



October 2025

Welcome to UPHP's Bimonthly Provider Newsletter. This is your one-stop shop for all the latest news and updates from Provider Relations. This newsletter is a collaborative project that allows us to distribute important information from various departments at UPHP. This will be sent out to all Office Manager email addresses currently on file and will occur bimonthly on the 15th.

You can also view previous Provider Newsletters and other vital communications by visiting our [UPHP Provider Resources](#) page.

Please forward this to others within your facility as needed. Please contact [UPHP Provider Relations](#) to update any email addresses or request additional ones to be added to the distribution.

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Clinical



Cotiviti Provider Intelligence (PI)

UPHP encourages in-network primary care offices to take advantage of our free population health

management tool and member registry, Cotiviti PI, to better understand your attributed UPHP membership, Healthcare Effectiveness Data and Information Set (HEDIS) quality scores, and care gaps.

This integrated data platform is fully supported by UPHP, and training is customized to your clinic's objectives. Data is refreshed monthly and provides up-to-date information based on claim submissions and enrollment. The system also allows for multiple filtering and drill-down capabilities for detailed and personalized review of selected criteria.

[READ THE FULL ARTICLE HERE](#)

Motivating Members Matters: Diabetic Eye Exams

We recognize that prevention plays a key role in preserving health. This is equally true for diabetic eye complications. The Healthcare Effectiveness Data Information (HEDIS) Retinal Eye Exam (EED) measure reports the percentage of adults ages 18 to 75 living with diabetes who had a retinal eye exam to screen for diabetic retinal disease during the calendar year. The rate of UPHP members who fulfilled this exam in 2023 was 57.18% and the provisional rate for MY 2024 is 55.96%. The final rate is not yet determined. However, it indicates that more than 40% of UPHP members with diabetes did not receive their recommended eye examination during the measurement period, representing a missed opportunity for care.

[READ THE FULL ARTICLE HERE](#)

UPHP Earns Top 2024 NCQA Health Plan Rating in Michigan

Every year the National Committee for Quality Assurance (NCQA) evaluates health plans on the quality-of-care patients receive and how happy patients are with their care. It is based on performance in dozens of quality measures and is scored on a 0-5 scale in half point increments.

UPHP is proud to announce that a 4.0 performance rating for Medicaid beneficiaries, including Medicaid, HMP, MHL, CSHCS, has been achieved for measurement year 2024. This good rating makes UPHP one of the highest-rated Medicaid health plans in the state and the nation which reflects the quality care UPHP providers give.

- UPHP was one of two Medicaid health plans in Michigan to receive a 4.0 rating
- UPHP performance nationally was in the top 25%

Thank you to all our UPHP providers who contributed to this notable achievement by providing high quality care to our members and we look forward to working together to achieve new heights!

How and When to Use Evidence-Based Shared Decision-Making Tools

Shared decision making is an important component of centering informed health care decisions around the whole person by considering their values, preferences, and goals for treatment.

Evidence-based shared decision-making aids have been developed to address a variety of situations where a provider and patient may have several valid treatment options, including no treatment, available to choose from.

Providers should use their clinical judgment to evaluate the ability or interest of their patient in making treatment decisions. Providers should also help select evidence-based or certified tools appropriate to the patient's condition. Two examples of shared decision-making tools would be a brochure illustrating antidepressant treatment options and an online tool assisting with choice of anticoagulant.

[READ THE FULL ARTICLE HERE](#)

Promoting Culturally & Linguistically Appropriate Services

UPHP provides professional translation and interpretation services at no additional cost to members. Language services extend to written materials, sight translations (oral interpretation of a written document), and American Sign Language services. UPHP's language services are also available to the provider network to access.

[READ THE FULL ARTICLE HERE](#)

Compliance



UPHP Medical Record Requests Reminder

There are times when UPHP may request medical records on our members. Common reasons include:

- Provider/facility auditing (documentation, billing/coding, quality of care)
- HEDIS reporting
- Risk Adjustment
- Member appeal and grievances
- Care coordination
- Fraud, Waste, or Abuse concerns

UPHP would like to remind our providers that medical records are to be provided to UPHP within fourteen days of receipt of the written request and will be provided at no cost to UPHP. This information is in your UPHP Provider Participation Agreement, 7.3 Access to and Review of Records. This timeframe also applies to offices and facilities that use a vendor to process their medical record requests.

If you are needing more time to provide records, please contact the individual at UPHP requesting the record. Failure to provide medical records within the time frame may result in recoupments or other disciplinary actions.

Customer Service



UPHP Transportation Message to All Providers

To ensure that our shared patient/members receive their mileage reimbursement benefit for transportation expenses to their medical appointments, please be aware of the UPHP requirements.

To ensure that consistency is maintained throughout our processes, we want to clarify our policy regarding appointment verification.

[READ THE FULL ARTICLE HERE](#)

Pharmacy



Fall Vaccines: RSV, Flu, & Covid Vaccines

As we prepare for the start of fall, we should also prepare for the start of seasonal vaccinations. This year RSV, influenza, and COVID-19 vaccines are available, and patients can receive them concomitantly if eligible.

[READ THE FULL ARTICLE HERE](#)

Medicaid Common Formulary and UPHP-Specific Formulary Changes Effective Nov. 1, 2025

Effective Nov. 1, 2025, in alignment with Michigan Department of Health and Human Services (MDHHS) and with the approval of the UPHP Clinical Advisory Committee, the UPHP Medicaid formularies have been updated with the following changes:

[READ THE FULL ARTICLE HERE](#)

Risk Adjustment



Getting it Right: Top 10 Risk Adjustment Documentation Oversights & Fixes

Welcome to the fourth installment in our new series, Getting it Right: Top 10 Risk Adjustment Documentation and Coding Opportunities. Accurate provider documentation is key for proper diagnosis coding, reimbursement, and quality care.

Over the next several issues of the UPHP Provider Newsletter, we will highlight common pitfalls identified through audits and chart reviews and practical strategies to address them.

[READ THE FULL ARTICLE HERE](#)



UPHIE



Seamless, Secure Access to Critical Health Data

- Web-based, cross-platform access to a comprehensive patient data vault
- Automated updates and real-time alerts to keep you informed
- Effortless participation in data-sharing initiatives with other health care organizations



Maximize Incentive Opportunities

- Fulfill eligibility for various BCBSM incentive programs through UPHIE use cases
- Leverage PGIP incentives by participating in key programs like ADT



Enhance Patient Care and Efficiency

- Instantly access up-to-date patient data, including diagnoses, lab results, and care transitions
- Securely send and receive direct messages with health care organizations for seamless coordination



Support Community Health Initiatives

- Contribute to statewide and local health efforts by sharing immunization records, critical test results, and other essential data

For more information please contact: Hannah Marinoff, hmarinoff@uphcs.org, 906-225-6741

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