

NETWORK NEWS

A Quarterly Brief for Providers
SPRING 2026 EDITION



PLAN: 2026 Strategic Vision & Performance Kickoff

- **A Message from Grayling Yarbrough, Senior Director**

As we enter the new year, the Value-Based Care Team is focused on two defining priorities: **rejuvenation and value**.

We are rejuvenating our people—investing in the talent, expertise, and energy of our team members who are deeply committed to advancing value-based care. We are rejuvenating our infrastructure by strengthening the tools we use, refining our governance structures, and enhancing the ways we collaborate with you to move this work forward. And most importantly, we are recommitting to delivering value—to you, our physicians, and providers.

Through revitalized educational programs, expanded support services, and more effective tools for your practice, we aim to ensure that the value you experience through Memorial Health Network, Broward Guardian ACO, and our contract performance is clear, meaningful, and impactful.

This work demands bold leadership, strategic focus, and high energy. By staying aligned around our shared mission, we will elevate patient outcomes, strengthen the long-term sustainability of our networks, and create lasting value for the communities we serve. Together, we will continue to deliver exceptional, value-based care—and I am confident in the meaningful progress we will achieve in the year ahead in service to our community.

- **Rate Increase**

In our effort to better serve our provider community, Memorial Health Network is increasing reimbursement rates for OB deliveries and vaccines for Memorial Employee Health Plan patients only, effective April 1, 2026. This is a first step toward a more supportive and transparent partnership. Affected practices will receive a separate communication with specific details soon.



PREVENT: Clinical Awareness & Early Intervention

- **Q2 Health Awareness Calendar**

Align your clinical outreach with the following monthly initiatives for high performance throughout the year:

- **April | Kidney Awareness & Coding:** With the introduction of the new Kidney Health Evaluation metrics, use this month to ensure all diabetic patients receive both an eGFR and the necessary urine albumin-creatinine ratio (uACR) tests.

- **Preventative Medicine Evaluation Visits**

Prioritizing annual well-care visits early in the year optimizes your 2026 performance. This comprehensive touchpoint enables the early capture of HEDIS-aligned metrics—such as cancer screenings and diabetic eye/kidney exams—while ensuring accurate HCC risk adjustment. Executing these visits early provides the necessary lead time for secondary interventions and stabilizes performance scores well before the Q4 surge. (**Be sure to confirm the allowable scheduling timeframe with each insurance plan in advance to avoid any overlap.)

- **Maximize Your Practice Performance**

Deliver a positive patient experience and achieve value-based care success by staying informed. [CLICK HERE](#) to review the 2026 Fact Sheet, your guide to navigating performance metrics and closing care gaps to meet this year's quality goals.

- **New Metrics**

Kidney health evaluations, along with updated HEDIS-aligned targets for cancer screenings and diabetes management. Please become familiar with these new changes.



SYNC: Data Cycles & Practice Maintenance

Please be advised that there is a report cadence pause in Q1 while the 2025 data is finalized. Final 2025 performance reports are tentatively scheduled for release during the first week of May.

- **Communication Survey**

Ensure that outreach meets your needs. Please complete the survey and share your feedback on how the network communicates with you. You will be receiving the survey via email in the coming weeks.

- **Credentialing Updates**

- **CAQH Profiles:** Must be re-attested every 120 days. Ensure all medical licenses, DEA certifications, and current proof of insurance are uploaded. Please note that Oscar flags incomplete or outdated CAQH profiles, which may result in a change to your participation status. [CLICK HERE](#) to review your CAQH profile.
- **PECOS:** Active enrollment is mandatory for network participation. Per CMS guidelines, if you are not registered in PECOS, Medicare claims and referrals will be denied. Ensure your Legal Business Name matches exactly across NPPES and PECOS to avoid payment disruptions. [CLICK HERE](#) to review your current enrollment and confirm all information is up to date.

- **New MHN Dues Portal**

- Dues for 2025 are still being reconciled. If you haven't submitted your payment, please do so as soon as possible.
- The new secure online portal accepts payment via ACH (bank transfer) and credit card. Please send an email to mhn@mhs.net to receive your detailed instructions. If you have any questions regarding dues, contact Jackie Latour at JaLatour@mhs.net.
- Invoices for 2026 have not yet been issued.

- **Update Your Status**

Is your practice accepting new patients? Ensure that your practice's status is accurately represented throughout all network and payer directories. Use the new checkbox feature to quickly update practice details. [CLICK HERE](#) to verify your information.

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