Covered California

Great News! As of October 1, 2013, enrollment is underway for California’s new health benefit exchange, Covered California. Contra Costa Health Plan (CCHP) is one of 12 plans statewide participating in the exchange. Member coverage will begin January 1, 2014. These members will be issued a unique Covered California CCHP ID card. Covered California members will be reimbursed under the commercial product line in your contract. The same process for verification of eligibility, claims submission and authorization requests will apply. Covered California members can access a dedicated Member Services line at 1 (855) 957-2247 (Press 2) for any member concerns including changing Primary Care Providers. If any of your patients are interested in applying for the Exchange or have questions, they can access the Covered California Call Center at 1 (800) 300-1506.

As of January 1, 2014, the Basic Health Care program for Adults (BHC) and the Health Care Coverage Initiative (HCCI) recipients will qualify for one of the Exchange coverage and the programs will be discontinued. The Basic Health Care program will still be available for undocumented children. Most Medi-Cal Expansion (MCE) program recipients will transition from the Low Income Health Program (LIHP) into the Medi-Cal program.

For more information on Covered California visit the website at http://www.coveredca.com.
Contra Costa County Regional Medical Center’s CAAD Clinic (Clinic for ASD & ADHD Diagnostics)

The CAAD Clinic is available for CCRMC and CPN provider referrals. However, along with providers throughout the county, they are currently overwhelmed with referrals. In order to ensure only the most appropriate referrals, please use the following guidelines:

Referrals appropriate for CAAD include the following (please note insurance info too):

R/O ADHD (4-14 years) CAAD sees CCHP Commercial and Medi-Cal patients. Child should not have additional concerns of depression, anxiety, Oppositional Disorder or other MH co-morbidities. (There is a 4-6 month wait to evaluation.)

R/O Autistic Spectrum Disorder (2-16 years) CAAD sees CCHP Commercial for ASD only evaluations. If child has concern of ADHD & ASD, with Medi-Cal, CAAD may see as RCEB doesn't address ADHD evaluations. (There is a 4-6 month wait to evaluation.)

ADHD Medication Management Consultation (4-16 years) If referring for ADHD Med Management, please provide diagnosis and history. If no diagnosis, only mark referral as R/O ADHD. (There is a 2-4 month wait list for medication consult.)

The following are types of inappropriate CAAD referrals:

- ADHD with concerns of ODD and/or Conduct Disorder and/or, "Destructive behaviors"
- Aggression or Mood Disturbance
- Anxiety or Depression
- “Behavior problems/issues”
- Children outside of our identified specified age range (i.e. 2 y/o for ADHD eval or med management or 17 y/o for ND evaluation.)
- "Dyslexia"
- “Eval and tx” (no clinic information provided to know reason for referral)
- Insurance we don't take (CPN's send Anthem Blue Cross, United Health, etc.)
- “Learning/School problems”
- Medication consultation for STABLE patients doing well on prescribed medication
- Psychotherapy
- "Refer to Regional Center” (providers don't differentiate if Regional Center of the East Bay or Contra Costa Regional Medical Center as term "Regional Center" is used interchangeably)
- Speech/Language delays (no clinical support to be concerning of ASD)

Resources for the above issues:

- Learning difficulties/School Problems: REFER TO SCHOOL FOR EVALUATION
- Speech/Language Delay: REFER TO REGIONAL CENTER OF THE EAST BAY IF < 3 Y/O OR REFER TO SCHOOL DISTRICT IF > 3 Y/O
- Aggression or Mood Disturbance, Behavior Problems, Need for Psychotherapy: PROVIDER TO CALL Mental Health Access Line 1 (888) 678-7277
- Regional Center of the East Bay Intakes for <3 years: (510) 618-6195 and fax: (510) 618-7769. Advise parent to call.
Pharmacy and Therapeutics News

Preferred Drug List (PDL) changes should be effective around October 15, 2013

The CCHP Pharmacy and Therapeutics committee approved addition of the following agents to the Preferred Drug List. These agents will not require Prior Authorization:

• Vitamin B-12 100mcg, 250mcg, 500mcg, 1000mcg tablets
• Magnesium Oxide 400mg tablets

Other formulary changes:

• Quantity limits of 240ml (8 oz) per fill of promethazine/codeine syrup

A printable copy of the CCHP preferred drug list can be found here:

A searchable CCHP preferred drug list can be found here:

In response to the national epidemic of narcotic abuse, DEA has begun scrutinizing pharmacists’ role in dispensing controlled substances. DEA wants to ensure prescriptions are issued for a legitimate medical purpose. Pharmacies and pharmacists are requiring more information including but not limited to: diagnosis, previous medications tried, and length of expected treatment. They will apply more scrutiny to narcotics prescriptions which exceed 120mg/day of morphine equivalent. Prescribers should be aware that they may be informed should a pharmacy discover possible issues during a CURES lookup of the patient.

EPOCRATES – free mobile & online formulary resource

How to add the CCHP formulary to your epocrates user profile:

2. Click on "My Account" in the top right.
3. Sign in with your Epocrates username and password, if needed.
4. Click on "Edit Formularies."
5. Follow the on screen instructions to select and download formularies or to remove formularies.
• For the ‘Select State’ filter, click California
• For the ‘Select Category’ filter, click Health Plan
• Choose the Contra Costa Healthplan formulary; click the ‘Add’ button
• Click the "Done" button when you’ve finished.
6. 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 or at 1 (800) 230-2150.

Pharmacy and Therapeutics News continued on next page
Pharmacy and Therapeutics News continued...

CCHP Proposal to Increase Threshold Limits for Early Refill of Controlled Substance Schedules 2 thru 4 (C2-C4 or CII-CIV)

Controlled substances are medications with potential for abuse and diversion. Federally regulated by Controlled Substance Act and enforced by Drug Enforcement Administration. Individual drugs are listed on specific “schedules” depending upon their potential for harm. Lower schedule numbers have greater potential harm and more severe penalties for trafficking.

Examples of drugs in various schedules follow (list not comprehensive):

- Schedule I: (No medically accepted use): LSD, marijuana, mescaline, heroin
- Schedule II: codeine, hydrocodone (pure), hydromorphone, oxycodone, oxymorphone, methadone, methylphenidate, amphetamine, methamphetamine
- Schedule III: phendimetrazine, anabolic steroids, hydrocodone/APAP mixtures, buprenorphine
- Schedule IV: benzodiazepines, zolpidem, zaleplon, modafinil, phentermine
- Schedule V: codeine cough syrups (not affected by this proposal)

Currently CCHP’s pharmacy claims processor allows refills once 80% of submitted days supply has elapsed. When a pharmacy fills a prescription, they submit estimated days supply based upon the quantity and directions issued by the prescriber. The days supply is used to calculate when the prescription may be refilled. For example, a prescription for fluoxetine 20mg qd, #30 would have an estimated 30 day supply. Therefore, using an 80% threshold, that prescription may be refilled 24 days later.

If CCHP increases the threshold to 90% or uses a T-minus-4-day method, then members could refill medication before running out but would curtail members obtaining additional medication beyond prescribers’ intent by taking advantage of the early refill threshold.

CCHP would also like to implement a max of 60 days supply to limit the amount of controlled substances a member may possess at any time. The following table shows the days that must elapse between refills using the current 80% threshold, a proposed 90% threshold or a proposed T-minus-4-days threshold.

<table>
<thead>
<tr>
<th></th>
<th>80% threshold (currently)</th>
<th>90% threshold (proposed)</th>
<th>T-minus 4 days (proposed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>30-day supply</td>
<td>24 days</td>
<td>27 days</td>
<td>26 days</td>
</tr>
<tr>
<td>60-day supply</td>
<td>48 days</td>
<td>54 days</td>
<td>56 days</td>
</tr>
<tr>
<td>90-day supply</td>
<td>72 days</td>
<td>81 days</td>
<td>86 days</td>
</tr>
</tbody>
</table>

The question for you to ask as a prescriber is, “Do I want my patients whom I’ve prescribed a 30 day supply of Norco to be able to get refills from the pharmacy every 24 days?”

This would potentially affect around 100-500 members.

There are two issues CCHP would like you to consider regarding controlled substances CII-CIV:

1. Changing the early refill threshold to either 90% of days supply or T-minus 4 days of days supply.
2. Changing the max days supply from 90-days to 60-days.

Please send comments, responses, and suggestions to luke.lim@hsd.cccounty.us
**HIPAA Compliance**

The Department of Health and Human Services (HHS) released new regulations in January 2013 that made important changes to the privacy and security requirements under the Health Insurance Portability and Accountability Act (HIPAA). These new regulations, known as the HIPAA Omnibus Rule, implement many of the provisions of the Health Information Technology for Economic and Clinical Health (HITECH) Act. Covered entities have until September 23 to comply with these changes.

Physician offices will, at minimum, need to review and update their business associate agreements, office privacy and security policies and notice of privacy practices.

Some of the key changes made by the HIPAA Omnibus Rule include, but are not limited to, an updated definition of a business associate, new rules surrounding certain permitted uses and disclosures of protected health information (PHI), such as the sale of PHI and the use of PHI for fundraising and marketing, and rules controlling how patients can obtain medical records that are kept by a physician electronically. It also made significant changes to the breach notification rule.

For more information and for an updated sample notice of privacy practices and business associate agreement, see the California Medical Association’s (CMA) On-Call documents #4101 “HIPPA ACT SMART. Introduction to the HIPPA Privacy Rule” and #4103 “Business Associates.” These documents are available free to members in CMA’s online health law library at www.cmanet.org/cma-on-call.

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**Ensuring Access To Transgender Services**

A reminder to our network providers that transgender services is a benefit available to Medi-Cal beneficiaries. The term “transgender services” refers to the treatment of “gender identity disorder”, which may include psychotherapy, continuous hormonal therapy, laboratory testing to monitor hormone therapy and gender reassignment surgery that is not cosmetic in nature.
The Quality Management Program at Contra Costa Health Plan ensures that our members receive high quality health care services. The quality management staff regularly gathers and analyzes data about quality, access, safety, and satisfaction. Practitioners play an integral role in the Quality Management program. They provide oversight through membership and participation in the Clinical Leadership Group, Quality Council, Credentialing Committee, Utilization Management Committee, Pharmacy and Therapeutics Committee, Appeals Committee, and Joint Conference Committee. They develop practice guidelines and participate in selection and execution of quality improvement projects, among other initiatives.

If you would like to know more about the Quality Management Program, a summary of activities will be posted shortly on the provider website http://cchealth.org/healthplan/providers/, or you may call (925) 313-6917 for a written copy of our complete Quality Program Description, Quality Program work plan and Quality Program Annual Evaluation. If you would like to be more involved in quality management activities please contact the Medical Director, James Tysell, MD.

**Practice Guidelines**
Practice Guidelines are updated at least every 2 years and are provided as a resource to help Contra Costa Health Plan members and contracted providers make decisions about appropriate health care for specific clinical circumstances.

Guidelines are developed based on recognized sources and reviewed by a physician team with involvement from board-certified practitioners from appropriate specialties. Guidelines are then approved by the Contra Costa Health Plan Medical Director and Medical Consultants and adopted by the Quality Council.

CCHP reviewed the top 10 diagnoses in emergent and ambulatory care. After analysis and discussion with practitioners about which guidelines would be effective in reducing morbidity, the following guidelines were developed or adopted.

**Diabetes**
Basic Guideline for Diabetes Care developed by the Diabetes Coalition of California and the California Diabetes Program, revised June 2012.

**Childhood Obesity**

**Adult Preventive Guidelines**
2013 Adult Prevention Guidelines based on USPSTF recommendations.

**Child Preventive Guidelines**
2012 Prevention Guidelines for Children and Adolescents based on USPSTF recommendations.

**Normal Pregnancy Guidelines**
2013 Normal Pregnancy Guidelines, based on American Congress of Obstetricians and Gynecologists. These guidelines can be found on the Plan’s website under Clinical Guidelines in the For Providers section and in the Documents section of the Plan’s section of iSite (our Intranet).

Outpatient Heart Failure Management and Asthma Management are expected to be approved and listed in the next month. Please call the Quality Management office at (925) 313-6917 for a copy of a guideline.
Welcome New CPN Providers...

Diablo Valley Pediatrics Medical Group - PCP-Pediatrics, Sarit Shtivelman, MD, Christine Mayor, NP

Chao Sun, MD - PCP Family Medicine

Jose Arias-Vera, MD - PCP-Internal Medicine

LifeLong Medical Care - PCP-Family Medicine, Amy Gordon, MD

La Clinica de La Raza - PCP-Geriatric Medicine, Mara Saunders, NP, Sarah Alder-McDonald, NP

Brenda Ramos, DC - Chiropractic

East Bay Aids Center - HIV/Aids, Tara Vijayan, MD

Professional Healthcare at Home - Home Health & Hospice

Diablo Valley Oncology and Hematology Medical Group - Oncology, David Wu, MD, Maria Fucanan, NP

Congratulations to Planned Parenthood - Concord
100% in both their Facility Site Review (FSR) and Medical Record Review (MRR)

Walnut Creek Surgical Associates

Dr. Arash Mohebati is one of the general surgeons with Walnut Creek Surgical Associates. He is board certified in general surgery, and has completed a fellowship in head and neck oncologic surgery at Memorial Sloan Kettering Cancer Center. During his surgical oncology fellowship he was awarded an NIH T32 research grant, has published multiple manuscripts in peer reviewed journals, and has presented at national and international meetings. Dr. Mohebati has a strong interest in treating oral and parathyroid adenomas. Walnut Creek Surgical Associates telephone number is (925) 933-0894, and their website is located at wcsurgeons.com.
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 Press 1.

Providers needing help with translation services call 1 (877) 800-7423 Press 4.

Providers needing help with arranging face to face ASL (American Sign Language) interpretation services call 1 (877) 800-7423 Press 4.

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

CCHP Provider Manual has been updated and is located on our web site at www.contracostahealthplan.org

If you have any comments or to request a hard copy please contact Provider Relations at ProviderRelations@hsd.cccounty.us or call (925) 313-9500.
Contra Costa Health Plan Provider Relations/Contracts

Staff Contact Information

**Terri Lieder** Director of Provider Relations/Credentialing (925) 313-9501 Terri.Lieder@hsd.cccounty.us

**Jenny Galindo, RN** Provider Liaison/FSR Nurse (925) 313-9513 Jenny.Galindo@hsd.cccounty.us

**Ronda Arends** Credentialing Supervisor (925) 313-9522 Ronda.Arends@hsd.cccounty.us

**Nicole Meyer** Contracts Secretary (925) 313-9521 Nicole.Meyer@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