CONTRA COSTA HEALTH PLAN
A Division of Contra Costa Health Services

Community Provider Network
CARE MATTERS

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The Contra Costa Health Plan Provider Bulletin

HEDIS 2010

The Health Plan's reporting of quality of care indicators called HEDIS (Healthcare Effectiveness Data and Information Set) measures is required by Medi-Cal and other payers. These measures allow the Health Plan, the public and other stakeholders to assess the quality of care provided by the Health Plan.

This year, CCHP had no measures below the State's Minimum Performance Level (California 25th percentile). Of the sixteen measures with statewide benchmark data available, we exceeded the mean on eleven of them. We scored above the 90th percentile on one measure.

The table below summarizes the data and stratifies it by provider network. The complete report can be viewed at http://www.cchealth.org/health_plan/provider_relations.php.

CCHP Medi-Cal Population	2008 CCHP	2009 CCHP	2010 CCHP	2010 CCRMC	2010 CPN	2010 Kaiser	2010 Medi-Cal Mean
BMI %ile documented for children			18.49%*	11.62%*	20.74%*	57.14%	56.8%
Nutrition counseling given for children			49.15%	52.70%	40.00%	60%	63.6%
Physical activity counseling for children			38.44%	39.42%	32.59%	54.29%	47.9%
Yearly well child visit 3-6 yr.	66.46%	77.37%	74.70%	76.61%	75.83%	60.47%	76.2%
Yearly adolescent well visits	80%	47.45%	38.69%	36.40%	37.86%	46.25%	45.1%
Combo 3 immunizations	81.00%	82.48%	77.13%	86.72%	52.1%*	78.43%	74.5%
No antibiotics for URI in children	91.95%	93.64%	92.76%	94.98%	88.01%	97.70%	87.1%
First trimester prenatal	80.25%	83.45%	84.67%	86.89%	80.28%	80.56%	83.9%
Postpartum visit 26-51 days	61.48%	68.13%	68.13%	71.91%	61.97%	59.72%	60.6%
No imaging for lower back pain		87.02%	87.14%	86.71%	87.04%	91.67%	80.4%
Breast cancer screening	47.60%	43.68%	56.19%	52.24%	47.06%	76.07%	54.0%
Cervical cancer screening	69.70%	67.88%	69.34%	67.19%	61.64%	82.35%	69.5%
Diabetes Eye Exam 2 yrs.	53%	53.47%	48.54%	56.01%	46.46%	26.85%	54.4%
Diabetes screening LDL-C	77.90%	79.38%	78.65%	77.42%	74.75%	86.11%	79.3%
Diabetes LDL <100	42.10%	42.20%	40.69%	39.30%	26.26%	58.33%	37.9%
Diabetes HbA1c testing	82%	83.03%	85.40%	84.75%	84.85%	87.96%	82.8%
Diabetes HbA1c(>9%) (lower is better)	38%	42.15%	31.75%	25.51%	71.72%	14.81%	37.4%
Diabetes HbA1c (<8%)		49.09%	52.55%	52.20%	44.44%	60.19%	49.4%
Diabetes Nephropathy screen or treatment	81.20%	82.30%	86.50%	85.92%	85.86%	88.89%	81.1%
Diabetes BP <140/90		56.20%	53.10%	49.56%	58.59%	58.33%	63.9%
Avoidance of antibiotics in adults with acute bronchitis	37.50%	32.50%	31.87%	32.32%	30.67%	37.50%	29.1%

* data problems make this number unreliable

PCP Member Panel Lists

New and Improved - Contra Costa Health Plan (CCHP) is pleased to announce that we have upgraded the member panel lists that have previously been faxed to you on a bi-weekly basis. We are now faxing them to your office on a weekly basis. Please be aware that for your Medi-Cal patients we will not be able to fax eligibility on the last day and the first day of the month, on those days you will need to call the 24 hour automated eligibility phone number listed below.

In addition, we have expanded these lists to include co-payment amounts. You should be able to rely on these lists for verification of eligibility. If the CCHP member has an appointment and is not assigned to your panel, instruct the member to call member services and request a PCP Change in advance of the appointment. The number for member services is on the back of the member identification card.

Verification eligibility is also available on our 24 hour automated eligibility line at 1 (877) 800-7423 option 1.

New Eligibility Verification Procedure

Due to heavy call volume to our Member Services Unit and the extremely long waiting time on the phone for both members and providers, we will no longer be able to verify provider's requests for eligibility or co-pay information by phone. We have developed a new procedure to better serve you and our members. Since Monday November 15, 2010, we are requesting that you use the 24 hour automated eligibility line at 1 (877) 661-6230 option 1. As of January 1, 2011, by entering a valid NPI number, you will be able to obtain the following information from the eligibility line; CCHP ID#, Assigned PCP, Network, Co-pay amounts, CIN number.

In addition, we developed an alternate method to verify eligibility. Providers can now fax eligibility requests to CCHP the day prior to the patient's appointment. CCHP will fax back verification of eligibility and co-pay amounts within 24 hours. Please use the Verification of Eligibility form and include provider name and fax number. Requests can be faxed to **(925) 313-6614**.

Because we recognize the desire for instant information, CCHP is also exploring a web portal for providers to use for eligibility verification. You will be notified as soon as this system is operational. Please inform all office staff. If you have any questions, please contact Provider Relations by e-mail to ProviderRelations@hsd.cccounty.us.

Inside this issue:

Pharmacy and Therapeutics Update

The Pharmacy and Therapeutics committee at CCHP reviewed the efficacy, safety, cost and/or utilization of the following therapeutic categories/medications at the December 3rd, 2010 meeting. The changes are expected to be effective the week of January 20th, 2011.

➢ Gastrointestinal Salicylates	➢Thiazolidinediones	➢Apidra (Insulin)
➢Gastrointestinal Salicylates	➢Urinary Antispasmodics	➢Low Dose Seroquel

The committee approved ***addition*** of the following to the Preferred Drug List (formulary):

- Apridra (insulin glulisine) will be added to the formulary as our **preferred first line rapid acting insulin**. Patients currently on Novolog (insulin aspart) or Humalog (insulin lispro) will be grandfathered and allowed to stay on these agents. Any new starts will need to use Apidra.

The committee approved ***deletion*** of the following to the Preferred Drug List (formulary):

- The previous P&T decision to have Actos® (**pioglitazone**) and Avandia®(**rositglitazone**) become PA (removing the step therapy that allowed them to process as formulary) was brought back to the committee for review. The committee reviewed data showing the **comparable efficacy** of Januvia compared to TZDs. All patients currently on Actos and Avandia will need to be **transitioned** to Januvia® (sitagliptin) or Janumet® (sitagliptin/metformin) by March 1st 2011.

The following were reviewed and ***prior authorization criteria*** approved or updated (remain non-formulary):

- Apidra. Criteria updated to **require all new** starts to rapid acting insulin use Apidra. Patients currently on Humalog and Novolog will be allowed to continue on these agents.

SelectCare News

SelectCare is a Medicare Advantage Special Needs Plan offered by Contra Costa Health Plan. It is designed for Medicare beneficiaries who are also enrolled in the California Medi-Cal program. More information about ***SelectCare*** can be found at http://www.cchealth.org/health_plan/selectcare/. The complete ***SelectCare*** formulary can be found at http://selectcare.performrx.com/.

No negative formulary changes have occurred to the ***SelectCare*** formulary thru December 2010.

CCHP Seasonal Flu Vaccine Matrix 2010-2011

CCHP Medi-Cal Members	Healthy Families Program	Commercial Members	Medicare Members SelectCare SeniorHealth
CHDP Code on PM 160 Ages: 6 months to 18 years 53 Flu Vaccine 71 Flu Mist Vaccine Plan Payment $9.45	Preservative Free Vaccine Ages: 6 months to 35 months CPT code 90655 $20.58 90465 $ 4.91 Plan payment $25.49	Preservative Free Vaccine Ages: 6 months to 35 months CPT code 90655 $22.45 90465 $ 5.35 Plan payment $27.80	Preservative Free Vaccine 90656 $18.20 G0008 $27.43 Plan payment $43.67
CHDP-Privately Purchased Ages: 6 months to 20 years CHDP code 54 on PM 160 Plan payment $ 13.76	Preservative Free Vaccine Ages: over age 3 90656 $34.61 90471 $ 4.91 Plan payment $39.52	Preservative Free Vaccine Ages: over age 3 90656 $37.76 90471 $ 5.35 Plan payment $43.11	Regular Flu Vaccine 90658 $13.22 G0008 $ 27.43 Plan payment $38.69
For more information on the VFC program, please call (877) 243-8832	Regular Flu Vaccine Ages: 6 months to 35 months 90657 $15.14 90465 $ 4.91 Plan payment $20.05	Regular Flu Vaccine Ages: 6 months to 35 months 90657 $16.51 90465 $ 5.35 Plan payment $21.86	Nasal Vaccine Ages: to age 50 90660 $26.72 G0008 $27.43 Plan Payment $52.19
Privately Purchased Vaccine Must bill on CMS 1500	Regular Flu Vaccine Ages: over age 3 90658 $15.14 90471 $ 4.91 Plan payment $20.05	Regular Flu Vaccine Ages: over age 3 90658 $16.51 90471 $ 5.35 Plan payment $21.86	
Preservative Free Vaccine Ages: 21 and over 90656 $33.03 90471 $ 4.46 Plan payment $37.49	Nasal Vaccine Ages: to age 8 90660 $24.50 90467 $4.91 Plan payment $29.41	Nasal Vaccine Ages: to age 8 90660 $26.72 90467 $ 5.35 Plan payment $32.07	
Regular Flu Vaccine Ages: 21 and over 90658 $14.42 90471 $ 4.46 Plan payment $18.88	Nasal Vaccine Ages: 9 to 18 years 90660 $24.50 90473 $ 4.91 Plan Payment $29.41	Nasal Vaccine Ages: 9 to 50 years 90660 $26.72 90473 $ 5.35 Plan Payment $32.07	
Nasal Vaccine Ages: to age 50 90660 $23.38 90473 $ 4.46 Plan payment $27.84			
Pneumococcal Reimbursement			
Ages: 2 and above 90732 $59.52 90471 $ 4.46 Plan Payment $63.98	Ages: 2 and above 90732 $62.36 90471 $ 4.91 Plan Payment $67.27	Ages: 2 and above 90732 $68.03 90471 $ 5.35 Plan Payment $73.38	Ages: 2 and above 90732 $32.70 G0008 $27.43 Plan Payment $58.17

Revision Date: 10/28/2010 Provider Relations Department.

New Credentialing Process

Contra Costa Health Plan has contracted with VerifPoint/Credentialing Solutions to provide continual credentialing and recredentialing verification services for CCHP's provider network. These activities will further qualify and distinguish all CCHP's Providers with regard to meeting the comprehensive quality assurance standards established by NCQA (National Committee for Quality Assurance) and URAC (Utilization Review Accreditation Commission).

NCQA and URAC mandated regulations require a specific healthcare practitioner credentialing process. These regulations dictate that ALL provider credentialing documents must be received and verified within 120 days

CCHP's goal in retaining this service is to improve the processing time of credentialing and recredentialing providers. To facilitate the credentialing process for CCHP, we ask, when requested by Verifpoint, you comply by completing **ALL** forms and return them together with a **CLEAR** copy of the requested documents to VerifPoint/Credentialing Solutions' office. Thank you in advance for your cooperation and understanding. Should you have any questions, please contact Provider Relations at (925) 313-9500 or by e-mail to ProviderRelations@hsd.cccounty.us.

Medicare Payment Alert for DME Products

After January 1, 2011, it is mandatory for physicians enrolled in the Medicare program and are ordering DME products to obtain a PECOS number if the physician wants to continue to prescribe DME for their patients and have Medicare remit payment. Physicians do not have to enroll into PECOS, but DME providers will not receive payment if they bill Medicare with a non PECOS physician NPI as the referring physician. You and your patients with Medicare will receive a denial for the DME. This affects members in our Senior Health Program as well as dually eligible Medi-Cal members with FFS Medicare.

If you have not updated your enrollment application (completing Internet-based PECOS or the CMS-8551) since 2003, and plan on ordering DME services or items, you are **required** to submit a Medicare enrollment application. Those with questions concerning the enrollment process should contact their designated Medicare contractor/local carrier in advance of submitting the CMS-8551. For additional information regarding the Medicare enrollment process, including Internet-based PECOS, go to http://www.cms.hhs.gov/MedicareProviderSupEnroll on the CMS Web site.

Contra Costa Health Plan wishes to thank all of our Providers for their continued support.

FREE Telephone Interpreter Services for CCHP Members 24/7

I recently heard a true story that occurred in one of our clinics. A concerned Spanish-speaking parent took their child to see one of our pediatricians for an ear infection. The parent spoke little English and she thought that she could get by without an interpreter. The young child was miserable, the doctor prescribed antibiotics, which came in a liquid form with a dropper. The parent misunderstood the instructions given to her in English and put the liquid antibiotics in the ear for several days. You can only imagine what happened. The infection got worse and the child was in the emergency room a week later. As a parent it is painful to hear this story. This incident could have been avoided if an interpreter was used. Please use the resources we have available to avoid any unintended harm to your patients.

Any questions please contact Otilia Tiutin, CCHP's Manager of Cultural and Linguistic Services at Otilia.Tiutin@hsd.cccounty.us.

How we can help:

If you have CCHP patients who do not speak English you can call us to help you.

Interpreter services for CCHP members:
The criteria to utilize CCHP Telephone Interpreter Services is:

- Be a contracted CCHP provider
- Be requesting interpreter services for a CCHP member

After meeting these criteria, **call 1 (877) 800-7423 Press 4**. You will be connected to the **Advice Nurse** who will connect you to an interpreter.

Federal and State Guidelines:

- By law, we must ensure that members of our health plans have access to interpreter services if they do not speak English.
- Interpreter services must be available on a 24-hour basis for medical encounters.
- If the medical staff or providers do not speak the member's language, the health plan and provider cannot require or suggest to a member to provide their own interpreters.

You must inform the member of the right to free interpreter services. However, we discourage the use of family and friends. If they insist that they want to bring their own interpreter, you must document it in the patient's chart. Do not allow children under 18 to interpret under any circumstance.

We provide flyers you can post in your office which state: **Point to your language! We will get you an interpreter.**

To print a copy go to our website at: http://cchealth.org/health_plan/provider_interpretation.php

The Bulletin Board

Mark your Calendar for Our Next PCP Community Provider Network Meeting

We encourage and appreciate your participation!

West County January 18, 2011
Doctors Medical Center
2000 Vale Road
Administrative Conference Room, 1st Floor
San Pablo, CA 94806
7:30 - 9:00 AM

Central/East County January 25, 2011
1350 Arnold Drive, Conf Room #103
Martinez, CA 94553
7:30 - 9:00 AM

Welcome!! New Primary Care Providers.

Huang, Harry, MD
Shenkin, Budd, MD
Bayside Medical Group

Villanueva, Lee, MD
Brookside Community Health

Veal, Ulanda, MD
Comprehensive Allergy Services

Sheldon, William, MD
Richmond Health Center

Mostaghasi, Taraneh, MD
Pediatrics

Holidays Observed by CCHP

Martin L. King Jr. Day	January 17, 2011
President's Day	February 21, 2011

Visit our CCHP Provider & Pharmacy Online Search Engine (OSE) at:
www.contracostahealthplan.org

Find available on our web site; Provider Manual, Provider Directory, and Prior Authorization Forms.

Send All Claims to:
Contra Costa Health Plan
P.O. Box 2157
San Leandro, CA 94577

Courier Claims Address:
Contra Costa Health Plan
14860 Wicks Blvd.
San Leandro, CA 94577

Claim's Electronic Filing:
Contact Docustream
(510) 264-0900

Find resources for uninsured individuals at
www.cchealth.org/insurance

Our accredited **URAC Advice Nurse Unit** is available for our member's 24 hours a day, 7 days a week including holidays. The Advice Nurse Unit can be reached by calling
1 (877) 661-6230 Press 1

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Fax (925) 646-9907
E-mail us: ProviderRelations@hsd.cccounty.us
Website: www.contracostahealthplan.org

Contra Costa Health Plan
Provider Relations - Contracts Contact Information

Terri Lieder	Provider Relations Network Manager	(925) 313-9501	Terri.Lieder@hsd.cccounty.us
Vicki Turner	Unit Administrative Assistant	(925) 313-9500	Vicki.Turner@hsd.cccounty.us
BJ Jacobs, FNP	Provider Liaison	(925) 313-9503	Beverly.Jacobs@hsd.cccounty.us
Mary Berkery, RN	Facility Site Review Manager	(925) 313-9507	Mary.Berkery@hsd.cccounty.us
Maria Perez	Credentialing Coordinator	(925) 313-9506	L.Perez@hsd.cccounty.us
Nicole Meyer	Contracts Secretary	(925) 313-9521	Nicole.Meyer@hsd.cccounty.us
Heather Wong	Credentialing/Contracts Assistant	(925) 313-9508	Heather.Wong@hsd.cccounty.us

Contra Costa Health Plan
Provider Call Center 1 (877) 800-7423

Press 1 – Member Eligibility and Primary Care Physician Assignment
Press 2 – Pharmacy Services Department
Press 3 – Authorization Department
Press 4 – Interpreter Services (Advice Nurse)
Press 5 – Claims Department
Press 6 – Provider Relations Department
Press 7 – Member Services Department