

## The Contra Costa Health Plan Provider Bulletin

### Republican Senate Bill BCRA (Better Care Reconciliation Act) By Patricia Tanquary, CEO

The Republican Senate Bill BCRA (Better Care Reconciliation Act) had a delayed vote last week in Washington D.C. but the Senate is still working on revisions to pass it.

This bill does both “repeal and replace” in very aggressive ways for both Medicaid and the Exchanges.

Specifically, there is a phase out of enhanced federal match for all Medicaid Expansion as well as a transition to a per capita cap funding model for states with Medicaid.

What would this mean for Medi-Cal in California? Currently, California **COVERS 3.8 MILLION CHILDLESS ADULTS** through the Affordable Care Act (ACA) Medicaid Expansion at nearly 100% federal funding. The phase out would begin in 2020 and return the California match of dollars to the 50% funding.

California Department of Health Care Services (DHCS) released its analysis of this loss of federal funds on June 30th. The state “would need to spend five times as much to cover these same 3.8 million covered adults at a cost of an additional **\$12.6 billion state general fund.**”

The long term funding gap from 2020-2027 DHCS reports would be **\$51.9 billion general fund.**

Additionally, the BCRA radically changes the traditional funding of all Medicaid based on children, disabled, and aged eligibility and growth. This change to the 50 year Medicaid program would transition states to a per capita cap fund for each State. This is a fixed per person allocation formula with an annual allocation formula and annual adjustment factor using the Consumer Price Index (CPI) after 2024 which does not keep pace with medical cost increases.

DHCS projects that this transition by 2027 will create a funding gap of **\$37.3 billion** from both the per capital cap and CPI change.

DHCS concludes that the seven (7) year impact of BCRA “shifts \$92.4 billion in costs from the federal government to California.” As reference – the 2017-2018 state budget has a

total of \$35 billion State General Fund for all Social Services and Medi-Cal combined.

The CBO’s (Congressional Budget Office) long-term analysis released on June 29 estimates that the per capital cap “will eventually result in states receiving 26% less in federal Medicaid funding.” This funding gap would grow to 35% by 2036.

The other component is a moratorium on **Planned Parenthood funding** by Medicaid for one year.

There are many efforts to advocate against these dire impacts of Medicaid.

- ACAP (Association for Community Affiliated Plans) issued an oppose letter to the Senate which I helped draft in Washington D.C.
- ACAP has produced a video that demonstrates that 65% of all Medicaid recipients are working as are 85% of Medicaid Expansion participants. This video was advertised on “Morning Joe” several times in Washington D.C. and several Republican states last week and this week to influence Senators that this population is also the “working poor”.
- Essential Hospitals have issued an oppose letter.
- Counties – CSAC (California State Association of Counties) have written oppose letters.
- AMA & AHA (American Medical Association and American Hospital Association) also oppose as does Kaiser.
- Several members of ACAP, LHPC (Local Health Plans of California) and I demonstrated at the Capital in opposition to the bill and in support of Planned Parenthood.

It is difficult to deal with the anxiety and fear that exists for our members (55,000 of them could lose coverage). It is also a fear for us as Health Plan employees.

All of us can be educated about the real impacts of these potential changes and discuss them with family and friends to help “tell the real story” which might influence their support or opposition as well.

# Disease Management Programs - Adult Diabetes & Pediatric Obesity

Contra Costa Health Plan has developed two disease management programs aimed at improving care for our members and providing additional support for their providers. The Programs, focused on adult diabetes and pediatric obesity, offer best practice guidelines, referrals, motivational interviewing, tracking, and education to both providers and patients/families faced with these conditions.

The programs will send patients quarterly information about their disease, which help them understand how to use both lifestyle and medical tools to address these problems. They are offered information regarding special programs, such as classes, incentives, self-help and community resources. Patients are also given access to call the Disease Management nurse directly for additional personalized self-care education.

We welcome your feedback about the programs.

Referral Guidelines:

The following patients are eligible for the program:

- ◆ Adult Diabetes—All members with type I or II diabetes ages 18-75 are eligible
- ◆ Pediatric Obesity— Children must be ages 2-11, with a BMI% greater than or equal to 95

CCRMC PCP's should refer patients to the Disease Management programs via ccLink under **CCHP Pediatric Obesity Management** or **CCHP Diabetes Management** in **Meds & Orders**.

Community PCP's can access the Disease Management Program referral form on the website provider section under "**forms and resources**" and fax to the number provided.

To learn more about the programs, contact Lourdes Jensen, RN, CDE at (925) 864-3189 or e-mail [Disease.Management@hsd.cccounty.us](mailto:Disease.Management@hsd.cccounty.us).



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## Chlamydia and Gonorrhea Screening

The USPSTF (United States Preventive Services Task Force) recommends screening for chlamydia and gonorrhea in sexually active women 24 years and younger and older women who are at increased risk for infection. Ensuring that the USPSTF Guidelines are followed is the responsibility of the primary care provider.

**Assessment of Risk:** Age is a strong predictor of risk for chlamydial and gonococcal infections, with the highest infection rates occurring in women aged 20 to 24 years, followed by females aged 15 to 19 years. Chlamydial infections are 10 times more prevalent than gonococcal infections in young adult women. Among men, infection rates are highest in those aged 20 to 24 years.

Other risk factors for infection include having a new sex partner, more than 1 sex partner, a sex partner with concurrent partners, or a sex partner who has an STI; inconsistent condom use among persons who are not in mutually monogamous relationships; previous or coexisting STI; and exchanging sex for money or drugs. Prevalence is also higher among incarcerated populations, military recruits, and patients receiving care at public STI clinics.

**Screening Tests:** *Chlamydia trachomatis* and *Neisseria gonorrhoeae* infections should be diagnosed by using nucleic acid amplification tests (NAATs) because their sensitivity and specificity are high and they are approved by the U.S. Food and Drug Administration for use on urogenital sites, including male and female urine, as well as clinician-collected endocervical, vaginal, and male urethral specimens

**Treatment and Interventions:** Chlamydial and gonococcal infections respond to treatment with antibiotics, though **Gonorrhea has progressively developed resistance to the antibiotic drugs prescribed to treat it.** Up-to-date Centers for Disease Control and Prevention guidelines for treatment of sexually transmitted diseases (STDs) and expedited partner therapy are available at <https://www.cdc.gov/std/treatment/default.htm> and [www.cdc.gov/std/ept/default.htm](http://www.cdc.gov/std/ept/default.htm) <https://www.cdc.gov/std/gonorrhea/arg/default.htm>.

## Cultural Competency Training

Effective July 1, 2017, due to new regulations under Final Rule, 42CFR 431.10, H/1/vii, the California State Department of Health Care Services (DHCS) now requires all health plans to list in their on-line and hard copy directories if a contracted provider has completed Cultural Competency training.

To meet this requirement, CCHP is offering a brief (no more than 30 minutes) training, free and easily accessible on our website. We have included an attestation at the end of the training to verify the training has been completed. Please go to [www.cchealth.org](http://www.cchealth.org) / Health Plan / For Providers / Training Resources / How to Communicate with Diverse Populations / Cultural Competency Training for Healthcare Providers. When you complete the training, please click on the **Attest** button, and then **Submit**. This sends the attestation directly to Provider Relations Credentialing Unit. Credentialing staff will review the attestation and update your listing in our database to reflect you have completed the training.

If you have already taken a similar training for another Health Plan, please send the documentation to [ProviderRelations@hsd.cccounty.us](mailto:ProviderRelations@hsd.cccounty.us), along with the name of the training and the other Health Plan's name, and we will accept it as completion of the training.

If you have any questions, please contact Provider Relations Community Liaisons at 925-313-9527.

# Member Rights and Responsibilities Annual Notice

CCHP distributes Member Rights and Responsibilities to all new members upon enrollment, existing members annually, new providers when they join the network and existing providers annually. The document is distributed by mail, fax or e-mail and is available on the CCHP website at [www.contracostahealthplan.org](http://www.contracostahealthplan.org). For those members or providers without access to a fax, e-mail or internet, the document is mailed.

## **Member rights include, but are not limited to, the following:**

- the right to receive care with respect and recognition of their dignity and their right to privacy regardless of race, religion, education, sex, cultural background, physical or mental handicaps, or financial status.
- the right to receive appropriate accessible culturally sensitive medical services.
- the right to choose a Primary Care Physician in Contra Costa Health Plan's network who has the responsibility to provide, coordinate and supervise care.
- the right to be seen for appointments within a reasonable period of time.
- the right to participate in health care decisions with practitioners including the right to refuse treatment, to the extent permitted by law.
- the right to receive courteous response to all questions from Contra Costa Health Plan and its Health Partners.
- the right to voice complaints or appeals about Contra Costa Health Plan or the care it provides orally or in writing; and to disenroll.
- the right to health plan information which includes, but is not limited to; benefits and exclusions, after hours and emergency care, referrals to specialty providers and services, procedures regarding choosing and changing providers; types of changes in services and member rights and responsibilities.
- Medi-Cal recipients have the right to seek family planning services outside the network without a referral if the member elects to do so.
- the right to formulate advanced directives.
- the right to confidentiality concerning medical care.
- the right to be advised as to the reason for the presence of any individual while care is being provided.
- the right to access personal medical record.
- the right to have access to emergency services outside of the Plan's provider network.
- Medi-Cal recipients have the right to request a fair hearing.
- the right to interpreter services.
- the right to access Federally Qualified Health Centers and Indian Health Services Facilities.
- the right to access minor consent services.
- the right to receive written Member informing materials in alternative formats, including Braille, large size print and audio format upon request.
- the right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.
- the right to receive information on available treatment options and alternatives, presented in a manner appropriate to the Member's condition and ability to understand.
- the right to freely exercise these rights without adversely affecting how the Member is treated by the health plan, providers or the state.
- the right to candid discussion of appropriate or medically necessary treatment options, regardless of cost or benefit coverage.

# Member Rights and Responsibilities Annual Notice

## Member responsibilities include, but are not limited to:

- the right to make recommendations regarding Contra Costa Health Plan's Member's Rights and Responsibility policy.
- the responsibility to provide complete and accurate information about past and present medical illnesses including medication and other related matters.
- the responsibility to follow the treatment plan agreed upon with your health care practitioner.
- the responsibility to ask questions regarding condition and treatment plans until clearly understood.
- the responsibility to keep scheduled appointments or to call at least 24 hours in advance to cancel.
- the responsibility to call in advance for prescription refills.
- the responsibility to be courteous and cooperative to people who provide health care services.
- the responsibility to actively participate in their health and the health of the member's family. This means taking care of problems before they become serious, following provider's instructions, taking all medications as prescribed, and participating in health programs that keep one well.
- the responsibility to understand their health problems and participate in developing mutually agreed-upon treatment goals, to the best degree possible.
- the responsibility to supply information (to the extent possible) that the organization and its practitioners and providers need in order to provide care.

## Timely Access to Care

Under California law, CCHP is required to notify our Providers of timely access to care and interpretation service requirements annually:

### Timely Access to Care

The California Department of Managed Health Care (DMHC) has regulations set forth in Title 28, Section 1300.67.2.2 for health plans to provide timely access to care for our members.

Timely access standards include:

- Ø Urgent care appointments not requiring prior authorization: within 48 hours
- Ø Urgent care appointments requiring prior authorization: within 96 hours
- Ø Non-urgent appointments for primary care: within 10 business days
- Ø Non-urgent appointments with specialists: within 15 business days
- Ø Non-urgent appointments with a non-physician mental health care provider: within 10 business days
- Ø Non-urgent appointments for ancillary services for the diagnosis or treatment of injury, illness or other health conditions: within 15 business days
- Ø Telephone triage waiting time not to exceed 30 minutes

Exceptions may apply to the timely access standards if DMHC has found exceptions to be permissible. Interpreter services are available at all CCHP points of contact where members may reasonably need such services.

In addition, the California Department of Health Care Services (DHCS) requires that an initial prenatal visit be given within two weeks of the request.

Please see your CCHP Provider Manual Section 3 Utilization Management which explains in detail the process for you to obtain timely referrals to specialists for your patients. If you have a timely access concern, you can contact CCHP's Utilization Management at 1-877-800-7423 option 3 or file a complaint with the California Department of Managed Health Care by calling the DMHC Toll-free provider complaint line at: 1-877-525-1295.





## Pharmacy and Therapeutics Committee News

### Contra Costa Health Plan Pharmacy and Therapeutics Committee (P&T)

The CCHP P&T committee met on 7/7/2017. Updates from the meetings are outlined below:

**\*\*Changes to the PDL will be effective by August 1st 2017\*\***

#### The committee approved the following changes to the Preferred Drug List (PDL):

- **Addition of GLP-1 agonists Victoza (liraglutide) and Tanzeum (albiglutide) to the formulary**

- CCHP has removed prior authorization requirements for GLP-1 agonists Victoza and Tanzeum.
- Use of a GLP-1 agonist will be linked to metformin step therapy (if a member has been prescribed a 30 day supply of metformin within the past 120 days, claims will process WITHOUT PRIOR AUTHORIZATION).
- Victoza should be started at 0.6mg daily x 7 days, then titrated to 1.2mg daily. Maximum allowable dose will be 1.8mg daily; claims will be limited to 3 x 3mL pens per 30 days.



- Tanzeum should be started at 30mg weekly. Maximum allowable dose will be 50mg weekly; claims will be limited to #4 pens per 30 days. **Note: Tanzeum requires patient education on how to operate the pen device. CCHP will be working with the Epic team to place a hard-stop in the EMR to alert providers that education is required.** For reference, a link to the video tutorial available on the manufacturer's website: <http://www.tanzeum.com/how-to-use.html>



- **Addition of generic Prometrium (micronized progesterone) to the formulary**

CCHP has removed prior authorization requirements for generic Prometrium (micronized progesterone). Micronized progesterone 100mg and 200mg capsules have been added to the CCHP formulary as an alternate to medroxyprogesterone. Quantity limit will be #30 per month. **Note: generic Prometrium capsules can be used orally or vaginally.**

- **Addition of Vivelle Dot (estradiol patch) to the formulary**

CCHP has removed prior authorization requirements for Vivelle Dot (estradiol) patch. Vivelle Dot patches have been added to the formulary with equivalent status to Climara patch. **Note: Climara patch is dosed once weekly, and Vivelle Dot is dosed twice weekly.**

- **Addition of topical Voltaren (diclofenac) gel to the formulary**

CCHP has removed prior authorization requirements for topical Voltaren (diclofenac) 1% gel. Quantity limit will be #100gm per 30 days.

- **Addition of Crestor (rosuvastatin) and Pravachol (pravastatin) to the formulary**

CCHP has removed prior authorization requirements for generic Crestor and Pravachol.

- **Addition of Lialda (mesalamine) to the formulary**

- Lialda has been added to the CCHP formulary with equivalent status to other formulary mesalamine products (Asacol, Delzicol, and Pentasa).



## Pharmacy and Therapeutics Committee News

- **Addition of Vitamin D (cholecalciferol) 400 units/mL drops to the formulary**
- **Addition of Seasonale (levonorgestrel/ethinyl estradiol) to the formulary**
  - CCHP has removed prior authorization requirements for Seasonale.
- **Addition of artificial tears (drops and ointment) to the formulary**
  - Artificial tears drops will be limited to 30mL per 30 days (2 bottles).
  - Artificial tears ointment will be limited to 7gm per 30 days (2 tubes).
- **Updates to quantity limits for diabetes test strips**
  - Members who are not currently using insulin are allowed up to #100 strips per 90 days.
  - Members currently using insulin are allowed up to #150 strips per 30 days.
  - Members who are pregnant or may become pregnant (defined as females between the ages of 15 and 45) are allowed up to #150 strips per 30 days.
  - Type 1 diabetes patients who are pregnant are allowed up to #250 strips per 30 days during pregnancy (PRIOR AUTHORIZATION REQUIRED).
- **Modification of Xiidra (ophthalmic lifitegrast) PA criteria:**
  - Authorization of Xiidra will require ALL of the following:
    - Prescription must be written by an ophthalmologist or optometrist
    - Diagnosis of tear deficiency due to ocular inflammation in patients with keratoconjunctivitis sicca or dry eye.
    - Trial and failure of at least 4 weeks of both an ophthalmic solution AND gel/ointment formulation of artificial tears.

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### **Reminder regarding CCHP Sample Policy:**

- The practice of dispensing samples that have not been reviewed by the plan's Pharmacy and Therapeutics (P&T) Committee undermines the purpose of having a Preferred Drug List.
- Dispensing samples of drugs that have not been reviewed by the P&T Committee or are not preferred drugs listed on the PDL creates an expectation for the member that CCHP will cover the provided medication without having the medication reviewed.

**Providing samples of non-preferred medications is strictly prohibited by CCHP policy.**

**AND**

**For purposes of prior authorization (PA) processing, providing samples does not constitute continuation of therapy – the continuation rules do not apply in these cases.**



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### **Upcoming changes to the CCHP PDL & Online Searchable Formulary**

- CCHP is currently working with the PBM (PerformRx) to update the online searchable formulary to more accurately reflect actual drug coverage. Once the online searchable formulary has been completely updated, it will be used as the source to produce a printable PDL that will replace the current document (this will eliminate human errors in data transposition).
- Current online searchable formulary will remain unchanged (available via the CCHP website at <https://formularynavigator.com/Search.aspx?siteID=MMRREQ3QBC> and through a link in Epic toolbar):



## Pharmacy and Therapeutics Committee News

### Drug Search [Main Content](#)

You may search the **Contra Costa Health Plan** Preferred Drug List in several ways:

- You can use the alphabetical list to search by the first letter of your medication.
- You can search by typing part of the generic (chemical) or brand (trade) names.
- You can search by selecting the therapeutic class of the medication you are looking for.

If you have questions about your prescription drug coverage, please call Member Services at 1-877-661-6230 (Press 2) Monday - Friday, 8:00 a.m. - 5:00 p.m.

### Alphabetical Search

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

### Brand & Generic Name Search

 

- The current PDL will be replaced by an auto-created version that will conform to all of the CMS requirements, including among other things: printed in  $\geq 12$  pt. font, be 'machine readable', and contain tier levels for all drugs.
- Excerpt from current PDL below:

CONTRA COSTA HEALTH PLAN PREFERRED DRUG LIST		
GENERIC NAME	BRAND NAME	NOTES
Sennosides-docusate	SENNA-S	
Sulfasalazine	AZULFIDINE	
<b>GENITOURINARY TRACT MEDICATIONS</b>		
• Gall Stone Stabilizing Agents		
Ursodiol	ACTIGALL	
• Medications For The Urinary Tract		
Alfuzosin ER	UROXATRAL	PA: Tried and failed or contraindicated to alpha-adrenergic antagonists
Bethanechol	URECHOLINE	5mg, 10mg, 25mg formulary PA: 50mg strength only
Doxazosin Mesylate	CARDURA	
Methenamine/Methylene Blue Atropine	URISED	

### There are numerous ways to view the CCHP Preferred Drug List:

CCHP updates the Preferred Drug List (PDL) after each quarterly Pharmacy & Therapeutics Committee meeting. CCHP invites and encourages practitioners to access each update through the following means:

- An interactive searchable formulary is available within Epic (contact the Epic team with any questions related to functionality).
- A printable copy of the CCHP PDL can be found here: <http://cchealth.org/healthplan/pdf/pdl.pdf>
- A searchable copy of the CCHP PDL can be found here: <http://formularynavigator.com/Search.aspx?siteID=MMRREQ3QBC>

- **EPOCRATES – free mobile & online formulary resource**



- CCHP providers may add the CCHP formulary to their mobile devices using the following steps:
  - Go to [www.epocrates.com](http://www.epocrates.com) and click on "My Account" in the top right.
  - Sign in with your Epocrates username and password, if needed.
  - Click on "Edit Formularies."
  - Follow the on screen instructions to select and download formularies or to remove formularies (plan name in Epocrates is Contra Costa Health Plan).
  - Update your device, and the formularies on your mobile device will be changed accordingly.

Epocrates mobile is supported on the iOS (iPhone, iTouch, iPad), Android, & BlackBerry platforms

If you have any questions about the installation or use of Epocrates, please contact Epocrates Customer Support at [goldsupport@epocrates.com](mailto:goldsupport@epocrates.com) or at (800)230-2150.

Providers may request a copy of CCHP pharmacy management procedures or specific drug PA criteria by contacting the pharmacy unit directly at 925-957-7260 x2, or via the email listed below:

P&T updates can be viewed online at <http://cchealth.org/healthplan/provider-pharmacy-therapeutics.php>

Questions and comments may be directed to CCHP Pharmacy by emailing  
[cchp\\_pharmacy\\_director@hsd.cccounty.us](mailto:cchp_pharmacy_director@hsd.cccounty.us)



# Initial Health Assessment

All Contra Costa Health Plan (CCHP) members must receive an Initial Health Assessment (IHA) within 120 calendar days of enrollment with CCHP. The IHA is a comprehensive assessment that is completed during the member's initial visit(s) with his or her primary care provider. The purpose of the IHA is to assess and set the baseline for managing the acute, chronic and preventive health needs of the member. As a part of the IHA, CCHP requires primary care providers to administer an Individual Health Education Behavioral Assessment (IHEBA, or Staying Healthy Assessment, SHA).

**The IHA must be documented in the member's medical record and should be reviewed annually by the member's provider.**

## TIPS FOR COMPLETING THE IHA

### 1. **What Should be Included in the IHA?** — The IHA should include the following elements:

- a. Comprehensive History — The comprehensive history should include, but not be limited to:
  - i. Member's history of present illness
  - ii. Member's past medical history
  - iii. Member's social/mental health history
  - iv. Review of the member's organ systems
- b. Preventive Services for Asymptomatic Members
  - i. For members age 21 and older, the IHA should include preventive screening, testing and counseling in accordance with the current Clinical Preventive Services of the **U.S. Preventive Services Task Force (USPSTF)**.
  - ii. For members under age 21, the IHA should include:
    - Age-specific assessments and services required by the **Child Health and Disability Prevention Program (CHDP)** and as specified by the **American Academy of Pediatrics (AAP)**.
    - Assessments that follow the AAP periodicity schedule for examinations occurring more frequently than allowed under the CHDP schedule
  - iii. The IHA should include perinatal services in accordance with guidelines of the American Congress of Obstetricians and Gynecologists (ACOG).
- c. A comprehensive physical and mental health status exam
- d. Diagnoses and a plan of care that includes follow-up activities
- e. An Individual Health Education Behavioral Assessment (IHEBA)
  - i. The provider should administer the IHEBA utilizing the Staying Healthy Assessment (SHA). Updated SHA forms with expanded age categories including 0–6 months, 7–12 months, 1–2 years, 3–4 years, 5–8 years, 9–11 years, 12–17 years and adults. There is now an assessment specifically for seniors. These forms are available in several languages on our website: <http://cchealth.org/healthplan/providers/>. More information on the use of the SHA is there as well. Remember, CCHP offers you additional reimbursement for fulfilling this requirement. Bill code 99212 SH, 99213 SH, or 99214 SH and we will add \$12.12 to your visit payment.

### 2. **Where Can an IHA Be Performed?** — An IHA may be performed in the following settings:

- a. In the physician or provider's office or other ambulatory care settings
- b. At a skilled nursing facility, especially for members residing in a nursing facility upon enrollment with CCHP.
- c. In the member's home, particularly for homebound members
- d. In a hospital (note that any physical findings from the hospitalization must be rechecked and documented in a post-hospital discharge outpatient visit)

## Initial Health Assessment

### 3. How Should the IHA Be Documented?

- a. The provider should document the IHA in the member's medical record. The provider can also document the IHA using the PM160 claim form, a copy of which should also be included in the member's medical record.
- b. The provider should remember to document all elements of the IHA, or if the provider believes the member should be exempt from the IHA (see below), the reasons for the exemption.

### 4. Which Members Are Exempt from the IHA? Selected members may be exempt from the IHA requirement under the following conditions:

- a. All elements of the IHA have been completed within 12 months of the member's effective date of enrollment, and the provider has reviewed/updated the member's medical record.
- b. If the provider is able to incorporate relevant information from the member's existing medical record and has received a physical exam within 12 months of the member's effective date of enrollment
- c. The member has not been continuously enrolled with CCHP for 120 days.
- d. The member loses his or her eligibility prior to performance of the IHA.
- e. The member refuses the IHA (**and the provider documents the refusal in the medical record. There is an available field on the SHA form for refusal.**)
- f. The member misses the scheduled appointment and two additional documented attempts to reschedule are unsuccessful.

*If you have any questions, call the Provider Liaison at (925) 313-9527*

## Provider Appeals

Providers and facilities may submit a appeal of an unfavorable determination made by CCHP for a prospective, concurrent or retroactive request for service or hospitalization of an enrollee. Providers or facilities may also appeal unsatisfactory, disputed, or resubmission of a claim payment.

The appealing party must submit a **written appeal** request within 365 days from the date of notice of a service or claim denial or modification for Medi-Cal or Commercial members, or within 60 days from the date of notice of a service or claim denial or modification for Medicare members. Timelines are subject to change. Requests should be accompanied by clinical records (hard copy or on an **encrypted disc**) to support the appeal. **All appeals are required to be sent in by Certified Mail due to HIPAA regulations.**

Failure to submit an appeal within the specified timeframe may result in the denial of an appeal request. No punitive action is taken against a provider who submits an appeal. If a provider submits an appeal on behalf of a member, the appeal must be accompanied by written member consent. Member appeals must be filled within 60 days of Receipt of Notice of Action.

**Providers and facilities may submit their written appeal request to:**

**Denial Issued By: Claims Unit  
(Business Services)**

**Contra Costa Health Plan  
Claims Department  
595 Center Avenue, Suite 100  
Martinez, CA 94553  
Phone: 925-957-5185  
Fax: 925-957-5173**

**Denial/Modification Issued By: Authorization Unit  
(Utilization Management)**

**Contra Costa Health Plan  
Authorization Unit  
Attn: Appeals Liaison  
595 Center Avenue, Suite 100  
Martinez, CA 94553  
Phone: 925-957-7260**

## Welcome Contracted Provider Network (CPN) Providers

### Primary Care Providers

Michelle Cortes-Surdilla, MD	Family Medicine	Axis Community Health, Livermore
Amennah Moghaddan, NP	Family Medicine	Axis Community Health, Pleasanton
Cho Cho Lay, MD	Family Medicine	Axis Community Health, Pleasanton
Deepa Perumal, MD	Family Medicine	Axis Community Health, Pleasanton
Priyanka Kallem, MD	Family Medicine	Axis Community Health, Pleasanton
Rachel Freitas, NP	Family Medicine	Axis Community Health, Pleasanton
Reshma Gandhi, MD	Family Medicine	Axis Community Health, Pleasanton
Sadaf Zafar, MD	Family Medicine	Axis Community Health, Pleasanton
Swechha Shrestha, NP	Family Medicine	Axis Community Health, Pleasanton
Lisa Wright, NP	Family Medicine	Brighter Beginnings Family Health Clinic, Antioch
Aklil Rostai, PA	Family Medicine	La Clinica de la Raza, Concord
Tenzin Ngadon, NP	Family Medicine	La Clinica de la Raza, Concord
Cecilia Brown, PA	Family Medicine	La Clinica de la Raza, Pittsburg
Guadalupe Stanley, PA	Family Medicine	La Clinica de la Raza, Pittsburg
Maribel Reyes, NP	Family Medicine	La Clinica de la Raza, Pittsburg
Rachel Friedman, NP	Family Medicine	LifeLong Medical Care, Berkeley
Qiratulanne Khan, DO	Family Medicine	LifeLong Medical Care, Oakland
Rose Ochieng, MD	Family Medicine	LifeLong Medical Group, Berkeley
Anthony Lopresti, MD	Family Medicine	Solo Practice, Walnut Creek
Sreedevi Ayyala, MD	Internal Medicine	Axis Community Health, Livermore
Anuja Garg, MD	Internal Medicine	Axis Community Health, Pleasanton
Gunjan Munjal, MD	Internal Medicine	Axis Community Health, Pleasanton
Sudha Chadawalawada, MD	Internal Medicine	Axis Community Health, Pleasanton
Upama Barua, MD	Internal Medicine	Axis Community Health, Pleasanton
Andreas Ahlas, MD	Internal Medicine	La Clinica de la Raza, Pittsburg
Lisa Tostenson, NP	Internal Medicine	LifeLong Medical Care, Richmond
Jeffrey Ritterman, MD	Internal Medicine	LifeLong Medical Care, San Pablo
George Jackson, MD	Internal Medicine	LifeLong Medical Group, Richmond
Tehmina Kanwal, MD	Internal Medicine	San Ramon Urgent Care & Clinic, San Ramon
Dawnell Moody, MD	Pediatrics	Axis Community Health, Pleasanton
Soniya Mehra, MD	Pediatrics	Axis Community Health, Pleasanton
Allen Obrinsky, MD	Pediatrics	John Muir Physician Network, San Ramon
Colleen Hogan, MD	Pediatrics	John Muir Physician Network, San Ramon
Cynthia Hann, MD	Pediatrics	John Muir Physician Network, San Ramon
Michael Ruiz, MD	Pediatrics	John Muir Physician Network, San Ramon
Tracy Trujillo, MD	Pediatrics	John Muir Physician Network, San Ramon
Deborah Miller, MD	Pediatrics	LifeLong Medical Care, Richmond
Rehimat Momoh-Mendy, NP	Pediatrics	LifeLong Medical Care, San Pablo
Anh Nguyen, LAc	Acupuncture	LifeLong Medical Care, Berkeley
Bonney Lynch, LAc	Acupuncture	LifeLong Medical Care, Berkeley
Hideko Pelzer, LAc	Acupuncture	LifeLong Medical Care, Berkeley
Robert Dubois, LAc	Acupuncture	LifeLong Medical Care, Berkeley
Marie Guptill, LAc	Acupuncture	Optima Wellness Acupuncture, Walnut Creek
Chiu Tung, MD	Anesthesiology	Surgical Anesthesia Specialist, Inc., Walnut Creek
Julia Ankunding, MD	Anesthesiology	Surgical Anesthesia Specialist, Inc., Walnut Creek

# Welcome Contracted Provider Network (CPN) Providers

## Specialty Care Providers

David Glenn, MD	Anesthesiology	Surgical Anesthesia Specialist, Inc., Walnut Creek and Napa
Jennifer Bardales, PA	Dermatology	Bruce Carlton, MD, Inc., Vacaville and San Pablo
Sharon Roth, PA	Family Planning - Mid-Level	Planned Parenthood, San Francisco
Mary Marine, IBCLC	Lactation Consultant	Solo Practice, Antioch
Allana Samuel, IBCLC	Lactation Consultant	Solo Practice, Richmond
Jasmine Marquez, IBCLC	Lactation Consultant	Solo Practice, Walnut Creek
Kathryn Ponder, MD	Neonatology	Children's First Medical Group-East Bay Newborn Specialists, Inc., Oakland
Cynthia Tsui, MD	Nephrology	Diablo Nephrology Medical Group
Sharon de Edwards, MD	Obstetrics and Gynecology	Solo Practice, Pittsburg
Elaine Christian, CNM	Obstetrics and Gynecology - Mid-Level	
Nicole Kurthausen-Bon	Occupational Therapy	LifeLong Medical Care, Berkeley and San Pablo
Anita Agarwal, MD	Ophthalmology	Muir Orthopaedic Specialist, Brentwood
Andrew Mah, OD	Optometry	West Coast Retina Medical Group, San Francisco and Corte Madera
Amy Horan, PA	Orthopaedic Surgery Assistant, Mid-Level	Mission Hills Eye Center, Concord and Pittsburg
Jessica Southwood, MD	Otolaryngology	Bay Area Orthopedic Surgery and Sports Medicine, Inc., Vallejo and Pinole
Ernest Cheng, DO	Pediatric Physical Medicine	Bay Area Surgical Specialist, Inc., Walnut Creek
Kelly Huibregtse, MD	Pediatrics	Solo Practice, Berkeley
Andre Jarrahzadeh, DPT	Physical Therapy	Children's First Medical Group-East Bay Newborn Specialists, Inc., Oakland
Jordan Davis, DPT	Physical Therapy	Dublin Physical Therapy, Inc., Dublin and Livermore
Kevin Mao, DPT	Physical Therapy	Dublin Physical Therapy, Inc., Dublin and Livermore
Akinwunmi Makinde, DPT	Physical Therapy	Dublin Physical Therapy, Inc., Dublin and Livermore
Jennifer Lee, DPT	Physical Therapy	VibrantCare, Oakland
Christina Kwok-Oleksy, DPM	Podiatry	VibrantCare, Oakland
Jafar Bozorgmehr, MD	Psychiatry	LifeLong Medical Care, Oakland
Daryl Martinez, MD	Pulmonary Disease	California Center for Behavioral Health, Walnut Creek
Hiromi Takekuma, PA	Pulmonary Disease	Diablo Pulmonary Medical Group, Concord
John Hadley, MD	Pulmonary Disease	Diablo Pulmonary Medical Group, Concord
Kiran Ubhayakar, MD	Pulmonary Disease	Diablo Pulmonary Medical Group, Concord
Minh Nguyen, MD	Pulmonary Disease	Diablo Pulmonary Medical Group, Concord
Richard Kops, MD	Pulmonary Disease	Diablo Pulmonary Medical Group, Concord
James Mitchell, MD	Radiation Oncology	Epic Care - East Bay Medical Oncology - Hematology Associates, Pleasant Hill and Dublin
Nicholas Trakul, MD	Radiation Oncology	Lucile Salter Packard Children's Hospital Medical Group, Pleasanton
Jerrold Kram, MD	Sleep Medicine	California Center for Sleep Disorders, Alameda, Concord, Fremont, Pleasanton and San Francisco

## Welcome Contracted Provider Network (CPN) Providers

### Specialty Care Providers

John Ruddy, MD	Sleep Medicine	California Center for Sleep Disorders, Alameda, Concord, Fremont, Pleasanton and San Francisco
Brian McGuinness, MD	Surgery - Colon & Rectal	BASS - Bay Area Colon & Rectal Surgeons, Walnut Creek
Negar Salehomoun, MD	Surgery - Colon & Rectal	BASS - Bay Area Colon & Rectal Surgeons, Walnut Creek
Sean Martin, MD	Surgery - General	Bay Area Surgical Specialist, Inc., Walnut Creek
Robert Lanflisi, MD	Surgery - General	Solo Practice, Fairfield & Vallejo
Brian Keyashian, MD	Surgery - Vascular	Bay Area Surgical Specialist, Inc., Walnut Creek
Mark Goldin, MD	Urgent Care	STAT MED Urgent Care, Lafayette and Concord
Robert Mooney, MD	Urgent Care	STAT MED Urgent Care, Lafayette and Concord
Thomas Crawford, PA	Urgent Care - Mid-Level	LifeLong Medical Care, San Pablo
Stephanie Guest, NP	Urgent Care - Mid-Level	STAT MED Urgent Care, Lafayette and Concord

### Behavior Analysis

Yesenia Lechuga	BA	Center for Autism and Related Disorders, Inc., Antioch and Brentwood
Kimberly Samonte	BA	Center for Autism and Related Disorders, Inc., Walnut Creek and Brentwood
Sarah Roland	BCBA	Animate Consulting, LLC, Emeryville
Jillian Woolard	BCBA	Applied Behavior Consultants, Inc., Sacramento
Maria del Carmen Covarrubias	BCBA	Autism Learning Partners, LLC, San Ramon
Faye Gillespie	BCBA	Center for Autism and Related Disorders, Inc., Antioch and Brentwood
Beverly Downing	BCBA	Center for Autism and Related Disorders, Inc., Richmond
Joseph Hewell	BCBA	Center for Autism and Related Disorders, Inc., Walnut Creek
Kristyn Corley	BCBA	Centria Healthcare Autism Services, Walnut Creek
Melissa Sandlin	BCBA	Centria Healthcare Autism Services, Walnut Creek
Nancy Fikry	BCBA	Centria Healthcare Autism Services, Walnut Creek
Sarah Powell	BCBA	Centria Healthcare Autism Services, Walnut Creek
Bradley Assenzio	BCBA	Ed Support Services, Oakland
Denise Denevi	BCBA	Ed Support Services, Oakland
Erin Watts	BCBA	Ed Support Services, Oakland
Jacob Bush	BCBA	Ed Support Services, Oakland
Julie Harris	BCBA	Ed Support Services, Oakland
Kayla Alvis	BCBA	Ed Support Services, Oakland
Khushboo Chabria	BCBA	Ed Support Services, Oakland
Kristin Ojala	BCBA	Ed Support Services, Oakland
Laura Kliger-Enkin	BCBA	Ed Support Services, Oakland
Mette Madsen	BCBA	Ed Support Services, Oakland
Michelle Rizo	BCBA	Ed Support Services, Oakland
Sara Buitrago	BCBA	Ed Support Services, Oakland
Melissa Baird	BCBA	Gateway Learning Group, Hayward
Vanessa Lindler	BCBA	Gateway Learning Group, Hayward
Juan Mesa	BCBA	NY Learning Center, San Pablo and Richmond



## Welcome Contracted Provider Network (CPN) Providers

### Behavior Analysis

Poplar Haines	BCBA	Positive Behavior Supports Corp., San Francisco
Lauren Cox	BCBA	Therapeutic Pathways, LLC, Dublin
Tamara Leach	BCBA	Trumpet Behavioral Health, LLC, Antioch and Dublin
Ashley Matter	BCBA	Trumpet Behavioral Health, LLC, Dublin
Danielle Hernandez	BCBA	Trumpet Behavioral Health, LLC, Dublin and Antioch
Zhanna Thompson	BCBA	Trumpet Behavioral Health, LLC, Dublin and Antioch
Marcus Hines	BCBA	Trumpet Behavioral Health, LLC, Pleasanton and Antioch
Mark Harrington	BCBA	Trumpet Behavioral Health, San Francisco
Keith Storey	BCBA-D	Ed Support Services, Oakland
Kristin Miller	BCBA-D	Ed Support Services, Oakland
Daniela Fazio	BCBA-D	Therapeutic Pathways, LLC, Dublin
Jafar Bozorgmehr	MD	California Center for Behavioral Health, Walnut Creek
Ashley Smith-Nonnarath	MS	Positive Pathways, LLC, San Francisco

### Behavior Analysis

Stephanie Crampton	PsyD	Autism Center of Northern California, San Francisco
Michelle Juarez	RBT	Gateway Learning Group, Concord

### Facilities

California Care Imaging Center	Diagnostic Imaging	Pleasant Hill
Premier Healthcare Services, LLC	Home Health	Concord
Vibra Hospital of Sacramento, LLC	Long Term Acute Care Hospital	Folsom
	Non-Emergency Medical	
Medic Shuttle	Transportation Services	Pittsburg
Bacon East Pharmacy	Pharmacy	Concord
Advanced Respiratory, Inc.	Respiratory Medical Services	St. Paul, MN

### Mental Health

Julia Fogelson	ASW	Planned Parenthood, Richmond
Charles Kraft	Ed.D	Axis Community Health, Pleasanton
Benjamin Koerner	LCSW	Axis Community Health, Pleasanton
Marsha Gubser	LCSW	La Clinica de la Raza, Concord
Janet Kass	LCSW	Solo Practice, Berkeley & El Sobrante
Stephanie Jansse	MD	Solo Practice, Brentwood
Elaine Pritchard	MFT	Pinnacle Mental Wellness, Pittsburg
Katherine Shand	MFT	Planned Parenthood, Concord and Antioch
Johanna Justine Hourany	MFT	Solo Practice, Pleasant Hill
Marie Madeleine Burkhart	MFT	Solo Practice, Walnut Creek
Jennifer Sanchez	PhD	Axis Community Health, Pleasanton
Sandra Frucht	PhD	Solo Practice, Lafayette & Walnut Creek
Theresa Rizzo	PsyD	Axis Community Health, Pleasanton and Livermore
		Endurance-A Sports Psychology Center, Inc., Berkeley
Megan Laiblin	PsyD	Solo Practice, Berkeley & Lafayette
Christopher Arrillaga	PsyD	Solo Practice, Hercules
Farrah Khabagnote	PsyD	

# The Bulletin Board

## Welcome Contra Costa Regional Medical Center (CCRMC) Providers

Chelsea Rhoades, MD - Internal Medicine

Karen Weiss, NP - Family Medicine

Barbara Sinclair, MD - Family Medicine

Concord Health Center

Miller Wellness Center

Pittsburg Health Center

HOLIDAY OBSERVED BY CCHP

**Labor Day, September 4**

Visit our web site for resources for  
uninsured individuals at

[www.cchealth.org/insurance](http://www.cchealth.org/insurance)

This free web-based tool allows you to view your member's records from any computer, at any time. To access the portal, complete the Portal Access Agreement. For a copy of the agreement go to our website at [www.cchealth.org](http://www.cchealth.org)

1. Click on Health Plan
2. Select for Providers
3. Select Forms & Resources
4. Click on the ccLink Logo
5. Click on the pdf file ccLink Provider Portal Access Agreement and Attachment A



Visit our CCHP Provider & Pharmacy  
Online Search Engine (OSE) at:

[www.cchealth.org](http://www.cchealth.org)

*Find available on our web site:*

CCHP Preferred Drug List (PDL)

CCHP Provider Directory

CCHP Provider Manual

Prior Authorization Forms

Contra Costa Health Plan has a new  
phone system. In order to use the  
Provider Call Center's automated  
eligibility system, Providers must  
access the system with a valid NPI  
number.

Providers needing help with interpreter  
services or needing help with arranging face  
to face American Sign Language  
interpretation services may call  
1 (877) 800-7423 option 4.

Our URAC accredited Advice Nurse Unit is  
available for our members 24 hours a day, 7  
days a week including holidays. Members can  
call The Advice Nurse Unit at 1 (877) 661-6230.



**595 Center Ave. Suite 100  
Martinez, CA 94553**

**Phone: (925) 313-9500 Fax: (925) 646-9907**

**E-mail: [ProviderRelations@hsd.cccounty.us](mailto:ProviderRelations@hsd.cccounty.us)**

**Website: [www.cchealth.org](http://www.cchealth.org)**

### **Provider Relations, Contracts, Management & Credentialing Staff Contact Information**

Terri Lieder, MPA, CPCS, CPMSM	Director of Provider Relations	(925) 313-9501	<a href="mailto:Terri.Lieder@hsd.cccounty.us">Terri.Lieder@hsd.cccounty.us</a>
Christine Gordon, RN, BSN	Provider Liaison/FSR Nurse	(925) 313-9503	<a href="mailto:Christine.Gordon@hsd.cccounty.us">Christine.Gordon@hsd.cccounty.us</a>
Minawar Tuman, RN, MSN, PHN	Provider Liaison/FSR Nurse	(925) 313-9534	<a href="mailto:Minawar.Tuman@hsd.cccounty.us">Minawar.Tuman@hsd.cccounty.us</a>
Ronda Arends	Credentialing Supervisor	(925) 313-9522	<a href="mailto:Ronda.Arends@hsd.cccounty.us">Ronda.Arends@hsd.cccounty.us</a>
Patricia Cline	Contracts Supervisor	(925) 313-9532	<a href="mailto:Patricia.Cline@hsd.cccounty.us">Patricia.Cline@hsd.cccounty.us</a>

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

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