



Overview of Contra Costa Health Plan for Long Term Care Providers

A Division of Contra Costa Health Services

A Culture of Caring for over 40 years

www.cchealth.org/healthplan

Chief Executive Officer **Sharron Mackey, M.P.A, M.H.S**



Contra Costa Health Plan's vision is member centric:

- Keep members as healthy as possible
- Facilitate relationship between providers and members/family
- Assure an integrated system of timely and quality services for both in-patient and outpatient services while managing the cost



Healthcare System Relationships

Health Plan

Providers

Members

Objectives

- Provide an overview of changes to Long Term Care for Medi-Cal Members
- Contracting and Credentialing
- Checking for Member Eligibility
- Utilization Management
- Referrals and authorization requests
- Pharmacy Coverage
- Claim Submission
- CCHP Contacts

Contracting and Credentialing

- All Facilities and Providers must be enrolled as a Medi-Cal Provider.
- CCHP only contracts with LTC Facilities enrolled and licensed by the California Department of Public Health (CDPH).
- Facilities are required to be credentialed with CCHP and recertified every three years.

Changes Effective February 1, 2023

Medi-Cal Members

- Medi-Cal Members-Skilled Levels of Care are no longer applicable
- Reimbursement for Skilled services-Reimburse the AB1629 facility-based rate plus one hundred and twenty-five dollars (\$125.00)
- Medi-Cal Provider Manual: Facility Reimbursement – Miscellaneous Inclusive and Exclusive Items out services (<https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/ratefacilmisc.pdf>).
Think of this as ITEMIZED BILLING instead of a Level of Care
- Custodial Care -Reimburse the AB1629 facility-based rate.
- Authorized Physical Therapy, Speech Therapy and Occupational Therapy provided by a licensed clinician reimbursed separately at Medicare Maximum Allowances billed directly to CCHP.
- Pharmacy-Prescription drugs are dispensed by a pharmacy and billed on a pharmacy claim are carved out and paid by Medi-Cal Rx. Drugs provided by the SNF and billed on a medical or institutional claim are paid by CCHP.

Bed Hold and Leave of Absence

- Bed holds are required for all members at a custodial level of care who are transferred from a SNF to a general acute care hospital, and then return to a SNF level of care due to medical necessity.
- This will allow the member to return to the same SNF where they previously resided under the leave of absence and bed hold policies.
- The facility is required to notify CCHP of the acute care admission and when the member returns to the SNF.
- The facility is responsible for notifying the member, or the member's authorized representative, in writing of the right to exercise the bed hold provision.

Changes Effective February 1, 2023

Commercial Members

- Skilled Services-Level of Care applies
- Reimbursement remains unchanged.

Utilization Management



- Referrals for SNF's are authorized by the UM Department
- Provide authorizations for Long Term Acute Care, Skilled Nursing Facilities (both skilled and custodial) and other prior authorization requests:
 - Urgent referrals may take up to 72 hours
 - Routine referrals may take up to 5 business days
- Request PA via the Provider Portal
 - Request skilled vs custodial bed
 - For skilled, request any skilled services
 - For all, request any items carved out of per diem rate (see Medi-Cal Provider Manual: Facility Reimbursement – Miscellaneous Inclusive and Exclusive Items out services (<https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/ratefacilmisc.pdf>)).

Utilization Management Phone: (877) 800-7423, Option 3

E-mail: CCHPauthorizations@cchealth.org or for Dual Authorizations cchp-ltc-authorization@cchealth.org

Utilization Management

- If additional services are needed, please request via the provider portal
- For authorized Skilled Patients, CCHP will conduct weekly concurrent review
- For authorized custodial patients, CCHP will conduct monthly concurrent review (subject to change after further experience)

How do I check member eligibility?

Prior to providing services, check eligibility by either:

- Using the online **ccLink Provider Portal**
If you do not have access to the ccLink Provider Portal, please download the ccLink Provider Portal Agreement form here: [ccLink Provider Portal Information](#)
- Calling the automated eligibility line at:



1-877-800-7423

Option 1

The ccLink Provider Portal provides:

- ***On-line access to CCHP Member information***
- ***Real-time eligibility inquiries***
- ***Ability to submit and check the status of any required referral***
- ***Ability to check the status of a submitted claim***
- ***A list of patients that are assigned to you if you are the member's PCP or if you are the referred to specialist***
- ***Facilitation of communication & streamlines patient care across location and disciplines***
- ***Decreased repetitive calls to Health Plan***

What about Medi-Cal Member pharmacy coverage?

- How Pharmacies Submit Prescriptions
 - Medi-Cal Rx
 - Processing through Magellan
 - Formulary (Contracted Drug List) available on the Medi-Cal Rx website
 - Large network of pharmacies throughout California including Walgreens, Rite Aid, CVS and Walmart (network available on the Medi-Cal Rx website)

If experiencing problems, please call the CCHP Pharmacy Department at (925) 957-7260, option 1

To reach the DHCS Medi-Cal Rx Customer Service Department call (800) 977-2273 or go to <https://medi-calrx.dhcs.ca.gov/home/>

Billing and Claims

- Claims must be submitted electronically on a UB-04
- Medi-Cal has issued the code sets to be used on the UB-04 claim form for each accommodation code and its related revenue codes, see link below:

[LTC Code and Claim Form Conversion: LTC Accommodation Code to Revenue Code, Value Code and Value Code Amount Crosswalk](#)

- Custodial care billed with Rev Code 0120.
- Excludables - Billed as a line item.
- Medicare Share of Cost-Collect from Member first, remainder bill to CCHP.
- Submit claims for all authorized CPT codes
- All Claims must be submitted within 180 days from the date of service.
- Contact for Claim questions or issues- Claimstatus@cchealth.org

Electronic Submissions

ccLink Provider Portal:

To request access to the online ccLink Provider Portal, please submit a completed ccLink Provider Agreement by downloading the Agreement here: <https://cchealth.org/healthplan/providers/>

- Submit the completed Agreement via email to CCHPportalsupport@cchealth.org.
- Once a complete Agreement is submitted access will be granted within 3-4 weeks.

Other documents that should be sent via the ccLink Provider Portal include:

- Appeals (submit within 365 days from payment or denial—resolved within 45 business days): ccLink Instructions on the Appeal or Dispute Entry Process
- Referrals: ccLink Instructions on the Referral Entry Process
- Claims (if not sending through a clearinghouse): ccLink Instructions on Claim Data Entry of UB04, CMS1500, attaching documents, and Tips
- Clinical Notes
- Hospital Admission or Observation Notifications via Face sheet

Once you've submitted a complete request you should be granted access within 3-4 weeks. If you have any questions, please email the ccLink Portal Support team at CCHPportalsupport@cchealth.org.

Electronic Fund Transfer (EFT)

For faster reimbursement, we encourage all providers to sign up for Electronic Funds Transfer (EFT) (electronic payments to providers). Please send an e-mail EDIsupport@cchealth.org or call 925-313-7103 to initiate the request.

Electronic Claims Submission:

To inquire about electronic claim submission, please contact the Analysis & Reporting Department: Phone 925-313-7103 or e-mail EDIsupport@cchealth.org.

Contra Costa Health Plan (CCHP) uses Availity as our clearinghouse. You must register with Availity in order to submit EDI claims to CCHP. You may begin your registration process here. The CCHP payer ID is CCHS.

Additional Claims information can be found here: <https://cchealth.org/healthplan/providers/claims.php>

Provider Manual: <https://cchealth.org/healthplan/providers/manual.php>

Provider Directory: <https://cchealth.org/healthplan/provider-directory.php>

CCHP Departments: <https://cchealth.org/healthplan/provider-contact.php>

Medi-Cal Long Term Care Carve-In: Information

Name	Title	E-Mail
Dennis Hsieh, MD, JD	Chief Medical Officer	Dennis.Hsieh@cchealth.org
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CCHP Contracts		cchpcontracts@cchealth.org
Auth-UM Department	CCHP SNF	CCHPSNF-Auth@cchealth.org
	Escalation	Auth-UMSupport@cchealth.org

Contact Us

We are here to help! Below is the contact information of the various CCHP departments who can help answer your questions. Email and usage of our [ccLink Provider Portal](#) is the preferred method of communicating with CCHP staff. It is our goal as a health plan to embrace and leverage technology. We are requesting that providers send us a quick email when you have a question. We will respond within 1 to 3 business day, as opposed to having your staff call and wait on the lines. By sending us written questions it can also help us develop educational tools such as Frequently Asked Questions.

**Please note that our response time may be delayed if we experience a high number of requests or inquiries.*

Authorization Department / Hospital Transition Nurse

- Phone: (877) 800-7423, option 3

Medi-Cal Member Authorization eFax Numbers:

- Inpatient (Hospital)/Face Sheet (out of network hospitals only): Fax: (925) 313-6645
- Mental Health: Fax: (925) 313-6196

Commercial Member Authorization eFax Numbers:

- Confidential Mental Health: Fax: (925) 313-6196
- Email Auth Questions (**do not email auth requests**): CCHPauthorizations@cchealth.org

Claims Department

- Phone: (877) 800-7423, option 5
- Email Claims Questions: ClaimStatus@cchealth.org
- Email Claim Disputes: ProviderDispute@cchealth.org
- Email Electronic Claims/Payments (EDI program) EDIsupport@cchealth.org

Appeal, Grievance, and Dispute Department

- Email Appeals Questions: Appeals@cchealth.org

Facility Site Review Department

- Email: CCHPfsr@cchealth.org

Contact Us *(continued)*

ccLink Provider Portal

- ccLink Portal Application: <https://cchealth.org/healthplan/providers/>
- Email ccLink Application and Questions: CCHPportalsupport@cchealth.org
- IT Support to reset password or access issues: (925) 957-7272

Interpreter Services

- Phone: (877) 800-7423, option 4

Member Eligibility and Primary Care Physician Assignment

- Phone: (877) 800-7423, option 1

Member Services Department (calling on behalf of a member that is with you)

- Phone: (877) 800-7423, option 7

Pharmacy Department

- Phone: (877) 800-7423, option 2

Provider Relations Department

- Phone: (877) 800-7423, option 6
- Fax: Fax: (925) 646-9907
- Email General Questions: ProviderRelations@cchealth.org
- Email Contract Related Questions: CCHPcontracts@cchealth.org
- Email Credentialing Related Questions: CCHPcredentialing@cchealth.org

Additional resources can be found on the CCHP website:

www.cchealth.org/healthplan