions, please contact the IEHP Provider Call Center at (909) 890-2054, (866) 223-4347 or email ProviderServices@iehp.org

All IEHP communications can be found at: www.providerservices.iehp.org > News and Updates > Notices.

Los Angeles County Provider Workgroup to Improve Warm Handoffs for Doula Services

Providers and their support teams in Los Angeles County are invited to join a workgroup with the Medi-Cal managed care plans, local health jurisdictions, and doula partners to share education and discuss best practices for integrating doulas into care delivery.

All pregnant and postpartum Medi-Cal members are eligible to receive doula services as a Medi-Cal benefit. This workgroup will build provider capacity to connect Medi-Cal patients to doulas – helping providers to:

1. **Add Medi-Cal doula services into workflows:** Share benefit information with eligible Medi-Cal members and make referrals.
2. **Support warm handoffs:** Adopt criteria for facilitating warm handoffs for Medi-Cal doula services.

Workgroup Details:

- **Time Commitment:** 4 virtual monthly meetings, 1 hour each
- **Duration:** September 2026 – December 2026
- **Who Should Attend:** Health care providers and their support teams, including obstetricians, primary care physicians, nurses, physician assistants, medical assistants, clinic staff, and office managers

Workgroup Meeting Topics	
Meeting #1 ***September***	**Introduction to Doulas** • Introduction to Doulas: Role in Care and Health Equity • Medi-Cal Doula Benefit Overview • Provider Policies for Working with Doulas
Meeting #2 ***October***	**Referrals and Warm Handoffs to Doulas** • Current State of Doula Referrals • Defining Warm Handoffs and Co-Developing Workflows
Meeting #3 ***November***	**Building Relationships with Doulas** • Learning from Doulas: Perspectives and Stories • Care Team Collaboration
Meeting #4 ***December***	**Sustaining Workflows for Doula Services** • Implementing Warm Handoffs • Provider Progress Integrating Doulas in Care Teams

Register here by September 14, 2026

National Suicide Prevention Month

Webinar: Carelon Behavioral Health: Promoting Prevention, Strengthening Access, and Improving Outcomes

Wednesday, September 2, 2026 12:00 p.m. – 1:00 p.m.

Speakers
Carelon Behavioral Health team:

- **Tasha Boucher** is a Licensed Marriage & Family Therapist and Provider Quality Manager supporting Carelon's partnership with L.A. Care.
- **Ashley Gamundoy** is a Clinical Quality Manager collaborating with L.A. Care to provide data analytics, research, and reporting to ensure quality outcomes.
- **April Myers** is a Registered Nurse and in her role as Behavioral Health Services Manager she manages a team of clinical professionals.

Join **L.A. Care and Carelon Behavioral Health** for practical education focused on promoting suicide prevention, recognizing and responding to risk, common mental health signs and symptoms, and improving timely connection to mental health services for L.A. Care members.

Learn more about:

- Suicide prevention: risk and protective factors, warning signs, and how to respond
- Supportive communication: language and approaches that reduce stigma and encourage engagement in care
- Improving outcomes: depression screening, follow-up, and care transitions
- Strengthening access: connecting L.A. Care members to Carelon Behavioral Health

Who should attend:

- Physicians
- Nurses
- Physician Assistants
- Social Workers/Care Managers
- Medical Assistants/Clinic Staff

Register

Questions? Email Quality@lacare.org

PL2884 0826

[TO BE COPIED AND PASTED INTO THE BODY OF AN EMAIL]

Drop date: August 26, 2026

From: Blue Shield of California Provider Communications

To: Medi-Cal network participants

[subject] Please call ISI for telephone interpreting services, not Language Line

Dear Provider,

Blue Shield of California Promise Health Plan recently changed vendors to provide free over-the-phone interpreting services for members with limited English proficiency (LEP) and those who are hard-of-hearing or deaf.

We no longer work with Language Line. Our new vendor is ISI.

For over-the-phone interpreting services, please call ISI at (833) 220-8015. No client ID# is required.

An ISI customer service agent will ask for the following information:

- Blue Shield Promise member ID# (subscriber ID#)
- Language needed
- County

Video remote interpretation services are also available from ISI. For more information, please refer to the attached "Protocol for How to Access Interpreting Services" fact sheet.

If you have any questions, please contact Jennifer Mazariegos, Cultural & Linguistic Specialist, at (562) 580-6077 or send an email to Jennifer.Mazariegos@blueshieldca.com.

Sincerely,

Blue Shield of California Promise Health Plan

Attachment

blue CALIFORNIA PROMISE

TBSP17079 (8/26)

August 26, 2026

To: Blue Shield of California Promise Health Plan
Provider Network Participants

Distributed via FAX
Page 1 of 1

From: Blue Shield of California Promise Health Plan

Subject: Please call ISI for telephone interpreting services, not Language Line

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- Language needed
- County

Video remote interpretation services are also available from ISI.

To learn more, access the "Protocol for How to Access Interpreting Services" fact sheet online:

1. Go to **www.blueshieldca.com/promise** and select the "Providers" section.
2. In the blue navigation bar, click "Our programs."
3. Select the link to "Cultural Awareness and Linguistics Program" from the tiles near the bottom.
4. Scroll down to the section titled, "24-hour interpretation services information and request forms."

If you have any questions, please contact Jennifer Mazariegos, Cultural & Linguistic Specialist, at (562) 580-6077 or send an email to **Jennifer.Mazariegos@blueshieldca.com**.

Healthy Lifestyle
Adult Weight Management

L.A. Care HEALTH PLAN
For All of L.A.

Webinar

Wednesday, September 16, 2026, 12:00 p.m. – 1:00 p.m.

Learn about L.A. Care Health Plan's adult weight management program. Connect members with resources that support sustainable weight management and improved health outcomes.

By the end of the webinar, you'll be ready to:

- **Discover practical resources** from L. A. Care's Health Education program to help members make healthier choices around nutrition, physical activity, sleep, stress management, and everyday healthy habits.
- **Build confidence in weight-management conversations** by learning how to support members with positive, sustainable behavior changes—without judgment.
- **Know where to connect members for support** by understanding the referral process and identifying the right programs and services for their needs.

Who should attend:

- Providers

Register

If you have questions, please Email quality@lacare.org