



Summer 2024

New Referrals at the Beginning of Every Year

Please remember that referrals to specialists expire at the end of every year (December 31). We ask our members to request their Primary Care Provider to submit a new referral at the beginning of every Plan Year for specialty services, including physical therapy, occupational therapy, and speech therapy.

Network specialty providers should provide clearly legible specialty care consultation or referral reports, operative reports, and discharge summaries to the beneficiary's Primary Care Provider. All consultation or referral reports, operative reports, and discharge summaries should be provided to the Primary Care Provider within 30 calendar days.

HEDIS Measurement for Diabetic Kidney Disease

US Family Health Plan has conducted a study of the frequency of our network providers meeting the criteria for the HEDIS measure for diabetic kidney disease. We thank those providers who participated.

We found that many of our providers were using the old HEDIS screening methods of urinary microalbumin, or determining if the member met the requirement by taking an ACE or ARB. In 2020, the National Committee for Quality Assurance (NCQA) changed the screening measure for diabetic kidney disease to no longer include these methods as meeting the screening requirement.

The current requirement is measuring the urine protein-to-creatinine ratio and calculating the GFR for diabetic members annually. A HEDIS Cheat Sheet is available on the Tufts Health Plan Provider Portal that describes the current requirements.

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*Greater Boston, North Shore, central
and western Massachusetts*