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Volume 19 Issue 1 Spring 2021

A Message from our Chief Medical Officer

As we jump into spring, CCHP has been proud to support Contra Costa Health Services' rollout of the COVID-19 Vaccine. You may have noticed a slightly longer wait when calling CCHP. This is because CCHP's Advice Nurse Line, Care Management Unit, and Member Services have been hard at work reaching out to eligible individuals and helping them schedule their appointments. As Contra Costa Health Services continues to staff up for its vaccination efforts, CCHP's units have begun to return to their usual functions – thank you for your patience with the longer wait times.

This Spring, we are focused on streamlining and improving internal processes as we move towards reopening and implementing the CalAIM program. One of our flagship efforts is moving away from paper, telephone, and faxes entirely towards electronic communication for our providers through the CCHP ccLink Provider Portal. Our first wave of providers has been set up with access to the ccLink Provider Portal as of April 1, 2021. If you do not already have access to the ccLink Provider Portal, please download and complete the ccLink Provider Agreement posted on our website: https://cchealth.org/healthplan/providers/. We hope this will not only help with increasing processing speed of prior authorization requests but also with payment of claims and review of appeals.

We are also reviewing and revising the CCHP No Authorization List, the Referral Only List, as well as protocols around prior authorization for certain procedures, such as bariatric surgery. As a reminder, the <u>Interactive No Authorization Required List</u> and <u>Referral Only</u> list **ONLY APPLY** to a member when they are receiving services within their assigned provider network. This means for patients with Commercial A, Commercial IHSS, and other Commercial CCHP product lines (except CCHP Commercial B), all services not provided within the CCRMC Network **MUST** have prior authorization even if they are on the Interactive No Authorization List or Referral Only List.

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A Message from our Chief Medical Officer Continued...

With CalAIM, we are excited to explore new initiatives to get members to the right level of care from the inpatient setting. We will share more about these initiatives as CalAIM progresses. At the same time, I'd like to remind all our acute care hospital partners again that the hospital is responsible for notifying CCHP within 24 hours of acute care hospitalization so that CCHP can do concurrent review on these cases. The hospital is responsible for providing relevant clinical records daily so that concurrent review can occur. Those hospitals who fail to provide notification and/or records in a timely manner will not be reimbursed for the hospitalization.

We are excited that we will be bringing on a new Quality Director for CCHP whom I hope to introduce in the next issue of the newsletter. The Quality Team is working on a number of exciting initiatives including improving care for patients with diabetes, patients with asthma, and patients who are pregnant. As highlighted last time, the Quality Team is also working hard on ensuring all individuals receive preventive services children getting their blood lead level screening at 12 months and 24 months of age (https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2020/APL20-016.pdf), all age groups making it in for their annual health visits and receiving the appropriate immunizations and health screenings, and new CCHP members getting their Initial Health Assessment (IHA) within 120 days of enrolling with CCHP.

For all primary care providers, CCHP is now sending you a list of all new members monthly as well as those new members who have not completed their IHAs. CCHP is also exploring some ways through technology to help facilitate completion of this process.

Finally, we know that COVID-19 has increased the need for mental health services. As a reminder, all providers who are qualified to provide services for those with mild to moderate severity can provide and be reimbursed for up to eight sessions without needing prior authorization from CCHP. After the eighth session, if additional services are needed, the provider can reach out to CCHP for prior authorization for additional sessions.

If the provider does not feel equipped to provide these services, please continue to connect the member to the Access Line: (888) 678-7277. CCHP has been working in partnership with the Access Line and Behavioral Health Services to increase the capacity for treatment of individuals who fall into the mild to moderate range.

For those individuals with moderate to severe severity and those with specialty member health needs, please also connect these individuals to the Access Line: (888) 678-7277. There is no wait list for treatment for these individuals.

CCHP members with Commercial A/IHSS/B and other commercial products should reach out to CCHP's Behavioral Health Team (Robin.Bevard@cchealth.org) if they need additional assistance.

If you have any challenges with the Access Line, please reach out to Katy White (katy.white@cchealth.org) for further assistance.

Thank you for all your hard work as we work together to ensure a safe reopening.

In partnership,
Dennis Hsieh, MD, JD

COVID-19 Vaccine Message from the CEO

An analysis on the number of health plan members not receiving the COVID Vaccine is high. We want to partner with you to do outreach to the CCHP membership. Below is some general information on where your members can go and get the COVID 19 Vaccine. Please share this information with your patients.

No-Appointment COVID-19 Vaccine Clinics This Week in Pittsburg, Richmond

- No-appointment mobile clinics staffed by the California Office of Emergency Services (Cal OES) will provide COVID-19 vaccine from April 26 to May 2 at:
 - o Albert D. Seeno Jr. Pittsburg Youth Development Center, 1001 Stoneman Ave., Pittsburg
 - o St. John Missionary Baptist Church (North Campus), 29 8th St., Richmond
- Next week (May 3-6), the no-appointment mobile clinics will move to:
 - o Meadown Homes Elementary School, 1371 Detroit Ave., Concord
 - o Ambrose Recreation Center, 3105 Willow Pass Rd., Bay Point
 - ★ The Bay Point site replaces a previously planned site at the south campus of St John Missionary Baptist in Richmond
- Vaccines are provided on a first come, first served basis, and each site can provide as many as 500 vaccines per day. The sites are open 9 a.m.-4 p.m.
- CCHS is also opening a COVID-19 vaccine clinic on Thursday at 1034 Oak Grove Road in Concord that will offer both appointments and drop-in service daily, Tuesday through Saturday.
 - Tuesdays 12-7 (4:30-7 drop-in welcome), Weds-Sat 8-3 (12:30-3 drop-in welcome)

CCHS Online Scheduling Makes Scheduling a COVID-19 Vaccine Appointment Easy

Contra Costans who need an appointment for a safe, effective, no-cost COVID-19 vaccine are just one click away, thanks to the county's new online appointment scheduling system. Vaccines can be scheduled at the following link: coronavirus.cchealth.org/get-vaccinated

Thank you!

Sincerely, Sharron A. Mackey, Chief Executive Officer

Novel Coronavirus (COVID-19)

Get the latest information on Novel Coronavirus and what is being done in Contra Costa County: https://www.coronavirus.cchealth.org/

For CCHP COVID-19 Information:

https://cchealth.org/healthplan/providers/covid19-waiver.php



Behavioral Health Updates

During this extremely stressful environment with the pandemic in full effect, CCHP continues to work on meeting the needs of its members by expanding and enhancing the delivery of services for Behavior Health (BH). Below is an update of the many changes and enhancements we are working on to ensure our providers have the right specialty network and most importantly that our members can access care.

Network Expansion:

- Expanding the provider network with telehealth BH providers. Currently in negotiations with Serene
 Health and TeleMed2U which will greatly expand behaviorists services
- Negotiating with providers for our Commercial product to add our Medi-Cal product line to the existing Psychiatry network
- Managing the Behavioral Health Integration Pilot in the community until December 31, 2022. The purpose of the pilot is to centralize the low to moderate services in the PCP setting.

Trainings:

- Offering BH low to moderate services trainings to the PCP network, enhancing the trainings by offering CEU/CMEs sponsored by our Pharmacy Benefit Management — Perform Rx
- Currently surveying our PCPs to customize their training needs for BH and Autism
- CCHP new Behavioral Health department will have oversight on the Utilization Management of low to moderate services. This change will occur by Oct 1, 2021. However, the Mental Health Access line will continue with County Mental Health.

New Programs on the Horizon:

- Increase access to student BH services to improve the mental and well being of children and adolescent. CCHP is collaborating with County Behavioral Health, Superintendent Offices and School Districts. We have formed a steering committee and will create a stakeholders group and want to partner with our PCPs in building the infrastructure, to expand services for preventive and early intervention into the BH services. Governor's Office approved \$400 million dollars
- Senate Bill 855 lays out enhanced services Deep dive of our program offerings to ensure the services are available. Health & Safety Code section 1374.721(b) requires health care services plans conducting utilization review of covered health care services and benefits for the diagnosis, prevention, and treatment of mental health and substance use disorders (MH/SUD) in children, adolescents, and adults to apply the criteria and guidelines set forth in the most recent versions of treatment criteria developed by the nonprofit professional association for the relevant clinical specialty. The Department of Managed Health Care (Department), in conjunction with health plans, the California Department of Insurance, and various stakeholder groups, developed the initial criteria list on the next page to promote consistency among health care service plans and delegated entity partners in delivering MH/SUD services.

Behavioral Health Updates Continued

1374.721 Mental Health and Substance Use Disorder Criteria & Guidelines

Health & Safety Code section 1374.721(b) requires health care services plans conducting utilization review of covered health care services and benefits for the diagnosis, prevention, and treatment of mental health and substance use disorders (MH/SUD) in children, adolescents, and adults to apply the criteria and guidelines set forth in the most recent versions of treatment criteria developed by the nonprofit professional association for the relevant clinical specialty.

The Department of Managed Health Care (Department), in conjunction with health plans, the California Department of Insurance, and various stakeholder groups, developed the following initial list (Attachment A Criteria) to promote consistency among health care service plans and delegated entity partners in delivering MH/SUD services. To the extent a plan utilizes criteria (or the most recent versions) identified in this Attachment A in the delivery of these services, the Department will consider this use a "safe harbor." In the event a plan elects to implement a nonprofit association criteria for conditions not specified below, the plan will be required to demonstrate to the Department the elected criteria meets the requirements of section 1374.721.

Level of Care Criteria

	Clinical Specialty	Nonprofit Professional Association	Criteria or Guideline (Current Version)
1.	Substance Use Disorder Any Age	American Society of Addiction Medicine (ASAM)	ASAM 3 rd Edition 2013
2.	Mental Health Disorders Patients 18 and Older	American Association of Community Psychiatrists	Level of Care Utilization System (LOCUS) 20 - 2020
3.	Mental Health Disorders Patients 6 to 17 Years of Age	American Association of Community Psychiatrists Or American Academy of Child & Adoles- cent Psychiatry	Child and Adolescent Level of Care Utilization System (CALOCUS) 20* Or Child and Adolescent Service Intensity Instrument (CASII)* - 2019
			*instruments in process of being merged into a single instrument.
	Mental Health Disorders Patients 0 to 5 Years of Age	American Academy of Child and Adolescent Psychiatry	Early Childhood Service Intensity Instrument (ESCII)

Clinical Practice Guidelines for Specific Diagnoses

	Clinical Specialty	•	Criteria or Guidelines (Current Version)
1.	, .	Transgender Health (WPATH)	WPATH Standards of Care Version 7 - 2012 Anticipated release of Version 8 in 2021

Department of Managed Health Care Attachment A Criteria p. 1 of 2 Last Revised: January 5, 2021

New Behavioral Health Treatment Unit – March 1

CCHP now has a Behavioral Health Treatment Unit (BHTU) to assess CCHP members under the age of 21 for the following:

- o Autism
- o Complex ADHD (i.e., comorbid developmental / learning / psychiatric disorders)
- o Applied Behavioral Analysis (ABA)
- Behavioral Health Treatment (BHT) services consist of Applied Behavioral Analysis (ABA) and other generally accepted evidence-based approaches that prevent or minimize the adverse effects of behaviors that interfere with learning and social interaction.
- Intakes are done by a licensed clinical social worker (LCSW)
 - The LCSW will assist parents / caregivers with gathering supportive documents needed for case review.
 - The LCSW will provide parents / caregivers with community resources.
- The BHTU has a medical director, Dr. Linda Copeland, who will be conducting provider trainings. The trainings will be recorded and then uploaded to the provider portal for on-demand access.

To refer a CCHP member to the BHTU complete the <u>Behavioral Health Evaluation</u> referral form or contact Gearline at (925) 313-6094 or by email at <u>Gearline.Duplessis@cchealth.org</u>.

Transition from eFax to the ccLink Provider Portal

CCHP has transitioned from faxes to the CCHP ccLink Provider Portal for all CPN providers as of April 1, 2021. CCRMC providers will continue to use ccLINK.

CCHP will continue to remind providers over the next two weeks that faxes will no longer be accepted and that all requests must come in through the CCHP ccLink Provider Portal. After June 1, 2021 (and possibly earlier), CCHP will no longer be processing any faxed requests and will be returning these requests to the requesting provider's office.

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 <u>UB04</u>, <u>CMS1500</u>, <u>attaching documents</u>, and <u>Tips</u>
- Clinical Notes
- Hospital Admission or Observation Notifications via Face sheet

If you do not already have access to the ccLink Provider Portal, please download and complete the ccLink Provider Agreement posted on our website: https://cchealth.org/healthplan/providers/.

- Here is a direct link to the ccLink Provider Agreement that includes the application on the last page: https://cchealth.org/healthplan/pdf/provider/cclink-provider-agreement.pdf.
- Once complete, email it to the ccLink Provider Portal team at CCHPPortalSupport@cchealth.org.

CCHP has received a lot of requests in the past 2 months for access. If you have already submitted a request, you should be granted access no later than May 15, 2021. CCHP apologizes for the delay in processing access requests.

Authorization Reminders

Members with Commercial CCHP Insurance

(Commercial A, Commercial IHSS, etc.—except Commercial B)

Those who have CCHP Commercial Plan A, Commercial Plan IHSS, and other Commercial CCHP Products (except Commercial B) have their primary care doctors assigned to CCRMC. For specialty care, these members must stay in network and get their specialty care at CCRMC except when the services are not available. In those cases, CCHP will approve these members to go to providers outside of CCRMC for specialty care. All services on the <u>Interactive No Authorization List</u> or <u>Referral Only</u> list must be provided at CCRMC to qualify for no authorization or referral only, as these lists only apply if a member is receiving those services within their assigned network. If there are concerns about timely access at CCRMC for these members, let CCHP know and Dr. Hsieh will work with Dr. Urcuyo and Dr. Sullivan to facilitate timely access.

No Authorization List and Referral Only List

For those services on the no authorization list and the referral only list, CCHP prior authorization is not required. Please continue to submit referrals for services on the referral only list, as outlined in the provider manual, via ccLINK or the Provider Portal so that there is a record of these referrals. However, after referral submission, please go ahead and schedule the member for the requested service. The no authorization list and referral only lists are updated regularly. Please check the CCHP website and provider manual respectively for the most up to date list of each.

Non-Emergency Medical Transportation PCS Form

The Department of Healthcare Services (DHCS) requires providers to submit a Physician Certification Statement (PCS) form with the Non-Emergency Medical Transport (NEMT) requests in order for CCHP to be able to approve and reimburse.

A provider can use any PCS form that includes these 4 elements:

- 1. Mode of transport BLS ambulance, gurney van, wheelchair van, air transport
- 2. Functional Limitations Statement The provider is required to document the member's limitations and provide specific physical and medical limitations that preclude the member's ability to reasonably ambulate without assistance or be transported by public or private vehicles
- 3. Dates of Service needed Start and end dates for NEMT services: Authorization may be for a maximum of 12 months
- 4. Provider Certification Statement Prescribing provider's statement certifying that medical necessity was used to determine the type of transportation being requested- Signed by MD, DO, NP, or PA

We have seen a number of PCS forms from providers that don't have these 4 elements on them. Please use the link to the CCHP PCS form below if you want to use a form that is guaranteed to have all 4 elements: https://cchealth.org/healthplan/pdf/provider/Appendix-M-Physician-Certification-Statement-for-NEMT.pdf

Otherwise, you may use any other form that contain all 4 of these elements. If these elements are missing, you will be asked to resubmit a form with these 4 elements before a request can be granted and/or payment can be made.

If you have any questions regarding this form or process, please email CCHPauthorizations@cchealth.org.

Bariatric Surgery Criteria and Process Changes

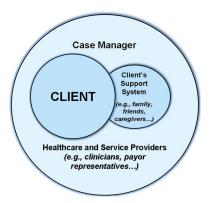
CCHP is updating its bariatric surgery criteria (and other criteria) to simplify the process. If you have any feedback on what processes are too complicated or outdated, please let Dr. Dennis Hsieh know via email at dennis.hsieh@cchealth.org.

Case Management

CCHP Case Management (CM) provides outreach and case management services for members that over/under utilize services or have difficulty adhering to a treatment plan. Our goal is to promote quality of care through increased coordination of services, decreased fragmentation of care, efficient utilization of resources, along with patient and caregiver/family involvement.

To refer a member to Case Management:

- Create a Referral in the ccLink Provider Portal by following these instructions: https://cchealth.org/html/ptd/provider/ccLink-Referral-Entry-Process.pdf
- Telephone referrals can also be made by calling (925) 313-6887. Leave a message including times you may be reached and someone will return your call promptly.
- If you do not have access to the ccLink Provider Portal, please download and complete the ccLink Provider Agreement posted on our website: https://cchealth.org/healthplan/providers/ and email it to CCHPPortalSupport@cchealth.org. Access can take a few weeks so in the meantime, please complete the referral form and fax it to the CM Unit at (925) 252-2609.



Podiatry Authorizations

Please note that moving forward, an initial podiatry consultation and up to 6 follow-up visits for any condition for CCHP Medi-Cal members does not require prior authorization, this excludes Commercial A, Commercial IHSS, or other Commercial products. A patient may self-refer or have a referral from their doctor.

All procedures, unless on the <u>Interactive No Authorization Required List</u> or <u>Referral Only List</u> (*linked to Provider Manual, reference pg 21*), still require a prior authorization. All follow-up visits beyond 7 for the same condition still require prior authorization.

If you have any questions, please email CCHPauthorizations@cchealth.org.

Inspiring Communities Provides Diabetes Programs for CCHP members

Inspiring Communities is a nonprofit organization located in West Contra Costa County, which has been accredited by the American Diabetes Association and recognized as a diabetes prevention provider (DPP) by the Center for Disease Control and Prevention (CDC). In 2019, the Department of Health Care Services (DHCS) announced that all Managed Care Plans must cover the Diabetes Prevention Program (DPP) as a Medi-Cal covered benefit and make it available for all eligible members. Inspiring Communities would like to help your patients with the three programs they currently provide. This agency has provided services for over 300 participants. Currently, all programs are being offered virtually due to COVID-19 and their classes are scheduled and conducted with a minimum of ten participants. They are seeking your support in providing these services to the CCHP members and for Contra Costa County. The following three services are available:

- Diabetes Prevention (DPP): a yearlong program covering a total of 24 sessions;
- Medicare Diabetes Prevention Program (MDPP): a 12 months/24 sessions and also provides additional 6 months/6 sessions for maintenance; and
- Diabetes Self-Management and Support (DSMES): provides up to 8 hours education the first year and 2 hours the following year for support. (Provider Referral is required).

How can CCHP Providers refer your patients to our programs? As a CCHP Provider you can send your referrals by using ccLink (search and choose Inspiring Communities) or by using the referral form and faxing it to (510) 255-5196. The Diabetes Prevention Program Referral Form and Program Flyer can be found on our website https://cchealth.org/healthplan/providers/ in the Forms and Resources section. Once a referral is received by our agency, Minda Chai, Diabetes Prevention Program Coordinator, will contact your patient to review their program and finalize the enrollment process.

If you have additional questions, please contact Minda by email at mchai@inspiringcommunities.org or by phone at (510) 609-6836.



Initial Health Assessment

The performance of an Initial Health Assessment (IHA) is essential for Primary Care Providers (PCPs) to complete in order to develop a complete picture of the member's health status in order to formulate a plan of care based on the patient's acute, chronic, and preventive health care needs. All components of the IHA must be completed within 120 days of member enrollment with CCHP.

According to the Department of Health Care Services (DHCS), the required IHA includes:

- A complete physical, mental health exam, and a comprehensive medical history including a complete social history (History and Physical).
 - If the H&P is not completed as required, then the reasons for this (e.g. member declined or appointment was missed, etc.) and efforts to reschedule should be documented in the medical record.
- An Individual Health Education Behavioral Assessment (IHEBA), such as the DHCS-approved Staying Healthy Assessment (SHA), should be completed within 120 days of the member being assigned to the provider.
 - If the IHEBA/SHA is not completed, then the reasons for this and efforts to reschedule any missed appointments that interfered with the completion of the IHEBA/SHA should be documented in the medical record.
- The provision of appropriate preventive services in accordance with the United States Preventive Screening Task Force (USPSTF) A and B recommendations.

The practitioner's signature with the date must be included on the IHEBA/SHA to indicate practitioner review of the patient's entries and so that follow-up may be done as needed. DHCS considers an IHEBA/SHA incomplete when the practitioner's signature and/or date are not found on the IHEBA/SHA.

In addition to the H&P and IHEBA/SHA, PCPs should ensure that the appropriate USPSTF screenings are conducted and that patient refusal or other reasons for them not having been done are documented in the medical record.

To review the CCHP Initial Health Assessment Tip Sheet go to: https://cchealth.org/healthplan/providers/

For additional information regarding the IHA, please refer to the following link: https://www.dhcs.ca.gov/provgovpart/Documents/AB340/AB340MediCalManagedCareScreeningTools.pdf SHA Questionnaires by Age:

https://www.dhcs.ca.gov/formsandpubs/forms/Pages/StayingHealthy.aspx

For the most current USPSTF Recommendations, please refer to the following link:

https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations/



Member Complaints and Grievances to Provider Offices

All member grievances, even those where a member does not use the term "Grievance" to complain or express dissatisfaction, must be submitted to CCHP immediately. Oral complaints at provider offices must be documented in an internal complaint form or CCHP member grievance form by the provider and forwarded *immediately* to CCHP.

The grievance form is available as an online form or as a pdf that can be downloaded and printed at https://cchealth.org/healthplan/cchp/. Grievances documented on paper may be faxed to (925) 313-6047.

Even in instances where the provider believes that they can resolve or have resolved the grievance, it must still be immediately submitted to CCHP to verify that the grievance was addressed, investigated, and resolved appropriately.

If you have any questions, please contact CCHP by e-mail at ProviderRelations@cchealth.org or by phone (925) 313-9500.

Pharmacy and Therapeutics Committee News

The CCHP P&T committee met on 3/4/2021. Updates from the meeting are outlined below:

Changes to the PDL will be effective by mid-April 2021

Updates/Announcements:

<u>Fee-For-Service Medi-Cal Carve-Out (Medi-Cal Rx) has been delayed indefinitely:</u>

The Department of Health Care Services (DHCS) is delaying the planned Go-Live date of April 1, 2021, for Medi-Cal Rx because of the need to review new conflict avoidance protocols submitted by Magellan Health, Inc. (Magellan), the project's contracted vendor. In January 2021, Centene Corporation announced that it plans to acquire Magellan. Centene operates – through subsidiaries – managed care plans and pharmacies that participate in Medi-Cal. This transaction was unexpected and requires additional time for exploration of acceptable conflict avoidance protocols to ensure that there will be acceptable firewalls between the corporate entities to protect the pharmacy claims data of all Medi-Cal beneficiaries, and to protect other proprietary information. DHCS anticipates providing further information in May.

Quick reference table for all changes to the Preferred Drug List (PDL) and/or Prior Authorization (PA) criteria: (for full details of each change, please see individual drugs listed below this table)

Changes Made	<u>Drug Name</u>
Created new PA criteria:	Cosentyx (secukinumab)
Modified PA criteria:	benralizumab (Fasenra), dupilumab (Dupixent) and meprolizumab (Nucala)
	Cystic Fibrosis Agents (Pulmozyme, TOBI, Kalydeco)
	ESA Agents
	evolocumab (Repatha)
	Antifibrotic Respiratory Tract Agents (Ofev, Esbriet)
	omalizumab (Xolair)
	Pulmonary Arterial Hypertension Agents
ADDED to the CCHP formulary:	Entresto (sacubitril-valsartan) quantity limit #60 per 30 days for all strengths
	baclofen 5mg oral tablet with quantity limits #90 per 30days
	clindamycin 75 mg/5 mL oral solution is no longer restricted by age
	prasugrel 5 mg, 10 mg tablet quantity limit #30 per 30 days
	fosinopril 10 mg, 20 mg and 40 mg tablet
	quinapril 5 mg, 10 mg and 20 mg tablet
	trandolapril 1 mg, 2 mg and 4 mg tablet
	telmisartan 20 mg, 40 mg and 80 mg tablet
	quinapril- hydrochlorothiazide 10 mg-12.5 mg, 20 mg-12.5 mg and 20 mg-25 mg tablet
	clopidogrel 300 mg tablet Quantity Limit #2 per 30 days

Pharmacy and Therapeutics Committee News

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Removed from CCHP formulary:	carbidopa-levodopa-entacapone (Stalevo) 37.5mg-150mg-200mg,
	25mg-100mg-200mg, 12.5mg-50mg-200mg tablets
	benztropine injection solution
	eptifibatide IV solution
	Aggrastat IV
	papaverine injection solution
	enalaprilat IV solution
	trandopril-verapamil 2mg-180mg ER, 1mg-240mg, 2mg-240mg,
	4mg-240mg tablet
	epoprostenol IV solution
	treprostinil IV solution
	Veletri IV solution

- <u>Newly Established criteria for Cosentyx (secukinumab)</u>: requires a trial and failure of Enbrel and Humira for all indications. (Topical therapeutics, systemic DMARDs, and/or NSAID may also be required, which is dependent on indication)
- <u>Modification of criteria for benralizumab (Fasenra), dupilumab (Dupixent), meprolizumab (Nucala):</u> consolidation of criteria. Dupixent will no longer require systemic therapy for atopic dermatitis
- Modification of criteria for Cystic Fibrosis Agents (Pulmozyme, TOBI, Kalydeco): remove requirements for labs such as FEV1, liver transaminase level, bilirubin
- Modification of criteria for ESA Agents: Update lab requirements according to ASCO guidelines
- Modification of criteria for evolocumab (Repatha): requires trial and failure of ezetimibe
- Modification of criteria for Antifibrotic Respiratory Tract Agents (Ofev, Esbriet): New criteria for new indications such as Chronic Fibrosing ILDS with progressive phenotype
- <u>Modification of criteria for omalizumab (Xolair)</u>: Immunotherapy no longer required; New criteria for nasal polyps requires trial and failure of corticosteroids and saline irrigations
- Modification of criteria for Pulmonary Arterial
 Hypertension Agents: consolidation of criteria.
 Pregnancy tests and documentation of medical records no longer needed



Pharmacy and Therapeutics Committee News

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:



- Open the Epocrates application on your mobile device.
- Click on the "formulary" button on the home screen.
- Click "add new formulary" button on the bottom of the screen.
- Use the search box to locate "Contra Costa Health Plan" Medi-Cal or Commercial formulary. Click on each formulary that you would like to add, and then click the "add formulary" button.

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 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 x1, or via the email listed below:

P&T updates and DUR educational bulletins can be viewed online at http://cchealth.org/healthplan/provider-pharmacy-therapeutics.php

Questions and comments may be directed to CCHP Pharmacy by emailing joseph.cardinalli@cchealth.org

DHCS Medi-Cal Rx Delay

The Department of Health Care Services (DHCS) is delaying the planned Go Live date of April 1, 2021 for Medi-Cal Rx because of the need to review new conflict avoidance protocols submitted by Magellan Health, the project's contracted vendor.

DHCS anticipates providing further information in May. Please note that DHCS will be working to update and/or remove, as applicable, provider guidance and associated Medi-Cal Rx provider bulletins/Newsflash articles in the coming weeks to reflect this change.

For additional information regarding this transition, billing, and to Register for training please go to: https://medi-calrx.dhcs.ca.gov/home/education

Major Update to Facility Site Review and Medical Record Review Audit Tools

The Department of Health Care Services (DHCS) has updated the site review process, including Facility Site Review (FSR) and Medical Record Review (MRR) tools and policies. These updates were scheduled to become effective beginning July 1, 2020, however, due to the public health emergency (PHE) related to COVID-19, the use of the new tool has been postponed. The new tool will become effective six months after the PHE has ended, at which point, all site reviews will use the updated criteria and standards when scoring an FSR or an MRR.

State law requires Contra Costa Health Plan (CCHP) to provide adequate facility and service site locations available to meet the contractual requirements for the delivery of primary care. All Primary Care Provider (PCP) sites must have the capacity to support the safe and effective provision of primary care services. To ensure compliance, CCHP is required to perform initial and subsequent site reviews every three years, consisting of an FSR and an MRR, using the updated DHCS FSR and MRR tools and standards. The FSR confirms the PCP site operates in compliance with all applicable local, State, and Federal laws and regulations. MRRs are conducted to review medical records for format, legal protocols, and documented evidence of the provision of preventive care and coordination and continuity of care services.

Below is a **sampling of the more substantial updates** to the FSR and MRR tools that will be used to audit PCP sites. Some criteria have been augmented from the previous version of the tools, while other criteria consist of existing guidelines that are new to the FSR and MRR tools. Language that is new to the tool appears in bold. To view the full version of the new tool, visit https://cchealth.org/healthplan/provider-fsr-tool.php.

Facility Site Review Tool - Sample of new items

- I. Access and Safety Criteria
 - Fire Fighting Equipment in accessible location
 - An employee alarm system
 - Airway management: oxygen delivery system, nasal cannula or mask, bulb syringe and Ambu bag
 - Emergency medicine such as asthma, chest pain, hypoglycemia and anaphylactic reaction management: Epinephrine 1:1000 (injectable), and Benadryl 25 mg. (oral) or Benadryl 50 mg./ml. (injectable), Naloxone, chewable Aspirin 81 mg, Nitroglycerine spray/tablet, bronchodilator medication (solution for nebulizer or metered dose inhaler), and glucose. Appropriate sizes of ESIP needles/syringes and alcohol wipes

II. Personnel Criteria

- Site has a procedure in place for confirming correct patient/medication/vaccine dosage prior to administration
- There is evidence that site staff has received training on the following: Cultural and linguistics
- III. Office Management Criteria
 - Medical records are retained for a minimum of 10 years
- IV. Clinical Services Criteria:
 - Pharmaceutical Services Criteria
 - Has a written plan for vaccine protection in case of power outage or malfunction of the refrigerator or freezer
 - Site utilizes California Immunization Registry (CAIR) or the most current version.

Major Update to Facility Site Review and Medical Record Review Audit Tools... Continued

VI. Infection Control Criteria

- Staff adheres to site-specific policy and/or manufacturer/product label directions for the following procedures:
 - Cold chemical sterilization/high level disinfection:
 - Confirmation from manufacturer item (s) is/are heat-sensitive.
 - Appropriate PPE is available, exposure control plan, MSDS and clean up instructions in the event of a cold chemical sterilant spill.

Medical Record Review Tool – Sample of new items

I. Format Criteria

- Person or entity providing medical interpretation is identified
- Signed Copy of the Notice of Privacy

III. Documentation Criteria

- Appropriate consents are present:
 - Consent for treatment

IV. Pediatric Preventive Criteria Well-child visit

- Alcohol/Drug Misuse: Screening and Behavioral Counseling
- Anemia Screening
- Autism Spectrum Disorder Screening
- Blood Pressure Screening
- Dental Assessment
 - Dental Home
 - o Fluoride Supplementation
 - o Fluoride Varnish
- Depression Screening
 - Maternal Depression Screening
- Developmental Surveillance
- Dyslipidemia Screening
- Folic Acid Supplementation
- Hepatitis B Screening
- HIV Screening
- Intimate Partner Violence Screening
- Nutrition assessment/Breast Feeding support
- Obesity Screening
- Psychosocial/Behavioral Assessment Sexual Activity Assessment
 - Contraceptive Care
 - STI screening on all sexually active adolescents, including chlamydia, Gonorrhea, and Syphilis
- Skin Cancer Behavior Counseling
- Tobacco Products Use: Screening and Prevention and Cessation Services

V. Adult Preventive Criteria Adult Preventive Care Screenings

- Abdominal Aneurysm Screening
- Alcohol/Drug Misuse: Screening and Behavioral Counseling
- Depression Screening
- Diabetic Screening
 - Comprehensive Diabetic Care
- Dyslipidemia Screening
- Folic Acid Supplementation
- Hepatitis B Screening
- Hepatitis C Screening
- High Blood Pressure Screening
- HIV Screening
- Intimate Partner Violence Screening
- Lung Cancer Screening
- Osteoporosis Screening
- STI screening on all sexually active adolescents, including chlamydia, Gonorrhea, and Syphilis
 - Sexually Transmitted Infections Counseling
- Skin Cancer Behavior Counseling
- Tobacco Use Counseling and Interventions

AHi Solutions – Respiratory Products and Services

AHi Solutions has a singular goal; to provide your facility, and your patients with respiratory products and services that are unparalleled. Working with health care professionals and the public, the staff of AHi Solutions has built a life-impacting sleep medicine program through education, diagnosis, and the treatment of sleep disorders that interfere with people's ability to live vital lives. Devoted to the comprehensive acquisition, interpretation, treatment, and reporting of polysomnographic (sleep) data, AHi Solutions stands alone as the only Nationally Accredited Sleep Diagnostic Center conducting attended sleep studies (in-lab), ambulatory sleep studies (home & facility), Overnight Pulse Oximetry, and the delivery of cost-effective treatment options to any medical facility or Patient's home.

Centrally located on Oakland's Pill Hill (29th & Summit), AHi Solutions is BART accessible and a positive option for the West County Community. The central location also allows for the rapid delivery and personal instruction of ambulatory sleep test, CPAP, Bi-PAP, and ventilation devices and supplies to any location in Contra Costa County.

AHi Solutions staff is available to patients and providers M-F 9am – 3pm by calling (510) 835-5050.

Referrals for both Sleep Diagnostic and Equipment delivery & instruction can be faxed to (510) 835-5023 or emailed to medlabassist@ahisolutions.net.







DirectDerm - Expert Skin Care Services



"Direct**Derm** brings expert skin care directly to patients wherever they may be. Our leading, board-certified dermatologists provide diagnosis, treatment, and follow-up care for all skin conditions, from the common to the complex, including rashes, skin growths, hair and nail problems, and skin cancers. Our patients get accurate answers right away because healthy skin and peace of mind are what we're all about."

David Wong, M.D., Ph.D., FAADDirect**Derm CEO**

To learn more about Direct**Derm** please visit <u>directderm.com</u> or email Eliana Waggoner the Direct**Derm** Provider Relations Manager at <u>Eliana.Waggoner@directderm.com</u>.

The Customer Service Department for providers and members can be reached at (855) 944-7546.

Credentialing Update

Great news! CCHP has contracted with the Council for Affordable Quality HealthCare (CAQH) to automate and streamline our credentialing process. CAQH Proview assists providers with completing an electronic credentialing application at <u>no cost to the providers</u> and will help eliminate duplicative paperwork with any organizations that require your professional and practice information for credentialing and recredentialing.

Beginning May 1, 2021, CCHP encourages all providers to enroll in CAQH to streamline the credentialing process.

If you already have a CAQH ProView account, please provide us with the CAQH Provider ID when requesting to add a new provider to your group and allow CCHP access for quicker processing time. We will reply to your request with any additional documents that require provider signatures.

To access the **CAQH ProView**, follow this link: https://proview.caqh.org/PR/Registration If you have any questions, please email CCHPcredentialing@cchealth.org.

Fraud, Waste and Abuse Training Requirements

On an annual basis, CCHP is required to notify all contracted providers of the Fraud, Waste and Abuse training requirements. The Centers for Medicare and Medicaid Services (CMS) requirements for Fraud, Waste and Abuse (FWA) training for all contracted entities became effective January 1, 2009. The requirements can be found in 42 C.F.R. 422.503 (b) (4) (VI) and 42 C.F.R. 423.504 (b) (4) (VI). Accordingly, Contra Costa Health Plan (CCHP) is providing you a copy of training materials you can use to conduct FWA training to satisfy these federal requirements.

A copy of the training materials is included in our provider manual appendix H and on our website located at www.contracostahealthplan.org, under For Providers-Provider Manual-Appendix H. A hard copy of the material can be mailed upon request by e-mailing Provider Relations at ProviderRelations@cchealth.org.

CCHP views the integrity of its staff, providers, contractors and members to be paramount and uncompromising. A provider or downstream contractor may submit a potential or suspected FWA case directly to the CCHP Provider Relations Unit or CCHP Director of Compliance. Furthermore, FWA may also be reported to the Office of Inspector General at: (800) HHS-Tips or for cases involving Medicare prescription drugs, to the Health Integrity unit at: (877) 7-SafeRx. (Any such report should always contain a complete description of the incident with a reminder to staff that confidentiality of the individual reporting the fraud will be maintained.)



Easy to use Telephonic Interpreters Available for Community Provider Network!

For Regional Medical Center Network (County Providers), see instructions at the end of the article below.

Have you tried our telephonic interpreter services? They are fast and easy to use!

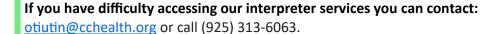
You may have a situation where you need to reach out to a non-English speaking CCHP member to:

- Schedule an appointment
- Give lab or other test results
- Offer some education over the phone, etc.

In this case you can call our interpreter services first, choose the language you need, get them on the line, give them a summary of what you need for them to interpret and then conference in the patient.

The telephonic interpreters are also available for all routine office visits, urgent care, labs, health education, pharmacy, etc.

- DIAL: 1-866-874-3972
- PROVIDE: your 6-digit (Provider Code 298935 and Mental Health Code 525970)
- **INDICATE:** the language you need or press
 - o 1 for Spanish
 - 2 for all other languages and state the name of the language you need
 - 0 for assistance if you don't know what language you need
- PROVIDE: Additional information:
 - o Patient Name
 - o Patient Date of Birth
 - Contra Costa Health Plan Member ID
 - Doctor Name
 - Doctor Phone Number
- **CONNECT:** to an interpreter, document his/her name and ID number in patient's chart for reference. Summarize what you wish to accomplish and give any special instructions.



For more details on all our interpreter services go to our website at:

https://cchealth.org/healthplan/provider-interpretation.php

Regional Medical Center Network Providers

County Providers have a different vendor for interpreter services called Health Care Interpreter Network. Do not use instruction above. HCIN video monitors and phones are available in all county facilities. If you need assistance contact clinic manager or Language Access Manager - Sally McFalone Sally.McFalone@cchealth.org or call (925) 313-6242.



Help for Adverse Childhood Experiences in COVID-Time

In case you missed it: **How ACEs Aware Training can support providers and patients during COVID-19** February webinar is now available:

WATCH NOW at ACEsAware.org

Other webinars offered by ACEs such as **Biology of Stress: How ACE Screening Can Reveal and Mitigate ACE**— **Associated Health Conditions**can be found here:



https://www.acesaware.org/heal/educational-events/

World TB Day - March 24

March 24 is World TB Day, an annual event that commemorates the announcement in 1882 of Dr. Robert Koch's identification of M. tuberculosis as the causative agent of TB. In our current moment, as we collectively confront the challenges of the COVID-19 pandemic, it is worth remembering the context in which Koch made his profound discovery. In the 1880s, average life expectancy in the U.S. was 39 years. In 1900, an estimated 450 Americans, most aged 15-44, died of tuberculosis each day. Although the impact of Koch's work in bacteriology was seismic, the first antibiotic treatments for TB were still more than 50 years away.

The global response to the latest emerging infectious disease, COVID-19, highlights a universal truth – public health interventions and comprehensive safety nets are essential to community health. TB and COVID-19 are both caused by respiratory pathogens; controlling them will demand the same commitment to support new interventions, accessible diagnostics, preventive vaccines, treatment innovations, and the public health infrastructure needed to investigate, respond to, and contain outbreaks.

On World TB Day 2021, we take a moment in the current storm to recognize our health care colleagues – past, present, and future – who play a central role in protecting our health and safety. If you are a TB physician, nurse, outreach worker, researcher, epidemiologist, or administrator, you follow in the legacy of Robert Koch. Whether your "frontline" is currently a TB clinic, a primary care office, an ER, or an ICU, you are a champion – when the world is paying attention, and when it is not.

On March 24, and every day, you humble and inspire us. We thank you, one and all.

Contra Costa County Public Health TB Control is pleased to share with you important information about how we, along with the help of our community partners, healthcare providers and client families, control and strive to eliminate TB in our county. Our 2020 reports on Tuberculosis in Contra Costa County can be found here: https://cchealth.org/healthplan/providers/

- DHS Letter 1/7/21 COVID-19 mRNA vaccines and tests used for TB infection
- TB & COVID-19
- TB in California: 2020 Snapshot
- TB in Contra Costa County: 2020 Snapshot

Additional information may also be found at <u>cchealth.org/tb/</u> or you may call the TB Control program directly at (925) 313-6740 with questions.

2021 Virtual Provider CME Programs from Shriners Hospital

Shriners Hospital is excited to announce their 2021 Virtual Provider Continuing Medical Education (CME) series! Their mission is to improve the lives of children by offering outstanding education programs for medical professionals. This year, they are offering monthly CME webinars at **no cost to you**.

Please scroll through their webpage to see a full list of webinars available: 2021 Virtual Provider CME Program - Shriners Hospital for Children (shrinerschildrens.org)

Here are just a couple webinars you may be interested in:

Torticollis and Early Onset Scoliosis - What Every Pediatric Provider Needs to Know

Virtual Provider Continuing Medical Education (CME)
Program



Category:

Orthopedic

Topic:

Torticollis and Early Onset Scoliosis - What Every Pediatric Provider Needs to Know

Registration:

https://bit.ly/3qbwsPW 3

Date:

May 17

Time:

6-7 p.m.

Who Should Attend:

Pediatricians, PCPs, Orthopedic Specialists, RNs, School-Based Nurses

Constipation and Motility testing – What Every Pediatric Provider Needs to Know

Virtual Provider Continuing Medical Education (CME) Program



Category:

Pediatric Surgery

Topic:

Constipation and Motility testing - What Every Pediatric Provider Needs to Know

Registration:

https://bit.ly/3sJ8BsJ 3

Date:

June 16

Time:

6-7 p.m.

Who Should Attend:

GI Specialists, Colorectal Surgeons, Pediatricians, PCPs, RNs, School-based Nurses



Welcome Community Provider Network (CPN) Providers

Primary Care Providers

Arthur Lande, MD	Pediatrics	LifeLong Medical Care, San Pablo	
Shahida Malik, MD	Family Medicine	LifeLong Medical Care, San Pablo	
Carmen Yung, NP	Family Medicine	LifeLong Medical Care, Berkeley	

Specialty Care Providers

Malcolm Johnson, MD	Wound Care	CEP America - AUC PC, Walnut Creek
Kathryn Welty, MD	Nephrology	Chabot Nephrology Medical Group, Castro Valley
Qi Che, MD	Nephrology	Chabot Nephrology Medical Group, Fremont, Hayward
Clifford Wong, MD	Nephrology	Chabot Nephrology Medical Group, Hayward, Fremont
Anne Yu, MD	Nephrology	Chabot Nephrology Medical Group, San Leandro, Castro Valley
Gwendolen Chang, MD	Nephrology	Chabot Nephrology Medical Group, San Leandro, Oakland
David Wong, MD	Dermatology	Direct Dermatology Pofessionals P.C, Manteca, Redwood city, Salinas
Reza Kafi, MD	Dermatology	Direct Dermatology Pofessionals P.C, Manteca, Salinas
Eon Rios, MD	Dermatology	Direct Dermatology Pofessionals P.C, Manteca, Salinas
Karthik Mikkineni, MD	Surgery - Vascular	East Bay Cardiovascular and Thoracic Associates, Danville, Concord
Emily Yuen, OD	Optometry	East Bay Ophthalmology, Pinole
Elaine Lee, MD	Surgery - General	Epic Care, Emeryville, Oakland
Robert Greenberg, MD	Dermatology	Golden State Dermatology Associates, Inc., Livermore, San Ramon
Armand McKeller, DNP	Lifestyle Coach	Inspiring Communities, Richmond
Sara Gamble, PT	Physical Therapy	JMPN - Rossmoor Outpatient Center, Walnut Creek
Steven Garske, PT	Physical Therapy	JMPN - Rossmoor Outpatient Center, Walnut Creek
Allison Gillies, OT	Occupational Therapy	JMPN - Rossmoor Outpatient Center, Walnut Creek
Eric Martineau, DPT	Physical Therapy	JMPN - Rossmoor Outpatient Center, Walnut Creek
Phyllis Edwards, PT	Physical Therapy	John Muir Physician Network, Walnut Creek
Linda Monroe, PT	Physical Therapy	John Muir Physician Network, Walnut Creek
Lori Sweet, PT	Physical Therapy	John Muir Physician Network, Walnut Creek
Trisha Walters, DPT	Physical Therapy	John Muir Physician Network, Walnut Creek
Mary Ann Lacson, PT	Physical Therapy	Muir Orthopaedic Specialists, Brentwood
Kristin Ashimoto, DPT	Physical Therapy	Muir Orthopaedic Specialists, Walnut Creek
Caitlin Mondt, DPT	Physical Therapy	Muir Orthopaedic Specialists, Walnut Creek
Matthew Nobusada-Flynn, DPT	Physical Therapy	Muir Orthopaedic Specialists, Walnut Creek
Jenna Paynter, DPT	Physical Therapy	Muir Orthopaedic Specialists, Walnut Creek
Alyssa Bernat, PA	Mid-level - Orthopaedic Surgery Assistant	Muir Orthopaedic Specialists, Walnut Creek, Brentwood
Erl Bressette, PT	Physical Therapy	Spine and Sports Physical Therapy, Concord
Tamera Rennaker, RN	Lactation Consultant	Tamera Rennaker, Concord

Welcome Community Provider Network (CPN) Providers



Applied Behavior Analysts

Mary Wong, BCBA	Qualified Autism Provider	Adapt A Behavioral Collective, Inc., San Francisco
Amanda Steiner, BCBA-D	Psychology, Qualified Autism Provider	Autism Center of Northern California, San Francisco
Jose Hernandez, RBT	Qualified Autism Professional	Autism Intervention Professionals, Fremont
Octavio Pena, RBT	Qualified Autism Professional	Autism Intervention Professionals, Fremont
Oscar Silva, BCBA	Qualified Autism Provider	Behavior Treatment and Analysis, Inc, Walnut Creek
Cheyanne Young, BA	Qualified Autism Professional	Center for Autism and Related Disorders, LLC, Antioch
Kristen Sorenson, BCBA	Qualified Autism Provider	Center for Autism and Related Disorders, LLC, Brentwood
Veronica Barnett, BTL1	Qualified Autism Paraprofessional	Center for Social Dynamics, Alameda, Martinez
Myron Brown, BTL1	Qualified Autism Paraprofessional	Center for Social Dynamics, Alameda, Martinez
Jimena Camero Pat, BTL1	Qualified Autism Paraprofessional	Center for Social Dynamics, Alameda, Martinez
Jennefer Cerna, BTL1	Qualified Autism Professional	Center for Social Dynamics, Alameda, Martinez
Camille Flores, BTL1	Qualified Autism Paraprofessional	Center for Social Dynamics, Alameda, Martinez
Aliyah Gonzales, BTL1	Qualified Autism Paraprofessional	Center for Social Dynamics, Alameda, Martinez
Jazmin Martir, BTL1	Qualified Autism Paraprofessional	Center for Social Dynamics, Alameda, Martinez
Kenya Matthews, BTL1	Qualified Autism Paraprofessional	Center for Social Dynamics, Alameda, Martinez
Karlana Rivera, MS	Qualified Autism Provider	Center for Social Dynamics, Alameda, Martinez
Edward Trujano, M.Ed.	Qualified Autism Provider	Center for Social Dynamics, Alameda, Martinez
Erika Ortiz, BCBA	Qualified Autism Provider	Centria Healthcare Autism Services, Walnut Creek
Hannah Andreotti, RBT	Qualified Autism Paraprofessional	Gateway Learning Group, Concord
Debadrita Bhattachayra, RBT	Qualified Autism Professional	Gateway Learning Group, Concord
Joel Brassea, RBT	Qualified Autism Provider	Gateway Learning Group, Concord
Tiana Barrios, BCBA	Qualified Autism Provider	Juvo Autism and Behavioral Health Services, Concord
Sean Kleiman, BCBA	Qualified Autism Provider	Positive Behavior Supports Corp, San Francisco
Lydia Wattigny, BCBA	Qualified Autism Provider	Positive Pathways LLC, San Francisco

Mental Health Providers

Lyndsay Dell, Psy.D	Neuropsychology	Diablo Valley Neuropsychology, Pleasant Hill
Danielle Marchman, LCSW	Clinical Social Work	LifeLong Medical Care, Richmond



Welcome Community Provider Network (CPN) Providers

Facilities

Walnut Creek BASS- Contra Costa Sleep Center CardioNet, LLC San Francisco CardioNet, LLC Malvern San Francisco City Wheelchairs DaVita - Alvarado Park Home Training San Pablo Healthflex Home Health Services Oakland **Inspiring Communities** Richmond **New Start Recovery Solutions** Concord Restore Orthotics & Prosthetics and TotalCare Yuba City Restore Orthotics & Prosthetics and TotalCare Fresno Restore Orthotics & Prosthetics and TotalCare Vacaville Sojourn Hospice & Palliative Care - East Bay LLC Pleasanton Yosemite Pathology Medical Group, Inc. Modesto

Welcome Contra Costa Regional Medical Center (CCRMC) Providers

Amr Beltagui, MD	Psychiatry	
Sharmila Chatterjee, MD	Family Medicine	
Durga Deshpande, MD	Pediatrics	
Vuthy Jenkins, FNP	Family Medicine	
Carolina Klein, MD	Psychiatry	
Kathryn Langham, MD	Psychiatry	
Meng Lee, OD	Optometry	
Jennifer McQuade, MD	Psychiatry	
Esther Molnar, MD	Infectious Disease	
Benjamin Rayikanti,	Anesthesiology	
Katherine Roberts, MD	Psychiatry	
Sunil Rohira, MD	Anesthesiology	
Samuel Samuel, MD	Psychiatry	
Jasbir Singh, MD	Psychiatry	
Alexander Trope, MD	Psychiatry	



THE BULLETIN BOARD



Attention: Provider Network Trainings

Meeting Dates:

April 27, 2021 July 27, 2021 October 26, 2021

Times and Location:

This meeting will be held via Zoom.

There are 3 timeslots to choose from: 7:30 AM – 9:00 AM 12:00 PM – 1:30 PM 5:00 PM – 6:30 PM

RSVP: Send an email to Vanessa.Pina@cchealth.org

Visit our website for resources:

www.cchealth.org/healthplan/providers

CCHP Provider & Pharmacy
CCHP Electronic Provider Directory
CCHP Preferred Drug List (PDL)
CCHP Provider Manual
CCHP Provider Web Portal
Prior Authorization Forms
Clinical and Preventive Guidelines
No Prior Authorization List

Uninsured individuals: www.cchealth.org/insurance

FREE ccLink Provider Portal



Using any computer at any time, this free web-based tool allows you to:

- Check your patients' eligibility and insurance information,
- Submit appeals,
- Look up claims or referrals, or view your patients' records

To sign up for access to the ccLink Provider Portal, complete the Portal Access Agreement located on this web page: https://cchealth.org/healthplan/ providers/ and download the PDF under the ccLink logo (right side of screen).

For questions regarding ccLink, please email CCHPportalsupport@cchealth.org.

HOLIDAYS OBSERVED BY CCHP

May 31 Memorial Day

July 5 Independence Day

September 6 Labor Day 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 Option 1.

ACCREDITED

Health Call Center
Expires 12/01/2020

urac

Non-Medical Transportation from CCHP 855-222-1218

Electronic Claim Submissions

Enroll in CCHP's EDI program so you can send claims and receive payments electronically.

For more information, email: EDlsupport@cchealth.org



CCHP Directory

595 Center Ave. Suite 100 Martinez, CA 94553 www.cchealth.org



Provider Online Forms and Resources—https://cchealth.org/healthplan/providers/

Authorization Department / Hospital Transition Nurse

■ Phone: (877) 800-7423, option 3

• Prior Authorization Requests—Please use the ccLink Provider Portal for all communication with the following exceptions:

Medi-Cal Member:

♦ Inpatient (Hospital)/Face Sheet:
 ♦ Mental Health:
 Fax: (925) 313-6645
 Fax: (925) 313-6196

Commercial Member:

♦ Confidential Mental Health: Fax: (925) 313-6196

■ Email Auth Questions (do not email auth requests): <u>CCHPauthorizations@cchealth.org</u>

Claims Department

Phone: (877) 800-7423, option 5
 Email Claims Questions: ClaimStatus@cchealth.org

Email Appeals Questions:
 Appeals@cchealth.org

■ Email Claim Disputes: <u>ProviderDispute@cchealth.org</u>

Email Electronic Claims/Payments (EDI program)
 EDIsupport@cchealth.org

Facility Site Review Department

■ Email: <u>CCHPfsr@cchealth.org</u>

Interpreter Services

• Phone: (877) 800-7423, option 4

Member Eligibility and Primary Care Physician Assignment

■ Phone: (877) 800-7423, option 1

ccLink Provider Portal (web based eligibility checks) www.cchealth.org/

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:
 Email Contract Related Questions:
 Email Credentialing Related Questions:
 Email Credentialing Related Questions:

ProviderRelations@cchealth.org
CCHPcredentialing@cchealth.org

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