



*Formerly Known As
Monroe Plan for Medical Care*

Elm and Oak Health April 2026 Provider Newsletter

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April 2026: Head & Neck Cancer Awareness Month

April 2026 marks Head & Neck Cancer Awareness Month, a time dedicated to increasing public understanding of head and neck cancers—especially among

individuals at higher risk—and promoting awareness of screening opportunities and available resources across the country. As with many cancers, early detection plays a critical role in improving treatment outcomes, making education and timely medical evaluation essential.

Head and neck cancers can develop in several areas of the head and neck region. Most are **squamous cell carcinomas**, which originate in the lining of the mouth, nose, and throat. These cancers can also arise in the salivary glands, which contain a variety of cell types capable of becoming malignant. It is important to note that cancers of the brain, eyes, esophagus, thyroid gland, scalp, skin, and the bones of the head and neck are not classified as head and neck cancers.

In the United States, approximately **71,000 new cases** of head and neck cancer are diagnosed each year, with about **16,000 deaths annually**. The most significant risk factors include **tobacco use**—including smokeless tobacco such as chewing tobacco or snuff—and **alcohol consumption**. Individuals who both smoke and drink heavily may be up to **30 times more likely** to develop head and neck cancer compared to those who do neither. Additionally, infection with the **human papillomavirus (HPV)**—particularly HPV-16 and HPV-18—is responsible for an estimated **60–70% of oropharyngeal cancers**. Infection with the **Epstein–Barr virus (EBV)** has also been associated with an increased risk of nasopharyngeal cancer.

Epidemiologically, head and neck cancers occur more frequently in men than in women, with male-to-female ratios ranging from **2:1 to 4:1**, and they are most commonly diagnosed in individuals **over the age of 50**. Certain populations are disproportionately affected. For example, **laryngeal cancer occurs about 50% more often in African American men**, and mortality rates from both laryngeal and oropharyngeal cancers are higher in this group compared with other populations. Recognizing potential warning signs is an important step toward early detection.

Common symptoms that may indicate head and neck cancer include:

- A lump or sore that does not heal.
- A persistent sore throat
- Pain or difficulty swallowing
- Hoarseness or voice changes that do not improve.
- Chronic sinus infections that do not respond to antibiotics.

- Swelling under the chin or around the jaw

Regular **self-examinations** can also help identify early changes. Individuals should periodically check the neck for lumps and examine the lips, cheeks, and gums for abnormal or discolored areas, such as white or red patches. Any swelling, sores, or lumps that persist for **longer than two weeks** or continue to grow should be evaluated by a healthcare professional. In many cases, further evaluation may involve an **ear, nose, and throat (ENT) specialist** or a **head and neck surgeon**.

Diagnostic testing may include procedures such as **panendoscopy** to visualize the affected areas, imaging studies like **CT, MRI, or PET scans**, and a **biopsy** of suspicious tissue. These evaluations allow physicians to determine the exact location and stage of the cancer and whether it has spread, which is essential for developing the most effective treatment plan.

Conclusion

Head & Neck Cancer Awareness Month highlights the importance of education, prevention, and early detection. By understanding risk factors, recognizing warning signs, and utilizing screening and diagnostic resources, individuals can play an active role in protecting their health. Increased awareness not only helps save lives through earlier diagnosis but also empowers communities to reduce risk, seek timely care, and support those affected by head and neck cancer.

April is Sexually Transmitted Infections (STI) Awareness Month

During April, healthcare providers are encouraged to prioritize STI awareness, particularly for young females. It is important to collect a urine sample for Chlamydia testing during the annual well visit for females aged 16-24. Although the yearly well visit is typically the most common opportunity to obtain this sample, providers should also consider offering the screening during acute visits if the patient has an outstanding gap for Chlamydia screening. Normalizing Chlamydia screening as a routine part of the annual visit for this age group helps ensure early detection and treatment.



Black Maternal Health Week

Black Maternal Health Week is observed annually from April 11-17. The purpose of this week is to raise awareness and drive action toward improving Black maternal health. Healthcare workers are called upon to unite in efforts to reduce Black maternal mortality.

Healthcare Providers Can:

- Ask questions to better understand their patients and the factors impacting their lives.
- Educate patients and their companions about urgent maternal warning signs and when it is necessary to seek immediate medical attention.
- Assist patients in managing chronic conditions or conditions that may develop during pregnancy, such as hypertension, diabetes, or depression.
- Respond to any concerns expressed by patients.
- Deliver respectful, high-quality care to all patients.

Hospitals and Healthcare Systems Can:

- Standardize the coordination of care and emergency response protocols.
 - Enhance the delivery of quality prenatal and postpartum care.
 - Provide training for non-obstetric care providers, enabling them to inquire about pregnancy history within the past year.
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Molina Healthcare is offering Two Provider Incentive Programs in 2026:

Clinical Profile Quality (CPQ) Program

Providers can earn incentive dollars by participating in the **Clinical Profile Quality (CPQ) Program**. The program supports pre-visit planning and point-of-care assessments to help identify and close gaps in care, including HEDIS® measures.

Eligible visits include Annual Wellness Visits, routine physicals, well-child visits, and comprehensive office visits.

Level 1 Basic Assessment - \$125 earned when submitting medical record documentation after visit is completed within 90 days of service

Level 2 Full Assessment – additional \$50 earned when completing Clinical Profile form per member

Note: *Dates of service must occur **after** your provider group receives the CPQ Program member list. Services rendered prior to receipt of the list are not eligible.*

2026 Pay for Quality (P4Q) Program

Molina Healthcare of New York's **2026 Pay for Quality (P4Q) Program** rewards eligible Primary Care Providers for delivering high-quality, evidence-based care and closing care gaps aligned with NYSDOH priorities.

Provider groups with **150+ attributed members** may earn incentive payments through **Pay for Performance (P4P)** and **Pay for Reporting (P4R)** across Medicaid, HARP, and Essential Plan populations.

Performance Period: January 1, 2026 – December 31, 2026

Requirements:

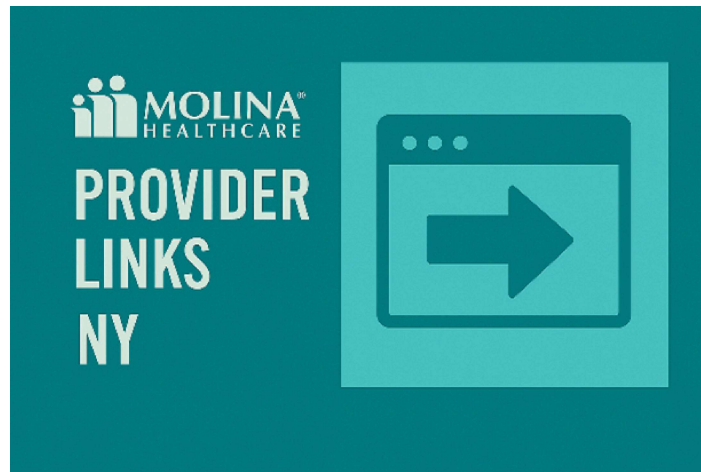
- 150+ attributed Molina members
- Must submit a monthly Supplemental Data Submission (SDS)
- Must have 10 or more in the denominator of the designated measure to earn credit
- Must hit the 90th target benchmark to earn credit

****If your practice is interested in learning more about either of these Provider Incentive Programs, please email Quality@elmandoakhealth.com.**



Quick Links. Clear Guidance. Better Care

- To review how to manage claims click here: [Managing claims](#)
- Availity Appeals and Reconsideration changes: [Availity Appeals and Reconsideration changes](#)
 - Submit and track your appeals on Availity Essentials: [Submit and track your appeals on Availity Essentials](#)
 - The Provider Manual is customarily updated annually but may be updated more frequently as needed. Providers can access the most current Provider Manual at: [Provider Manual](#)
 - Molina Provider Q1 2026 Newsletter: [Provider Newsletter](#)



Welcome to Molina
Healthcare - Affinity by Molina
Healthcare

Providers can access the Availity Essentials portal at
MolinaHealthcare.com or click : [Molina Healthcare | Availity](#).

Once in the Availity Portal office staff can search:

- Search for patients and check member eligibility.
 - Submit service request authorizations and/or claims and check status.
 - Review patient care plans.
 - Obtain CAHPS tip sheets.
 - Participate in online cultural competency training.
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“Because Access Is the First Step to Better Care.”

New York State routinely completes surveillance activities to evaluate compliance with the following appointment availability standards, (Medicaid Model Contract 15.2, Appointment Availability Standards):

Molina maintains access to care standards and processes for ongoing monitoring of access to health care (including behavioral health care) provided by contracted primary PCPs (adult and pediatric) and participating specialists (to include OB/Gyn, behavioral health Providers, and high volume and high impact specialists). Providers are expected to adhere to the Access to Care appointment standards outlined below to ensure that health care services are delivered promptly.

These standards require 100% availability for Emergency Services and at least 75% availability for all other services. The primary care provider, or their designated representative, must be accessible to Members 24 hours a day, seven days a week.

Access And Availability Standards Reminder Grid

Appointment Access

All Providers who oversee the Member’s health care are responsible for providing the following appointments to Molina Members in the timeframes noted:

Additional information on appointment access standards is available from your local Molina Quality Department toll free at (877) 872-4716.

Office Wait Time

For scheduled appointments, the wait time in offices should not exceed sixty (60) minutes. All PCPs are required to monitor waiting times and adhere to this standard.

After Hours

All Providers must have back-up (on call) coverage after hours or during the Provider's absence or unavailability. Molina requires Providers to maintain a twenty-four (24) hour phone service, seven (7) days a week. This access may be through an answering service or a recorded message after office hours.

For PCPs and OB/GYNs, if a recorded message is used, it must provide an option to direct the Member to a live person. The service or recorded message should instruct Members with an Emergency to hang-up and call 911 or go immediately to the nearest emergency room.

Please visit the Provider Manual for additional information on access and availability: [Molina Provider Manual](#)

Type of Care Request	Standard Timeframe
Primary Care Provider (PCP) or Prenatal Care	
Emergency Care	Immediately
Urgent Care	Within 24 hours
After Hours Care	24 hours/day; 7 day/week availability
Routine Symptomatic Care	Within 48 to 72 hrs of request
Routine Asymptomatic Care	Within 28 calendar days
Follow-up discharge	Within (7) days of discharge
Well Child Care	Within 4 weeks of request
Specialty Care Provider	
Urgent Care - High Impact	Within 24 hours
Routine Care - High Impact	Within 42 calendar days
Specialist Referral (non-urgent)	Within 4 to 6 weeks of request
Prenatal - First Trimester	Within 21 calendar days
Prenatal - Second Trimester	Within 14 calendar days
Third Trimester	Within 7 calendar days
Initial Family Planning Visit	Within 2 weeks of request
Behavioral Health	
Life Threatening Emergency	Immediately
Non-life threatening emergency care	Within 6 hours
Urgent care	Within 24 hours
Initial Routine care Visit	Within 10 business days
Follow-up Routine Care Visit	Within 5 calendar days
Appointment Wait Times	
Wait Time	Less than 1 hour



“Cultural Competency: Essential to Quality Care.”

Reminder : Culturally and Linguistically Appropriate Services (CLAS) training is required to be completed annually.

Elm and Oak formally known as, Monroe Plan for Medical Care, IPA along with Molina Healthcare, Inc., expects providers to deliver services that affirm and respect individuals of all backgrounds and abilities, safeguarding their dignity. Employee and provider training, along with quality monitoring, support this commitment. Accordingly, Molina includes Culturally and Linguistically Appropriate Services (CLAS) training in its programs and regularly offers related education to providers and staff.

These trainings can be viewed by logging onto the Availity Portal, choose the Payor Molina Healthcare-Affinity By Molina Healthcare , then select the Resources Tab at the top of the section, and finally scroll down to view the Culturally and Linguistically Appropriate Trainings. Once the trainings have been completed an attestation form can be submitted through the portal.

Culturally and Linguistically Appropriate Services: Training for health care providers and staff include:

- **Module 1: Introduction to Culturally and Linguistically Appropriate Services**
- **Module 2: Health Outcomes**
- **Module 3: Seniors and Persons with Disabilities**
- **Module 4: LGBTQ and Immigrants/ Refugees (optional)**

- **Module 5: Providing Culturally and Linguistically Appropriate Services**
- **Provider Training Attestation Form (All Other State Providers)**

Other Cultural Competency Provider Training Resources and Links:

- **Cultural Competency Provider Training**
- **Better Communication, Better Care**
- **Guidance & Resource Materials | ADA.gov**
- **The Arc of the United States | Disability Rights, Advocacy & Inclusion**
- **Virginia Commonwealth University/Center on Society and Health**
- **Robert Wood Johnson Foundation**

Providers and appropriate staff should complete this training in the next 12 months and annually thereafter.



Elm & Oak Health Rebranding -Frequently Asked Questions

1. What's changing?

We are updating our company name and brand. This update is designed to better reflect who we are today and the full range of work we do, both now and in the future. While the name and look will be new, our mission, values, and commitment to those we serve remain unchanged.

2. When will the new name take effect?

The new name will officially take effect on March 9, 2026.

3. How does this impact my organization?

The rebranding of Monroe Plan for Medical Care will not impact the Monroe Plan for Medical Care and YourCare IPA contracts that are currently in place.

There will also be no changes in current administrative policies or procedures for the provider network in servicing Molina patients enrolled in Medicaid Managed

Care, HARP, Essential Plan, or Child Health Plus..

4. Who should I contact if I have any questions?

Please send any questions to pfmemails@elmandoak.com

5. I sent provider enrollments to pfmemails@monroeplan.com will I have to resend these applications?

No, these emails have been secured and are being processed as usual.

Unlock key insights in the Elm and Oak Health Provider Guide: Stay Informed-Don't miss out

Click on this link to learn more: [Provider-Orientation-Guide](#). If you have any questions, please reach out to:

pfmemails@elmandoakhealth.com or providerrelations@elmandoakhealth.com



Provider Data Validation

Kindly ensure your data is up to date by submitting the necessary documentation to update your practice's information to pfmemails@elmandoakhealth.com.

These changes include:

- Change in office location(s)/address, office hours, phone, fax or email.
- Addition or closure of office location(s).
- Addition of a provider (within an existing clinic/practice).

- Change in provider or practice name, Tax ID and/or NPI.
- Opening or closing your practice to new patients (PCPs only).
- Change in specialty.
- Change in billing address.
- Any other information that may impact member access to care.



Tools to Help You Deliver Better Care

Stay organized and informed with quick access to quality programs, forms, training, and more. Access the latest enrollment forms, care coordination documents, and compliance information and more.

Click the link and scroll down to find the appropriate forms : [Elm and Oak Health IPA](#)

You will have the option to download a PDF version of the form and email the form to pfmemails@elmandoakhealth.com.

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