Low Income Health Program (LIHP) Changes

The Low Income Health Program (LIHP) encompasses the Medi-Cal Expansion (MCE) and Health Care Coverage Initiative (HCCI) program. The goals of the program are to improve access to high quality health care and health outcomes of low-income uninsured residents without other sources of care. Contra Costa Health Plan administers the services for the recipients of the programs, with care limited to that being provided at the Contra Costa Regional Medical Center (CCRMC), the eight County Health Centers and the FQHC sites of Brookside Community Health Centers and La Clinica de la Raza. The programs are available to: individuals between the ages of 19-64 and not eligible for any other coverage, US citizens or legal residents residing in Contra Costa County, and having an income between 100% - 133% of the Federal Poverty Level (FPL) for the MCE program or 134% - 200% FPL for the HCCI program.

As of July 1, 2011, the state has approved reimbursement for emergency transportation, emergency room care and post stabilization at a non CCRMC facility for recipients covered under the MCE program. However no changes have been made for recipients covered under HCCI. Emergency services for members of the MCE program will be reimbursed at 30% of the Medi-Cal rate. This is significant as previously emergency care and emergency transportation provided outside of CCRMC was not reimbursed. If you have any questions, please call Provider Relations at 925-313-9500 or e-mail

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<thead>
<tr>
<th>Medi-Cal Expansion Program</th>
<th>Health Care Coverage Initiative Program</th>
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<tr>
<td><strong>MCE</strong></td>
<td><strong>HCCI</strong></td>
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<td>• Resident of Contra Costa County</td>
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<td>• Contra Costa Regional Medical Center and the eight County Health Centers</td>
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<td>Covered:</td>
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<td>• Emergency transportation</td>
<td>• Emergency care at Contra Costa Regional Medical Center only</td>
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<td>• Emergency room and professional services</td>
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<td><strong>Rate of Reimbursement</strong></td>
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<td>30% of Medi-Cal rate</td>
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HEDIS 2011

We have completed another HEDIS season! This year we brought the chart review process in-house, saving a lot of money and getting better data. Most measures improved over the prior year. Contra Costa Health Plan had three measures above the statewide 90th percentile and no measures below the State’s Minimum Performance Level. We improved on 15 of the 21 measures.

CCRMC had five measures above the 90th percentile, but also two below the 25th percentile. Here are some areas where the CCRMC did especially well and some areas where we can use your help to raise our performance.

Improvements for 2011

The following are above the Medi-Cal 90th percentile:
- Pediatric BMI percentile and Nutritional Counseling
- No imaging for lower back pain
- Early childhood immunization
- Nephropathy Screen or Treat for Diabetics

Where we need help

- Avoidance of Antibiotics in Adults with Acute Bronchitis
  This measure is by administrative data only.
  ° If you are prescribing antibiotics
    Please consider whether another diagnosis would be more appropriate than acute bronchitis.
    If there are comorbid conditions that would exclude the patient from this measures, please be sure to document them (e.g. chronic bronchitis, emphysema, chronic obstructive asthma).
    If there are “competing diagnoses” that would remove the patient from this measure, please be sure to document them (e.g. acute sinusitis, acute pharyngitis, pneumonia, UTI, acne).

- Appropriate Testing for Children with Pharyngitis
  If antibiotics are prescribed, a Strep A test required.
  Any throat swab billed will suffice, including rapid Strep test.
  This measure is by administrative data only.

- BP control in diabetes patients (<140/90)

- Timely Prenatal and Postpartum Care
  Prenatal: OB visit in first trimester (or within 42 days of enrollment). Can be PCP if there is evidence of prenatal care and testing, not just diagnosis of pregnancy. Postpartum: OB or PCP visit 3-8 weeks after delivery

- Cervical Cancer Screening
  Ages 21-64
  Every three years
Pharmacy and Therapeutics Update

The Pharmacy and Therapeutics committee at CCHP reviewed the efficacy, safety, cost and/or utilization of the following therapeutic categories/medications at the meeting. The changes are expected to be effective the week of October 15th, 2011.

<table>
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<tr>
<th>Atypical Antipsychotics</th>
<th>Fibromyalgia meds</th>
<th>Topical Androgens</th>
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<tr>
<td>Non-stimulant meds for ADHD</td>
<td>Edurant/ Complera</td>
<td>OxyContin</td>
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The committee approved **addition** of the following to the Preferred Drug List (formulary):
- Savella with step therapy. (see below)
- Edurant, Complera.
- Clarification: tablet-splitting for 40mg rosuvastatin is allowed (but will not process for new patients without recent preferred statin).

The committee approved **deletion** of the following to the Preferred Drug List (formulary):
- Lyrica …..those already on Lyrica or Cymbalta will be allowed to continue (grandfathered).

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

For Savella, a trial of gabapentin at a minimum dose of 1800mg for a minimum of 30 days
No changes were made for ADHD meds.

Latuda for schizophrenia was discussed and was deferred, pending review by CCHS Mental Health.

For December:
- agents for diabetes will be reviewed again
- agents for chronic pain including utilization, cost, and efficacy of methadone and oxyContin
- topical androgens vs. oral and parenteral

SPD Transition

- In June, CCHP started accepting enrollment of Medi-Cal Seniors and Persons with Disabilities (SPDs). Previously these patients were covered under Fee-For-Service Medi-Cal. CCHP has setup a special transition period to allow these SPDs to **continue on non-formulary medications**, for up to 90 days post enrollment, and use of non-contracted pharmacies for up to 30 days. CCHP is asking providers and patients to switch to preferred agents as soon as possible and not wait the full 90 days.

CCHP will notify providers when their new SPD patient is on a CCHP non-formulary medication. Providers should promptly switch their patients over to a CCHP formulary agent or submit a prior authorization. Since CCHP will get new SPD enrollments at the beginning of each month over the next 12 months, some providers can expect to receive letters each month for their new SPD enrollees.

Patients will also receive letters from CCHP if they are using a non-contracted pharmacy. The letter will explain the need to use a contracted pharmacy and how to transfer their prescriptions to another pharmacy.
SelectCare Update

We are sorry to inform our providers that SelectCare, our Medicare Special Needs program for patients who are dually eligible for Medicare and Medi-Cal will be closing December 31. This promising program will end due to the continued reduction in CMS rates. The good news is the possibility that many of those members will stay with the Health Plan with their Medi-Cal coverage. For our Primary Care Providers who are currently providing services for SelectCare patients, we will notify you again and remind you that if you continue to see these patients after Jan 1, 2012, you should bill regular Medicare as the prime carrier and CCHP as secondary.
As you may recall, we published new Medi-Cal and Medicare bariatric surgery guidelines in 2009. We are reprinting the article with updated weblinks. The Contra Costa Health Plan (CCHP) follows Medicare guidelines for Medicare and commercial members; and Medi-Cal guidelines for Medi-Cal members and BHC/HCI/MCE recipients. Additionally, CCHP must refer Medicare and Medi-Cal members to a CMS approved Center of Excellence that is contracted by CCHP. Highlights from both guidelines are noted below:

**Medicare** covers bariatric surgery with these limitations:

Open and laparoscopic Roux-en-Y gastric bypass (RYGBP), open and laparoscopic Biliopancreatic Diversion with Duodenal Switch (BPD/DS), and laparoscopic adjustable gastric banding (LAGB) are covered for members who have a body mass index \( \geq 35 \), have at least one co-morbidity related to obesity, and have been previously unsuccessful with medical treatment for obesity.

**Indications**
1. Body Mass Index (BMI) must be equal to or greater than 35, and
2. At least one co-morbidity related to obesity such as diabetes or hypertension must be present, and
3. There was previously unsuccessful medical treatment of obesity.

Medicare does **not cover**:
1. Gastric balloon surgery,
2. Intestinal Bypass;
3. Open adjustable gastric banding;
4. Open and laparoscopic sleeve gastrectomy;
5. Laparoscopic vertical banded gastroplasty; or
6. Treatment for obesity with BMI < 35 or without a medical co-morbidity.

For detailed information, please go to the following Medicare weblinks:

**LOCAL Coverage Determination (northern California) guidelines for Bariatric Surgery (L28238)**  
(revision effective date 7/27/11)  
[https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx? LCDId=28238&ContrId=174&ver=28&ContrVer=1&CoverageSelection=Both&ArticleType=All&PolicyType=Final&s=California+-+Entire+State&KeyWord=bariatric+surgery&KeyWordLookUp=Title&KeyWordSearchType=And&LcdId=28238&Lcd_version=16&show=all&bc=gAAAAABAAAAA&](https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=28238&ContrId=174&ver=28&ContrVer=1&CoverageSelection=Both&ArticleType=All&PolicyType=Final&s=California+-+Entire+State&KeyWord=bariatric+surgery&KeyWordLookUp=Title&KeyWordSearchType=And&LcdId=28238&Lcd_version=16&show=all&bc=gAAAAABAAAAA&)

**NATIONAL Coverage Determination for Bariatric Surgery for Treatment of Morbid Obesity (100.1)**  
(implemented in 5/09)  
[https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=57&ncdver=3&CoverageSelection=Both&ArticleType=All&PolicyType=Final&s=California+-+Northern&KeyWord=bariatric+surgery&KeyWordLookUp=Title&KeyWordSearchType=And&ncd_id=100.1&ncd_version=3&basket=ncd%25253A100%25252E1%2525253A3%2525253ABariatric+Surgery+for+Treatment+of+Morbid+Obesity&bc=gAAAAABAAAAA&](https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=57&ncdver=3&CoverageSelection=Both&ArticleType=All&PolicyType=Final&s=California+-+Northern&KeyWord=bariatric+surgery&KeyWordLookUp=Title&KeyWordSearchType=And&ncd_id=100.1&ncd_version=3&basket=ncd%25253A100%25252E1%2525253A3%2525253ABariatric+Surgery+for+Treatment+of+Morbid+Obesity&bc=gAAAAABAAAAA&)

Tidbits continued on next page...
Tidbits from Utilization Management continued…

Medi-Cal guidelines include the following:

1. The member has a BMI of:
   a. Greater than 40, or
   b. Greater than 35 if substantial co-morbidity exists, such as life-threatening cardiovascular or pulmonary disease, sleep apnea, uncontrolled diabetes mellitus, or severe neurological or musculoskeletal problems likely to be alleviated by the surgery.
2. The member has failed to sustain weight loss on conservative regimens. Conservative and dietary treatments include low (800 – 1200) calorie and very low (400 – 800) calorie diets, behavioral modification, exercise and pharmacologic agents. Examples of appropriate documentation of failure of conservative regimens include but are not limited to:
   a. Severe obesity has persisted for at least five years despite a structured physician-supervised weight-loss program with or without an exercise program for a minimum of six months.
   b. Serial-charted documentation that a two-year managed weight-loss program including dietary control has been ineffective in achieving a medically significant weight loss.

For detailed information, please go to this Medi-Cal weblink, section Morbid Obesity: Surgical Treatment:

http://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/surgdigest_m01o03.doc
**2011-2012 Seasonal Flu Update**

CCHP encourages all PCPs to provide flu vaccine for their panel members beginning in October. The Flu Vaccine will also be available to CCHP members starting in mid-October at the regular Public Health Immunization Clinics. Schedules of clinics can be accessed at: [cchealth.org/services/immunization/clinics.php](http://cchealth.org/services/immunization/clinics.php)

There will be NO planned community flu clinics (i.e. in libraries, etc.) this year.

From Contra Costa County Public Health Department:

We recommend annual flu immunization for everyone 6 months and older, even for those who received vaccine last season. The strains included in the 2011-2012 influenza vaccine are identical to the ones used last season, including H1N1. Flu vaccine supply is adequate and no delays are anticipated.

Some additional information about 2011-2012 flu vaccine:

- Children 6 months through eight years of age who did not receive any 2010-2011 seasonal flu vaccine should receive two doses of 2011-2012 flu vaccine at least 4 weeks apart, regardless of flu immunization history prior to 2010-2011 flu season. Children 6 months through eight years of age who received one or more doses of 2010-2011 vaccine should receive one dose of 2011-2012 vaccine.
- Due to a possible elevated risk of febrile seizure, the Advisory Committee on Immunization Practice (ACIP) does not recommend administering Afluria (CSL Biotech, distributed by Merck) to children under nine years of age.
- The trivalent inactivated vaccine (TIV) vaccine information statement (VIS) states that "young children who get inactivated flu vaccine and pneumococcal vaccine (PCV13) at the same time appear to be at increased risk for seizures caused by fever." However, ACIP does not recommend administering them on separate visits or deviating from the recommended schedule as there are risks associated with delaying vaccination.
- Egg allergy severity should be assessed prior to influenza vaccination. Some persons reporting egg allergy may be able to safely receive influenza vaccine.
- There is no preference for any particular preparation or for TIV versus live attenuated influenza vaccine. Other flu vaccines offered this season include:
  - Fluzone Intradermal (Sanofi Pasteur) pre-filled syringe was licensed May 2011 for persons 18-64 years of age. The vaccine is administered intradermally using a single dose, prefilled microinjection syringe, preferably IM in deltoid.
  - Fluzone High-Dose (Sanofi Pasteur) for persons 65 years of age or older, containing four times more hemagglutinin per strain compared to other TIV preparations.
  - FluMist (MedImmune), intranasal LAIV, for healthy persons 2 through 49 years of age who are not pregnant.

For more information on the 2011-2012 influenza vaccine, please visit: [http://www.cdc.gov/flu/professionals/acip/](http://www.cdc.gov/flu/professionals/acip/)
Welcome New CCHP Providers!

Axis Community Health, PCP, Corey Cutler, FNP, Barbara Julier, MD, Meena Rijhwani, MD, Rei Masui, MD, Nurjehan Kurwa, MD, Christine Tsang, FNP, Charles White, MD

Brookside Community Health Center, PCP-Family Medicine, Vaneida White, MD,

Carlos Andersen, MD, PCP, Concord

Diablo Valley Specialists in Internal Medicine PCP, Milenna Bell, PA,

LifeLong Medical Care, PCP, Lester Love, MD, Peter Lovett, MD, Laura Wise, MD, Melinda Glines, MD, Sharad Kohli, MD

MyHoang Nguyen, MD, PCP, Pleasant Hill

Allergy and Asthma Medical Group of Diablo Valley, David Cook, MD, Joshua Jacobs, MD, Barbara Karpel, MD, Matthew Lodewick, MD, Nancy Mozelsio, MD, James Nickelsen, MD, Emily Brama, NP, Mary Beth Medina, NP, Allyson Tevrizian, MD, Karna Gendo, MD, Fannie Su, MD

Bay Area Retina Associates, Tushar Ranchod, MD

Cardiovascular Consultants Medical Group, Alden McDonald, MD

Choice Medical Group, Helen Vinogradova, MD

Clinica La Luna y el sol Medical Center, Rosanne O’Rourke, NP

Comprehensive Psychiatric Services, Violeta Tan, MD, Xiaoling Zhu, MD, Farzana Amin, MD, Michael Bartos, MD, Khatera Ghazanfar, DO

Contra Costa Hearing Aid Center, Toby Hill, HAD, Steven Newsom, HAD

Contra Costa Oncology, Amir Modarressi, MD

East Bay Aids Center, - HIV/AIDS - PCP - Ingrid Nelson, NP
Specialist - Stephen O’Brien, MD, Michael D’Arata, NP, Deborah Royal, NP, Jeffrey Burack, MD, Damon Francis, MD, Christopher Hall, MD

East Bay Cardiac Surgery Center Medical Group, Barry Sheppard, MD

East Bay Medical Oncology-Hematology Associates, Gautam Prasad, MD

East Bay Perinatal Medical Associates, Leon Richmond, MD

East Bay Retina Consultants, Allen Chiang, MD

East Bay Sports Medicine and Orthopaedic Associates, John Merson, MD

Hanses Chiropractic, Mark Hanses, DC

Jeannette Lobao, PsyD, Bariatric Evaluations

Jingyu Liu, Specialist - Acupuncture

La Clinica de La Raza, OB/GYN - Sara Johnson, MD

Ming Fang, MD, Gastroenterology
New Orthopaedic Specialists

Muir Orthopaedic Specialists (MOS) has joined the CCHP Network. MOS is composed of 23 specialists: 10 general orthopaedic surgeons, 3 hand and upper extremity surgeons, 2 trauma surgeons, 2 foot & ankle surgeons, 2 spine surgeons, 2 sports medicine surgeons, and 2 physical medicine & rehabilitation specialists.

MOS has 3 practice locations; Walnut Creek, Brentwood, and San Ramon. Their main telephone number is (925) 939-8585, and their website is located at www.muir-orthopedic.com.

Contra Costa Regional Medical Center Department of Pediatrics announces a new name for the former Child Development Clinic and a new service.

The Clinic for ASD & ADHD Diagnostics (CAAD) & The Pediatric Resource Service

The name change for the former CDC to CAAD more clearly reflects what this clinical service does, evaluations and medication management for Autism Spectrum Disorders and ADHD.

* The Pediatric Resource Service, under the direction of Dr. Dayna Parish, is a referral resource for other developmental and behavioral issues.

Referrals to either service are accepted only by fax to (925) 370-5277
Welcome New CCRMC PCP’s

Victoria Agnost, MD
Pediatrics, Antioch Health Center

Sandra Murguia-Gregory, NP
Family Medicine,
Brentwood Health Center

Trang Lehman, MD
PCP-Concord Health Center

Kenneth Brooks, MD
Family Medicine,
Pittsburg Health Center

Robin Wallace, MD
Family Medicine,
Richmond Health Center

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

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

Holidays Observed by CCHP

Veterans Day November 11, 2011
Thanksgiving Day November 24, 2011
Day After Thanksgiving November 25, 2011
Christmas Day December 26, 2011
New Year’s Day January 02, 2012

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

Our accredited
URAC Advice Nurse
Unit is available
for our member’s
24 hours a day,
7 days a week
including holidays.
The Advice Nurse Unit
can be reached by calling

1 (877) 661-6230 Press 1
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**Heather Wong**  
Credentialing/Contracts Assistant  (925) 313-9508  
Heather.Wong@hsd.cccounty.us

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

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