



CONTRA COSTA
HEALTH

PROVIDER NETWORK NEWS

JULY - Q3 SUMMER ISSUE #1.5

Dear CCHP Providers,

We are thrilled to bring you the latest updates and initiatives from Contra Costa Health Plan (CCHP). As we continue to strive for excellence in patient care and provider support, we have a few important announcements and initiatives to share with you. Your active participation and collaboration are crucial to the success of these endeavors.

Upcoming Provider Engagement and Outreach Initiative

CCHP is launching a comprehensive Provider Engagement and Outreach Initiative starting July 2024. This initiative aims to strengthen our partnership with you, our valued providers, and ensure that you have the resources and support needed to deliver exceptional care to our members. Key components of this initiative include:

Provider Outreach Visits: CCHP will be coming to you! CCHP will be visiting various providers to learn more about your practices, provide CCHP updates, share contact information and resources, and obtain feedback from you and your teams.

Enhanced Provider Resources: Look for new and updated resources! CCHP wants to ensure that our providers and their teams have access to programs and resources that may be needed to support patient care (i.e. transportation, case management, etc.).

Enhanced Communication: CCHP is here to support you! As part of this initiative, we want to make sure that our providers know how to reach us and obtain help and support. Your input is also invaluable in helping us to shape our programs, policies, and procedures.

Your engagement is essential, and we look forward to your active participation in these activities.
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Clinical Operations Enhancements

CCHP is committed to continually improving our Clinical Operations to better serve our providers and members. We are pleased to share the following enhancements actively taking place within CCHP Clinical Operations:

- Enhancement of leadership and administrative support
- Workforce development
- Optimization of workflows, policies, and procedures
- Interdepartmental collaboration
- Collaboration with providers

Preparation for Upcoming DHCS Audit

As part of our ongoing commitment to compliance and quality, CCHP will be undergoing a Department of Health Care Services (DHCS) audit during August 2024. We are taking proactive steps to ensure a successful audit. We look forward to demonstrating our commitment to high standards of care and compliance.

As always, thank you for your dedication and partnership with Contra Costa Health Plan. Your commitment to providing high-quality care is the cornerstone of our success. We look forward to your active involvement in our upcoming initiatives and to continuing our work together to improve the health and well-being of our community.



**Warm regards,
Irene Lo, MD
Chief Medical Officer**

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Behavioral Health Update

We are eager to provide several updates related to mental health and behavioral health services.

Behavioral Health Treatment:

- Authorization requirements: Comprehensive Diagnostic Evaluations and Applied Behavioral Analysis continue to require authorization from CCHP.
- Coordination: in an effort to better support members, families, and providers, BHD is generating new Community Health Worker (CHW) referrals for members who are not already established with Case Management or Enhanced Care Management (ECM).
- CCHP has guided Community Health Workers to:
 - Provide families with guidance regarding “What is a CDE?” and “What is ABA?”
 - Confirm appointment scheduling with CDE providers
 - Follow up with families after CDE to confirm receipt of report
 - Coordinate with referring providers to support members in obtaining services
 - Support families in connecting with ABA providers
- Please remain on the lookout for outreach from Community Health Workers supporting members access these important services.

Child and Youth Behavioral Health Initiatives:

Student Behavioral Health Incentive Program: for the last 2 years CCHP has partnered with local school districts to pilot novel interventions to support the mental health of children and adolescents. SBHIP funds have been used, in four school districts with many at-risk students, to provide additional counseling and therapy support at all grade levels. An example is a new student wellness center at Carquinez Middle School in Crockett, a place for students to take a brief, calming break when stressors interfere with school.

Multi-Payor Fee Schedule:

CCHP is excited to participate in the Multi-Payor Fee Schedule. This new program allows school-based mental health clinicians and other student support

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Behavioral Health Update (Cont)

personnel to bill insurers, including CCHP and commercial insurers, for on-campus services for which there currently isn't any reimbursement available. It is hoped that this additional funding will allow for more clinicians and student support professionals to be hired by school districts, offering greater availability of behavioral health services to students and families in need.

Mild-to-Moderate Mental Health Services: As mentioned previously, these services are available from contracted providers without authorization from CCHP. CCHP BHD continues its partnership with BHS Access Line for patient intake and coordination.

- **Transition Tools:** For mental health providers, please keep in mind the importance of submitting Transition Tools for the appropriate coordination of care for members adding or transitioning services between the mild-moderate (CCHP) and specialty (County Behavioral Health) systems of care.

Neuropsychological Treatment: Dr. K Wortman provided a great presentation on the role of Cognitive Testing for patients with concern for impulsivity/lack of concentration and rule out ADHD. Patients presenting with these concerns should generally be referred first to mental health providers, including prescribers who are able to diagnose and treat a broad differential for these symptoms with functional impairment. To review the slides presented, please see here: [Network Provider Training](#).

Care Coordination for Moderate/Severe Mental Health Services and Substance Use Disorders: in keeping with CalAIM's No Wrong Door policy for mental health services, CCHP is launching new initiatives to coordinate care for members receiving "Specialty" mental health care or substance use disorders services in the County Behavioral Health Services system of care. These are essential to ensuring patients receive indicated services that are referred to following PCP and specialist screening. This coming fall, CCHP will co-sponsor training to provide more information on Care Coordination and how CCHP and BHS will be working closely together.

Future Steps:

- **Quality Performance:** Projects to improve quality of services received by members include improving the rates of member follow up with outpatient services after discharge from Emergency Room for mental health and substance use concerns.
- **Equity:** New equity analyses related to access and outcomes to mental health care services. These include referral and authorization rates by relevant demographic sub-groups and review of services received.
- **Care Coordination:** New initiatives to coordinate care across fragmented systems of mental health and substance use treatment. Our goal is that all members receive timely services in the settings they feel most comfortable and that are most conducive to their healing and recovery process.

QUALITY - Understanding CPTII Codes & Their Importance for Quality Measures

What Are CPTII Codes?

CPTII (Current Procedural Terminology Category II) codes are a subset of CPT codes used to facilitate data collection for quality improvement. Unlike standard CPT codes, which describe medical procedures and services, CPTII codes provide supplemental information about the performance of certain tasks and the outcomes of patient care. These codes are essential for enhancing the precision of performance measures, particularly in the realm of quality reporting and improvement.

How CPTII Codes Are Used in Quality Measurement

The Healthcare Effectiveness Data and Information Set (HEDIS) is a widely used set of performance measures in the healthcare industry. HEDIS is designed to allow consumers to compare healthcare plans based on quality. CPTII codes play a crucial role in HEDIS reporting by enabling more accurate and detailed data capture. Here's how they are specifically used within our health plan.

Usage	Measure Names	Description	CPTII Codes
Blood Pressure	Controlling High Blood Pressure (CBP) and Blood Pressure Control for Patients with Diabetes (BPD) Measures	CPTII codes are used to document blood pressure readings accurately. This helps in tracking and managing patients with hypertension and diabetes more effectively. By using specific codes, providers can indicate whether the blood pressure is within the controlled range, thus contributing to the CBP and BPD measures.	<ul style="list-style-type: none"> 3074F: Systolic < 130 mm Hg 3075F: Systolic 130-139 mm Hg 3077F: Systolic ≥ 140 mm Hg 3078F: Diastolic < 80 mm Hg 3079F: Diastolic 80-89 mm Hg 3080F: Diastolic ≥ 90 mm Hg
Eye Exam	Eye Exam Results for Diabetic Patients (EED)	CPTII codes are used to indicate the results of eye exams for diabetic patients. These codes can specify whether the eye exam was performed and whether the results were positive (indicating the presence of retinopathy) or negative. This information is critical for managing and monitoring diabetic patients, contributing to the EED measure.	<ul style="list-style-type: none"> 2022F: Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed 2023F: Dilated eye exam interpreted by a physician 2024F: Seven standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist documented and reviewed 2025F: Seven standard field stereoscopic photos interpreted by a physician 2026F: Eye imaging validated to match diagnosis from seven standard field stereoscopic photos results documented and reviewed 2033F: Eye imaging validated to match diagnosis from photos interpreted by a physician
Initial Prenatal and Postpartum Visit	Prenatal and Postpartum Care (PPC)	CPTII codes help document the timing and occurrence of initial prenatal and postpartum visits. Accurate documentation ensures that pregnant women receive timely and adequate care throughout their pregnancy and after childbirth, which is crucial for the PPC measure.	<ul style="list-style-type: none"> 0500F: Initial prenatal care visit 0501F: Subsequent prenatal care visit 0502F: Postpartum care visit 0503F: Comprehensive postpartum care visit
Hemoglobin A1c	Hemoglobin A1c Control for Patients with Diabetes (HBD)	CPTII codes are used to document hemoglobin A1c levels for patients with diabetes. This is crucial for managing and monitoring diabetes, contributing to the HBD measure	<ul style="list-style-type: none"> 3044F: Most recent hemoglobin A1c level less than 7.0% 3046F: Most recent hemoglobin A1c level greater than 9.0% 3051F: Most recent hemoglobin A1c level between 7.0% and 8.0% 3052F: Most recent hemoglobin A1c level between 8.0% and 9.0%

QUALITY - Understanding CPTII Codes & Their Importance for Quality Measures (cont)

How to Submit CPTII Codes

Submitting CPTII codes is straightforward and can be done in the same manner as regular CPT codes. Here are the steps:

1. Documentation:

- Ensure that the procedure or clinical activity corresponding to the CPTII code is thoroughly documented in the patient's medical record.

2. Code Entry:

- During the claim submission process, enter the appropriate CPTII code along with the standard CPT codes. Ensure that the CPTII code is accurately recorded to reflect the specific performance measure.

3. Electronic Health Records (EHR):

- Utilize your EHR system to input CPTII codes. Most EHR systems have built-in functionalities to support CPTII code entry and ensure proper linkage to patient records.

4. Training and Resources:

- Ensure that all staff involved in coding and billing are trained on the use of CPTII codes. Provide them with resources such as coding manuals and guidelines to facilitate accurate coding.

Benefits of Using CPTII Codes

1. Enhanced Data Accuracy:

- By using CPTII codes, providers can ensure more precise data capture. This leads to more accurate performance measurement and better quality reporting.

2. Improved Quality of Care:

- Detailed documentation through CPTII codes helps identify areas for improvement in patient care. This, in turn, enables healthcare providers to implement targeted interventions.

3. Streamlined Reporting:

- CPTII codes simplify the reporting process by providing clear and standardized documentation for quality measures. This makes it easier to track performance over time.

4. Better Compliance with Quality Measures:

- Accurate and detailed reporting through CPTII codes ensures better compliance with HEDIS measures. This can positively impact health plan ratings and provide a competitive advantage.

CPTII codes are an invaluable tool for enhancing the precision of HEDIS measures. By accurately documenting procedures and outcomes, these codes help improve the quality of care provided to patients.

QUALITY - Shared Decision Making Tools

What are Shared Decision Making (SDM) tools?

SDM tools refer to the process when a provider and patient partner together to make decisions about their care plans, treatments, and tests. SDM are tools that foster open communication/dialogue between a provider and patient regarding the next course of action for their health. This collaborative process ensures that the patient will be given the opportunity to participate in their health care decision.

What are the benefits of SDM tools?

- Takes into consideration the provider's knowledge and experience.
- Promotes patient's engagement and input in decision making.
- Reduces uncertainty and miscommunication.
- Fosters trust and collaboration between patient and provider

The SHARE approach was developed by the Agency for Healthcare Research and Quality (AHRQ) to support training health care professionals on how to engage patients in their healthcare decision making.

Step 1: Seek your patient's participation.

Step 2: Help your patient explore and compare treatment options.

Step 3: Assess your patient's values and preferences.

Step 4: Reach a decision with your patient.

Step 5: Evaluate your patient's decision.

Some examples of SDM tools:

- Mayo Clinic – [Diabetes Medication Choice in deciding on antihyperglycemic agents - Diabetes Medication Choice](#)
- University of Pittsburgh Medical Center – [Optimal medication or lifestyle change to control hypertension - Deciding About Taking Blood Pressure Medicine](#)
- Cancer Center Ontario – [Treatment for Kidney failure - ORN- Shared Decision-Making: Supporting Patients and Families Living with Chronic Kidney Disease](#)
- SAMSHA – Decisions in Recovery – [Treatment for Opioid use Disorder Handbook - Decisions in Recovery: Treatment for Opioid Use Disorders | SAMHSA](#)
- American Medical Association - [Heart Disease Interactive Video for Aortic Stenosis](#)
- American College of Cardiology - [Atrial Fibrillation, aortic stenosis, and heart failure](#)

More information on SDM:

- AHRQ - [The SHARE Approach—Essential Steps of Shared Decision-making: Quick Reference Guide](#)

Utilization Management

Provider Portal Update:

Over the past three years, Contra Costa Health Plan (CCHP) has worked in partnership with all our contracted Providers to obtain access to the ccLink Provider Portal (Provider Portal). Thank you for all of your patience and cooperation during this process.

This Provider Portal streamlines the process of requesting and receiving authorization for services. The Provider Portal allows requests for authorization to be sent to CCHP directly and immediately supplies the provider with a referral number for tracking, allows documents to be added to the referral after the initial entry, allows providers to check the status of referrals, and allows providers to receive and view determination letters electronically.

We have received numerous requests for training and assistance with the Provider Portal.

- Provider Portal Training is available here: [planlinksup.cchealth.org/SecureContent/PP-Referral 2023.mp4](https://planlinksup.cchealth.org/SecureContent/PP-Referral%202023.mp4)

If anyone in your facility still needs access to the Provider Portal or needs their access changed to allow for referral entry, your Site Administrator can request access through the Provider Portal Admin options, by emailing CCHPPortalSupport@cchealth.org, or calling the IT Help Desk at 925-957-7272.

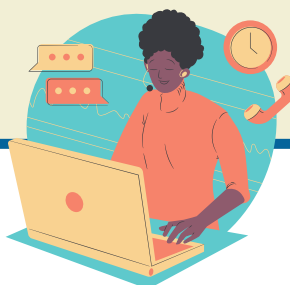
Requests for a new Site Administrator or initial access for a Medical Group should fill out the ccLink Provider Portal Access Agreement found on our website:

<https://cchealth.org/healthplan/providers/>

and email them to CCHPPortalSupport@cchealth.org.

You can also email auth-umsupport@cchealth.org if you have any further questions regarding usage of the portal, or require further assistance after viewing the training videos.

- CCHP Authorizations Unit



Case Management Corner

Case Management (CM) Programs at CCHP ensure that medically necessary care is delivered to our members in the most efficient and effective setting and that psychosocial barriers to receiving care are addressed quickly to minimize their negative impact. CCHP offers three types of case management programs:

- Complex Case Management (CCM) Program
- Care Coordination Program
- Transitional Care Services (TCS) Program

Complex Case Management (CCM) Program

Complex case management is the coordination of care and services provided to members who have experienced a critical event or diagnosis that requires the extensive use of resources and who need help navigating the system to facilitate appropriate delivery of care and services.

- Comprehensive assessment of needs and condition, available benefits, and resources
- Development and implementation of an individualized, and member-centric care plans.
- Navigation of the health care system, including, but not limited to, making appointments and reminders, finding needed service providers.
- Coordination of health care services and social services affecting health.
- Connection to available community resources that impacts their health, including public benefit programs.
- Referrals to appropriate services and support programs.
- Transitional care services (for those already enrolled in CCM)

Since complex case management is considered an opt-out program, all eligible members have the right to participate or decline participation.

Care Coordination Program

Care Coordination Program provides services to members who needs assistance navigating healthcare and accessing services and focuses on building natural support networks that improve independence and wellness allowing for eventual program discharge.

Interventions include, but not limited to:

- Navigation of the health care system, including, but not limited to, making appointments and reminders, finding needed service providers
- Coordination of health care services and social services affecting health
- Connection to available community resources that impacts their health, including public benefit programs

Case Management Corner

- Referrals to appropriate services and support programs
- Connection to perinatal services (Baby Watch Program)

Transitional Care Services (TCS)

Transitional Care Services provides services to members who are transitioning from one setting or level of care to another, including, but not limited to: discharges from hospitals, institutions, other acute care facilities, and skilled nursing facilities (SNFs) to home or community-based settings, Community Support placements, post-acute care facilities, or long-term care (LTC) settings. This program is available to members for at least 30 days post transition or until the member is enrolled to an ongoing case management program (Enhanced Care Management or Complex Case Management), if needed.

Interventions include, but not limited to:

- Discharge plan/summary review with the member
- Medication reconciliation
- Coordination and follow up of services as outlined in the discharge summary
- Coordination with discharging facilities to support discharge plans and help address any barriers to discharge, if any
- Collaboration with other members of the care team
- Screening and referral to appropriate ongoing case management program

How to Request for Case Management Services:

- Complete a CCHP Case Management referral on Epic (for CCH providers) or ccLink Provider Portal (for non-CCH providers) or
- Calling CCHP Case Management at 925-313-6887 (TTY 711) and requesting case management services or
- Faxing a completed referral form at 925-252-2609





Pharmacy and Therapeutics

Updates/Announcements:

Expansion of CCHP Commercial Plans Retail Pharmacy Network

As of mid-February 2024, the CCHP Commercial Plan Retail Pharmacy Network has expanded greatly. CCHP Commercial plan members will now be able to fill their prescriptions almost all major pharmacy chains including CVS, Costco, Wal-Mart, Safeway, Raleys, Walgreens and Rite Aid, as well as many independent pharmacies across the country. Please contact the CCHP Pharmacy Department if there are questions as to whether or not a retail pharmacy is included in the new expanded network.

Physician Administer Medications for CCHP Members

As a reminder, please note that physician administered medications can be billed to CCHP using the member's medical benefit with CCHP. CCHP Medi-Cal members have their retail pharmacy medications billed to Medi-Cal Rx and their medical benefit billed to CCHP which includes physician administered medications.

Real Time Benefit Check Tools

Please remember that providers and members have access to online pharmacy benefits checks. Providers can check a member's pharmacy benefit coverage via the prescribing provider's EMR/EHR platform. Please contact the CCHP Pharmacy Department for further information or if there are any questions about access.

Medi-Cal Rx Formulary Changes

Medi-Cal Rx has been updating their Contract Drug List (CDL) on a monthly basis. These updates can be found on the DHCS Medi-Cal Rx website at <https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news> or contact the CCHP Pharmacy Department for additional details.

Preferred Drug List

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: <http://cchealth.org/healthplan/pdf/pdl.pdf>
- A searchable copy of the CCHP PDL: <https://cchealth.org/healthplan/formulary.php>

Pharmacy and Therapeutics

- **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.

CCHP COMMERCIAL MEMBER FORMULARY CHANGES:

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 or contact the CCHP Pharmacy Department):

<u>Changes Made</u>	<u>Drug Name</u>
Created new PA criteria:	Continuous Glucose Monitors Rezdifra (resmetirom) Eohilia (budesonide) VEGF receptor inhibitors Elmiron (pentosan polysulfate sodium)
Modified PA criteria:	Rexulti (brexpiprazole) Nucynta (tapentadol) Calcitonin Gene-Related Peptide Receptor Antagonists (CGRP)
ADDED to the CCHP formulary:	Aimovig (ereenumab-aooe) Ajoovy (fremanezumab-vfrm)
Removed from CCHP formulary:	Emgality (galcanezumab-gnlm) Nurtec ODT (rimegepant)

Pharmacy and Therapeutics

CCHP COMMERCIAL MEMBER FORMULARY CHANGES (CONT):

- **New Pharmacy Criteria for Continuous Glucose Monitors:** member must have either insulin dependence OR history of problematic hypoglycemia OR pregnancy related diabetes
- **New Pharmacy Criteria for Rezdiffra (resmetirom):** provider must be a hepatologist, gastroenterologist or a specialist in the treatment of liver disease, diagnosis of NASH, documentation of stage F2 to F3 fibrosis by biopsy or noninvasive test, provider counseling on nutrition, exercise and avoiding excess alcohol intake
- **New Pharmacy Criteria for Eohilia (budesonide):** prescribed by or in consultation with a gastroenterologist, allergist, immunologist or other provider who specializes in the treatment of eosinophilic esophagitis, diagnosis of eosinophilic esophagitis confirmed by biopsy, trial and failure of a proton pump inhibitor and trial and failure to an inhaled corticosteroid that can be swallowed
- **New Pharmacy Criteria for VEGF inhibitors:** created preferred agent list of bevacizumab, Byooviz, Lucentis and Eylea. Preferred medications must be used for a compendia supported indication and dosing. Requests for approval of non-preferred medications must include documentation of trial and failure of a preferred VEGF inhibitor
- **New Pharmacy Criteria for Elmiron (pentosan polysulfate sodium):** prescriber must be a urologist, OB/GYN or other specialist in the treatment of genitourinary disorders, diagnosis of bladder pain or discomfort associated with interstitial cystitis and a trial and failure of amitriptyline, cimetidine or hydroxyzine
- **Modification of pharmacy criteria for Rexulti (brexpiprazole):** added criteria for the diagnosis of agitation associated with Alzheimer's disease
- **Modification of pharmacy criteria for Nucynta (tapentadol):** removed the requirement that member must be 18 years old since Nucynta IR is now approved for younger ages. Also inserted requirements for the correct indication since IR and ER are for different pain indications
- **Modification of pharmacy criteria for Calcitonin Gene-Related Peptide Receptor Antagonists (CGRP):** prior authorization is still required but moved Aimovig and Ajovy to preferred status and Emgality and Nurtec ODT to non-preferred status

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 [Pharmacy and Therapeutics | Contra Costa Health \(cchealth.org\)](https://www.cchealth.org).

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

Understanding and Preventing Fraud, Waste, & Abuse (FWA)

As part of our commitment to maintaining the highest standards of integrity and compliance in our healthcare system, we are pleased to share this special edition on Fraud, Waste, and Abuse (FWA). Understanding FWA and knowing how to prevent it is essential for providing quality care and safeguarding the resources of our healthcare system.

Monitoring FWA is critical to ensure our member are getting the right care at the right time. Preventing FWA also helps to ensure that we are good stewards of the taxpayers' dollars. Following are the legal definitions of Fraud, Waste, and Abuse under 42 CFR § 455.2 and California Welfare and Institutions Code § 14043.01.

What is Fraud, Waste, and Abuse (FWA)?

FWA encompasses unethical and often illegal practices that result in unnecessary costs to the healthcare system. Here's a brief overview:

Fraud



Fraud is intentional deception or misrepresentation made by a person with the knowledge that it could result in unauthorized benefits. Common examples include:

- **Phantom Billing:** Charging for services or supplies that were never provided.
- **Upcoding:** Billing for a more expensive service than was actually performed.
- **Kickbacks:** Receiving incentives for patient referrals or using specific products.



Waste

Waste is the overutilization, underutilization, or misuse of resources, and typically is not a criminal or intentional act. This can include:

- **Excessive Tests:** Ordering unnecessary diagnostic procedures.
- **Inefficient Practices:** Outdated processes that lead to resource wastage.
- **Using High-Cost Options:** Selecting expensive treatments when cheaper, equally effective alternatives are available.

Abuse



Abuse consists of provider practices that are inconsistent with sound fiscal, business, or dental practices, and result in an unnecessary cost to the Medicaid program. It also includes beneficiary practices that result in unnecessary cost to the Medicaid program. Examples include:

- **Overbilling:** Charging excessively for services or supplies.
- **Medically Unnecessary Services:** Providing treatments that are not needed.
- **Improper Billing:** Inaccurate coding or billing that inflates costs.

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Understanding and Preventing Fraud, Waste, & Abuse (cont)

The Role You Can Play in Mitigating FWA

As healthcare providers, you play a critical role in preventing and identifying FWA. Here's how you can contribute:

1. Be Diligent in Documentation

- **Accurate Records:** Ensure that all patient interactions and treatments are accurately recorded in the medical records.
- **Correct Coding:** Use appropriate billing codes that reflect the actual services provided.
- **Detailed Notes:** Include comprehensive notes that justify the necessity of procedures and treatments.

2. Follow Ethical Practices

- **Avoid Conflicts of Interest:** Refrain from accepting gifts or incentives for referrals or specific treatments.
- **Adhere to Guidelines:** Follow clinical guidelines and protocols to avoid unnecessary or excessive services.
- **Maintain Transparency:** Ensure clear communication with patients about their treatments and costs.

3. Stay Informed and Trained

- **Ongoing Education:** Participate in training sessions on FWA detection and prevention.
- **Compliance Updates:** Keep abreast of the latest regulations and best practices in healthcare compliance.

4. Report Suspected FWA

- **Know the Signs:** Be aware of common indicators of FWA, such as discrepancies in billing, unusual patterns of care, or patient complaints.
- **Use Reporting Channels:** Report any suspicious activities through the proper channels within our organization. Confidentiality is assured.

Report Medi-Cal Fraud, Waste, and Abuse

If you suspect that a provider or a person who gets Medi-Cal has committed **fraud, waste, or abuse**, you should report it to your supervisor or the Compliance Department as soon as possible so CCHP can meet its obligation to report to DHCS within 10 working days of the date CCHP becomes aware of or is on notice of such activity.

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Understanding and Preventing Fraud, Waste, & Abuse (cont)

The **California Medi-Cal Fraud, Waste, and Abuse (FWA) Reporting Hotline** is managed by the California Department of Health Care Services (DHCS). You can use this hotline to report any suspected instances of FWA involving the Medi-Cal program.

California Department of Health Care Services – Fraud Reporting

- FWA Hotline Number: 1-800-822-6222
- Email: fraud@dhcs.ca.gov
- Online Reporting: DHCS Fraud Reporting Form

Hours of Operation: Available 24/7 for reporting.

Contra Costa Health Plan – Fraud Reporting:

- FWA Hotline Number: 1-800-304-9490 (can report anonymously)
- Mailing Address:
Contra Costa Health Plan Fraud Unit
595 Center Ave. Ste. 100
Martinez, CA 94553

Hours of Operation: Available 24/7 for reporting.

What to Include When Reporting:

When reporting suspected FWA, try to provide as much detailed information as possible, including:

- Names and contact information of individuals or organizations involved.
- Description of the alleged fraudulent activity or abuse.
- Dates and locations where the suspected activity occurred.
- Any supporting documentation or evidence.

Confidentiality:

Reports can be made anonymously, and confidentiality is protected to the extent allowed by law.

Stay Committed to Excellence

Your vigilance and adherence to ethical practices are vital in combating FWA. Together, we can ensure that our healthcare system remains fair, efficient, and focused on delivering high-quality care to our patients.

Thank you for your continued dedication and support.

Language Access Services

Do some of your patients struggle with Speaking English or need American Sign Language? If so, Free Language Services are available to them!

Our telephonic interpreter services 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 by phone:

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

You can call our interpreter services first, choose the language, get the patient on the line, give them a summary of interpretation needs and then conference in the patient.

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

If you are a Community Contracted Provider, go to our web site and see the access details on our telephonic interpreter services and in some cases face to face.

CPN Providers can call our interpretation vendor at: **1-866-874-3972** The Client ID is **298935** and for Mental Health Providers the Client ID is **525970**.

You can also call **CA Relay at 711** to speak over the phone with individuals who use American Sign Language. An operator will assist you.

To see details for all options for interpreter services go to our website:

<https://www.cchealth.org/health-insurance/information-for-providers/interpreter-services>

If you are a CCRMC Provider, you have access to interpreters through the Health Care Interpreters Network. See instructions here:

<https://www.cchealth.org/home/showpublisheddocument/663/638239894545130000>

If you need assistance with using interpreters for Telehealth appointments, or need documents translated for CCHP members, you can email: otiutin@cchealth.org or call 925-507-7440.

Getting Proper Linguistic Access Helps to:

- Reduce medical errors
- Increase patient satisfaction
- Increase compliance
- Decrease costs for diagnostic testing and unnecessary admissions
- Create more efficient patient interactions
- Why are Family and Friends Not Recommended as Interpreters?
- Mistakes can be made and may create liability issues for your practice.



Mandatory Enrollment for Foster Children and Youth in Single Plan Counties 2025

Beginning January 1, 2025, the Department of Health Care Services (DHCS) will mandatorily enroll current and former Foster Care children and youth in Single Plan Counties who are currently in Fee-For-Service (FFS) Medi-Cal (Regular Medi-Cal) into a Managed Medi-Cal Plan. As Contra Costa Health Plan is the Single Plan in Contra Costa County, CCHP will be welcoming current and former Foster Care children and youth into our membership. This transition aims to enhance the continuity and quality of care for foster youth by providing them with coordinated and comprehensive health services.

Background and Rationale

Foster youth are a vulnerable population with unique and often complex healthcare needs. Historically, many foster youth have received their healthcare through the FFS Medi-Cal system, which can sometimes result in fragmented care and limited access to specialized services. By transitioning to Managed Medi-Cal plans, like CCHP, foster youth will benefit from a more integrated approach to healthcare, with an emphasis on preventive care, care coordination, and access to a wider network of providers.

Key Changes and Benefits

- 1. Continuity of Care** – In order to protect members' access to care after the 2025 Foster Youth transition and help members maintain trusted relationships with providers and access to needed services as they transition, CCHP will be accepting and reviewing requests for Continuity of Care for providers and services.
- 2. Enhanced Care Management:** Managed Medi-Cal plans like CCHP will provide foster youth with dedicated care coordinators to help navigate the healthcare system, ensuring timely access to necessary medical and behavioral health services.
- 3. Comprehensive Provider Network:** Foster youth will have access to CCHP's extensive network of primary care providers, specialists, and behavioral health professionals, facilitating comprehensive and continuous care.
- 4. Preventive Services:** Emphasis will be placed on preventive care, including regular check-ups, immunizations, and screenings, to address health issues proactively and maintain overall well-being.
- 5. Behavioral Health Integration:** Given the high incidence of behavioral health needs among foster youth, CCHP will integrate behavioral health services with primary care, providing a holistic approach to mental and physical health.
- 6. Support Services:** Additional support services, such as transportation assistance and health education, will be available to foster youth to reduce barriers to care and promote health literacy.

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Mandatory Enrollment for Foster Children and Youth in Single Plan Counties 2025 (cont)

Provider Responsibilities and Support

As part of this transition, providers within the CCHP network will play a crucial role in ensuring smooth and effective care for foster youth. We encourage providers to familiarize themselves with the specific needs and challenges faced by this population. Key responsibilities include:

- **Timely Appointments:** Ensuring timely access to appointments for foster youth, recognizing their potential need for urgent and consistent care.
- **Care Coordination:** Collaborating with CCHP care coordinators to develop and implement comprehensive care plans tailored to each foster youth.
- **Cultural Competency:** Providing culturally competent care, being sensitive to the diverse backgrounds and experiences of foster youth.
- **Training and Education:** Participating in training sessions and educational programs offered by CCHP to better understand the needs of foster youth and the resources available to support their care.

Contra Costa Health Plan is committed to supporting our providers throughout this transition. The transition of foster youth to Managed Medi-Cal plans represents a significant step forward in improving the quality and continuity of care for this vulnerable population. We appreciate your partnership and dedication to providing exceptional care to foster youth during this transition and beyond.



Member Rights and Responsibilities Annual Notice

The following section details information provided to members regarding their as members of CCHP. Providers are encouraged to assist members with their grievances and no punitive action will be taken against a provider who supports a member through the appeals process. Also, providers may not take any negative action against a member who files a complaint or grievance against the provider. You may also refer to Appendix J and our website at www.cchealth.org/healthplan

Member rights and responsibilities include, but are not limited to, the following:

- the right to receive care with respect and recognition of their dignity and their right to privacy regardless of race, religion, education, sex, cultural background, physical or mental handicaps, or financial status.
- the right to receive appropriate accessible culturally sensitive medical services.
- the right to choose a Primary Care Physician in Contra Costa Health Plan's network who has the responsibility to provide, coordinate and supervise care.
- the right to be seen for appointments within a reasonable period of time.
- the right to participate in making in health care decisions with practitioners, including the right to refuse treatment, to the extent permitted by law.
- the right to receive courteous response to all questions from Contra Costa Health Plan and its Health Partners.
- the right to voice complaints orally or in writing, about Contra Costa Health Plan or the care it provides; and to disenroll.
- the right to ask for an appeal of decisions to deny, defer or limit services or benefits.
- the right to health plan information which includes, but is not limited to: benefits and exclusions, after hours and emergency care, referrals to specialty providers and services, procedures regarding choosing and changing providers, types of changes in services, and member rights and responsibilities.
- Medi-Cal recipients have the right to seek family planning services from a Medi-Cal provider outside the network without a referral or authorization if the member elects to do so.
- the right to get free legal help at local legal aid offices or other groups.
- the right to formulate advanced directives.

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Member Rights and Responsibilities Annual Notice (cont)

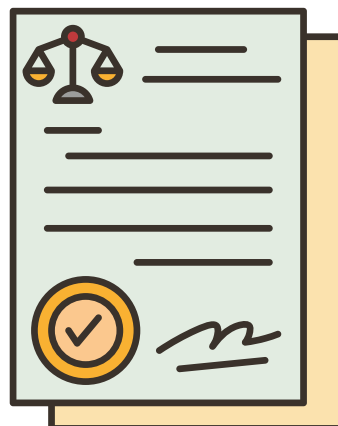
- the right to confidentiality concerning medical care
- the right to be advised as to the reason for the presence of any individual while care is being provided.
- the right to access personal medical record.
- the right to have access to emergency services outside of the Plan's provider network.
- the right to get care coordination.
- the right to request a State hearing if the member has Medi-Cal and a service or benefit is denied and an appeal had already been filed with CCHP and the member is still not happy with the decision, or the member did not get a an appeal decision after 30 days, including information on the circumstances under which an expedited hearing is possible.
- the right to no-cost interpreter services.
- the right to access Federally Qualified Health Centers and Indian Health Services Facilities.
- the right to access minor consent services.
- the right to get no-cost written Member informing materials in alternative formats (such as Braille, large size print, or audio format) upon request and in a timely fashion appropriate for the format being requested and in accordance with Welfare & Institutions Code Section 14182 (b)(12).
- the right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.
- the right to receive information on available treatment options and alternatives, presented in a manner appropriate to the Member's condition and ability to understand.
- the right to freely exercise these rights without adversely affecting how the Member is treated by the health plan, providers or the state.
- the right to candid discussion of appropriate or medically necessary treatment options, regardless of cost or benefit coverage.
- the right to examine and receive an explanation of medical bills received.
- right regarding Contra Health and Responsibility policy

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Member Rights and Responsibilities Annual Notice (cont)

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

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



Enhancing Care within CCHP: Referrals to IDDMG (BASS Infectious Diseases) for Biologic Therapies Infusion Services

As healthcare professionals, we share the pursuit of enhancing patient care and collaboration across specialties is paramount to achieve this. Conditions such as rheumatoid arthritis, Crohn's disease, ulcerative colitis, ankylosing spondylitis, and psoriatic arthritis often necessitate the use of biologic therapies to effectively manage symptoms and improve quality of life. Administering these treatments requires specialized expertise and resources.

That's where BASS Infectious Diseases Division comes into play. Our state-of-the-art facilities, experienced medical staff, and patient-centered approach make us a trusted partner in delivering biologic therapies safely and efficiently. By referring your CCHP patients to BASS ID for infusion services, you can ensure they receive the highest standard of care in a comfortable and supportive environment. Here are some key reasons why collaborating with BASS ID for biologic therapy infusions is beneficial for both you and your patients:

1. **Specialized Expertise:** Our team consists of on-site Infusion Nurses who specialize in administering biologic therapies. They undergo rigorous training and adhere to well-established best practice protocols to ensure the safe and effective delivery of treatments. This includes standardized lab testing as it pertains to the specific therapy as well as any other lab testing you request us to obtain.
2. **On-site MD/NP:** Adverse drug events can be promptly addressed. All patients will undergo a pre-infusion evaluation that will assess any concerns of immunosuppression (e.g. obtaining and managing quantiferon, Coccidioides serology, hepatitis serology). This will remove this burden from the referring physician
3. **Comprehensive Care:** This includes pre-infusion assessments, monitoring during the infusion process, and post-infusion follow-up to address any concerns or side effects promptly.
4. **Personalized Care:** We understand that each patient is unique, and we tailor our services to meet their individual needs and preferences. Our goal is to create a supportive and comfortable environment.
5. **Seamless Communication:** We pride ourselves in easy access to us that allows for smooth communication. If you have patient concerns or desire changes in therapy, any time you can call our office at 925-947-2334 and speak with Jean or Heather. You can also call our physician on-call (check Amion in the CCRMC system). Our team provides timely updates and all patient interactions are recorded in EPIC.

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6. We strive to make the referral and scheduling process as smooth as possible for both patients and referring physicians. All you or your staff need to do is call our office to refer a CCHP patient. We will need the patient's name, DOB, diagnosis, and therapy (dosing and frequency). We will obtain authorization, call the patient, and obtain appropriate pre-infusion labs if not yet obtained. Our goal is to have the patient assessed by us and receive the first infusion within 1 week of the referral.

By partnering with BASS ID for biologic infusions, you can rest assured that your patients are in good hands. **Again, to refer patients, call Jean or Heather at 925 947-2334.**

If you have any questions, you can email:

Dr Ron Wasserman (rwasserman@iddoctors.com)

and

Clinical Coordinator Jean Choy (jean@iddoctors.com)

BASS ID: Drs Wasserman, Bennett, Perlroth, Sharma, Malik, Cheng, Mishra, Molnar and Molitorisz

PROVIDER NETWORK TRAININGS



NEXT MEETING DATES:

JULY 30, 2024

OCTOBER 30, 2024

ZOOM TIMES: 12:00 PM—1:30 PM

TO REGISTER, PLEASE EMAIL:

MARIA.LAICO@CCHEALTH.ORG

Provider Practice Changes

Contra Costa Health Plan (CCHP) is required by the Department of Health Care Services (DHCS) and Department of Managed Health Care (DMHC) to ensure all provider information listed in our Provider Directories is accurate. Provider Directory information can be viewed online at [Provider Directory | Contra Costa Health \(cchealth.org\)](http://ProviderDirectory|ContraCostaHealth.cchealth.org). If incorrect data is displayed, updates can be made online at [Provider Directory | Contra Costa Health \(cchealth.org\)](http://ProviderDirectory|ContraCostaHealth.cchealth.org) by clicking on the button labeled report an error in provider directory. This allows a provider to list the correct information which is automatically sent directly to CCHP for correction. CCHP reviews and makes the appropriate corrections.

In addition, please notify us immediately about upcoming changes to your practice, such as a new address or suite number, phone, fax, tax identification number* (TIN), ownership or group name change*, provider additions or deletions, or any new practice limitations through e-mail, fax or mail:

Contra Costa Health Plan | Provider Relations
595 Center Ave., Ste. 100, Martinez, CA 94553
Fax (925) 608-9400 | ProviderRelations@cchealth.org

CCHP also sends quarterly electronic Provider/Facility Network Update surveys through email as another method of having providers confirm the accuracy of their data. This process is also required by DHCS and DMHC and failure to respond may result in delay of payment or reimbursement of a claim and removal from the provider directories. If you have any questions, please contact Provider Relations at Providerrelations@cchealth.org.

* An updated W-9 form is required for any changes to a group name, new ownership, or TIN.

Welcome Community Provider Network (CPN) Providers

Primary Care Providers

Calvin Gilbert, NP	Lyon-Martin, San Francisco	Mid-level - Family Medicine
Ryan Gorton, MD	Lyon-Martin, San Francisco	Emergency Medicine
Jacqueline Richter, MD	LifeLong Medical Care, Berkeley	Geriatric Medicine
Sarah Vela, NP	San Francisco	
Lenae Stevens, PA	La Clinica De La Raza, Pittsburg	Family Medicine
Kate Christensen, MD	La Clinica De La Raza, Pittsburg	Internal Medicine
Eric Skoblar, MD	LifeLong Medical Care, San Pablo	Family Medicine
Brett London, DO	LifeLong Medical Care, Richmond	Family Medicine
Cheryl Eldridge, PA	John Muir Physician Network, Walnut Creek, Pleasant Hill	Mid-level - Cardiovascular Disease
Zachary Ladner, PA	John Muir Physician Network, Brentwood	Mid-level - Cardiology
Rochelle Colchico, NP	John Muir Physician Network, Walnut Creek	Mid-level - Psychiatry
Jessica Stanton, MD	John Muir Physician Network, Walnut Creek	Family Medicine
Louisa Frazier, PA	, San Francisco	Mid-level - Family Medicine
Ana Padula, MD	LifeLong Medical Care, San Pablo	Internal Medicine
Thi Nguyen, MD	, Oakland	Pediatrics
Ana Chang, PA	, Oakland	Family Medicine
Charmaine Santos, PA	, Antioch	Family Medicine
Julissa Haya, NP	New Day Pediatrics, Berkeley	Pediatrics
Christine Salera, NP	LifeLong Medical Care, San Pablo	Family Medicine
Norma Ruiz Iniguez, FNP	La Clinica De La Raza, Oakland, Concord	Family Medicine
Erin Gutierrez, MD	La Clinica De La Raza, Oakland	Pediatrics
Danielle Williams, MD	Roots Community Health Center, Oakland	Family Medicine

Specialty Care Providers

Sang Won Yoon, L.Ac.	Boomerang Healthcare - Integrated Pain Management, Walnut Creek, Brentwood	Acupuncture
Pamela Vincent, MD	Bright Heart Health Medical Group, Walnut Creek	Addiction Medicine, Psychiatry
Melissa Hutton, PA	Comprehensive Allergy Services, Fremont, Oakland	Allergy & Immunology
Swetha Gurajala, PA	Comprehensive Allergy Services, Fremont, Oakland	Allergy & Immunology
Umesh Sabharwal, MD	Comprehensive Allergy Services, Fremont, Oakland	Allergy & Immunology
Ann Cho, BCBA	Antioch	Behavior Analysis
Lauren Price, BCBA	Autism Behavior Services Inc, Santa Ana	Behavior Analysis
Pamee Sapasap, BCBA	Butterfly Effects, LLC, Stockton	Behavior Analysis
Rashi Jain, BCBA	Autism Learning Partners, LLC, San Leandro	Behavior Analysis
Rebecca Pruitt, BCBA	East Bay ABA, San Ramon	Behavior Analysis
Stephanie Wilkes, BCBA	Trumpet Behavioral Health LLC, Dublin	Behavior Analysis
Yadira Vergara, BCBA	Autism Learning Partners, LLC, San Jose, San Mateo	Behavior Analysis
Jessica Marcus-Gomez, BCBA	Center for Social Dynamics, Martinez	Behavior Analysis, Qualified Autism Professional

Welcome Community Provider Network (CPN) Providers

Specialty Care Providers (Continued)

Lynn Galliano, BCBA	ABA Plus Inc., San ramon	Behavior Analysis, Qualified Autism Provider
Yasin Johnson, BCBA	Center for Social Dynamics, Oakland	Behavior Analysis, Qualified Autism Provider
Anurag Gupta, MD	John Muir Physician Network, Concord	Cardiovascular Disease, Clinical Cardiac Electrophysiology
Amanda Maharaj, DC	LifeLong Medical Care, San pablo	Chiropractor
Jared Avakian, DC	Boomerang Healthcare - Integrated Pain Management, Concord	Chiropractor
Kai Atacador Lynch, ASW	Lyon-Martin, San francisco	Clinical Social Work
Oliver Seary, ASW	Lyon-Martin, San francisco	Clinical Social Work
Sherrod Floyd, LCSW	UniHealth, LCSW, PC, San francisco	Clinical Social Work
DeAnn Lott, LCSW	Concord	Clinical Social Work, Substance Abuse Professional
Victor Washington, LCSW	Family Spring Psychology, P.C., Berkeley	Clinical Social Work, Substance Abuse Professional
Jessica Wilson, RD	Lyon-Martin, San francisco	Dietitian
Rajinder Singh, RD	, Pleasanton, Concord	Dietitian
Aiysha Davis,	Martinez	Doula
Graciela Vaca Navarro,	, Martinez	Doula
Paria Zarghamravanbakhsh, MD	Jiva Health, Concord, Antioch	Endocrinology
Lindsay Chong, MD	John Muir Physician Network, Concord	Endocrinology, Diabetes and Metabolism
Yeran Bao, MD	John Muir Physician Network, Concord	Endocrinology, Diabetes and Metabolism
Alan Scott, MD	John Muir Physician Network, Walnut creek	Family Medicine
Amrit Toor, MD	John Muir Physician Network, Walnut creek	Family Medicine
Anita Vasudevan, MD	Planned Parenthood, Walnut creek	Family Medicine
Ann Lockhart, MD	John Muir Physician Network, Walnut creek	Family Medicine
Cynthia Ashbrook, MD	John Muir Physician Network, Walnut creek	Family Medicine
Diane Wight, MD	John Muir Physician Network, Walnut creek	Family Medicine
Elise Lewis, MD	John Muir Physician Network, Walnut creek	Family Medicine
James Liang, DO	John Muir Physician Network, Walnut creek	Family Medicine
Joseph Toscano, MD	John Muir Physician Network, Walnut creek	Family Medicine
Lance Gee, MD	John Muir Physician Network, Walnut creek	Family Medicine
Linda Kornguth, MD	John Muir Physician Network, Walnut creek	Family Medicine
Montida Fleming, MD	Planned Parenthood, Walnut creek	Family Medicine
Priti Patel, MD	John Muir Physician Network, Walnut creek	Family Medicine
Robert Armstrong, DO	John Muir Physician Network, Walnut creek	Family Medicine
Jennifer Karlin, MD	Planned Parenthood, San francisco	Family Medicine, Family Planning
Gilleann Rivera, NP	Planned Parenthood, Walnut creek	Family Nurse Practitioner
Janette Carlin, NP	John Muir Physician Network,	Family Nurse Practitioner
Kaite Go, NP	Planned Parenthood, Concord	Family Nurse Practitioner

Welcome Community Provider Network (CPN) Providers

Specialty Care Providers (Continued)

Marin Gibson, NP	Planned Parenthood,	Family Nurse Practitioner
Briana Mitchell, NP	Planned Parenthood, Fairfield	Family Planning
Cinthia Rojas, NP	John Muir Physician Network, Walnut creek	Gastroenterology
Ki Yip, HAD	Connect Hearing, Inc., Oakland, Livermore	Hearing Instrument Specialist
Tyler Kang, MD	BASS Medical Group, Inc., Walnut creek	Hematology/Oncology
Chris Burkhart, MD	John Muir Physician Network, Walnut creek	Internal Medicine
David Bressler, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Maki Matsumura, NP	John Muir Physician Network, Walnut creek	Internal Medicine
Maureen Stevenson, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Sue Knight, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Umesh Gheewala, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Loreta Kalish, MD	John Muir Physician Network, Walnut creek	Laboratory Medicine
Bianca Martinez-Salazar, MFT	Family Spring Psychology, P.C., Berkeley	Mental Health Therapist/Counselor
Daniya Ahmed, MFT	Serene Health, San diego	Mental Health Therapist/Counselor
Edwynna Piert, MFT	Serene Health, San diego	Mental Health Therapist/Counselor
Jasmine Cazares, MFT	Serene Health, San diego	Mental Health Therapist/Counselor
Joel Samaniego, Psy.D	Serene Health, San diego	Mental Health Therapist/Counselor
Laura Curry, MFT	, Georgetown	Mental Health Therapist/Counselor
Morgan Hong, MFT	Family Spring Psychology, P.C., Berkeley	Mental Health Therapist/Counselor
Natalie Lang, MFT	Planned Parenthood, Concord	Mental Health Therapist/Counselor
Shelzea Zamora, APCC	Serene Health, San diego	Mental Health Therapist/Counselor
Charlie Myers, NP	John Muir Physician Network, Walnut creek, Pleasant hill	Mid-level - Cardiology
Giovana Meza, PA	John Muir Physician Network, Pleasanton	Mid-level - Cardiology
Jesse Hsiao, NP	John Muir Physician Network, Pleasanton	Mid-level - Cardiology
Lindsay Wagner, PA	John Muir Physician Network, Concord	Mid-level - Cardiology
Lynne Shaw, PA	John Muir Physician Network, Concord	Mid-level - Cardiology
Padmaja Murtinty, PA	John Muir Physician Network, Pleasanton	Mid-level - Cardiology
Alixandra Cheitlin, NP	Planned Parenthood, Concord	Mid-level - Family Planning
Christianne Collinson, NP	Planned Parenthood, San francisco	Mid-level - Family Planning
Jessica Delgado, NP	Planned Parenthood, Richmond	Mid-level - Family Planning
Julia Lowenthal, NP	Planned Parenthood, Concord	Mid-level - Family Planning
Carmen Yung, NP	John Muir Physician Network, Walnut creek	Mid-level - Gastroenterology
Jonelle Donica Pelobello, NP	John Muir Physician Network, Orinda	Mid-level - Obstetrics and Gynecology
Megan Smith, PA	Golden State Orthopedics & Spine, Walnut creek, San ramon	Mid-level - Orthopaedic Surgery Assistant
Nataliya Stogniy, PA	Vital Total Health Medical Group, INC, Walnut creek	Mid-level - Psychiatry
Yajuan Leonard, NP	John Muir Physician Network, Walnut creek	Mid-level - Psychiatry
Kristen Lateiner, NP	JMPN - John Muir Cancer Services, Walnut creek	Mid-level - Surgery - General
Rachel Valdez, NP	John Muir Physician Network, Walnut creek	Mid-level - Surgery - General
Aklil Rostai, PA	John Muir Physician Network, Walnut creek	Mid-level - Urgent Care
Debra Goettsch, PA	STAT Med Urgent Care, Concord	Mid-level - Urgent Care
Frances Prado, NP	John Muir Physician Network, Walnut creek, Concord, Brentwood, San ramon, Berkeley	Mid-level - Urgent Care
Helen Lu, NP	John Muir Physician Network, Walnut creek	Mid-level - Urgent Care

Welcome Community Provider Network (CPN) Providers

Specialty Care Providers (Continued)

Marin Gibson, NP	Planned Parenthood,	Family Nurse Practitioner
Briana Mitchell, NP	Planned Parenthood, Fairfield	Family Planning
Cinthia Rojas, NP	John Muir Physician Network, Walnut creek	Gastroenterology
Ki Yip, HAD	Connect Hearing, Inc., Oakland, Livermore	Hearing Instrument Specialist
Tyler Kang, MD	BASS Medical Group, Inc., Walnut creek	Hematology/Oncology
Chris Burkhart, MD	John Muir Physician Network, Walnut creek	Internal Medicine
David Bressler, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Maki Matsumura, NP	John Muir Physician Network, Walnut creek	Internal Medicine
Maureen Stevenson, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Sue Knight, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Umesh Gheewala, MD	John Muir Physician Network, Walnut creek	Internal Medicine
Loreta Kalish, MD	John Muir Physician Network, Walnut creek	Laboratory Medicine
Bianca Martinez-Salazar, MFT	Family Spring Psychology, P.C., Berkeley	Mental Health Therapist/Counselor
Daniya Ahmed, MFT	Serene Health, San diego	Mental Health Therapist/Counselor
Edwynna Piert, MFT	Serene Health, San diego	Mental Health Therapist/Counselor
Jasmine Cazares, MFT	Serene Health, San diego	Mental Health Therapist/Counselor
Joel Samaniego, Psy.D	Serene Health, San diego	Mental Health Therapist/Counselor
Laura Curry, MFT	, Georgetown	Mental Health Therapist/Counselor
Morgan Hong, MFT	Family Spring Psychology, P.C., Berkeley	Mental Health Therapist/Counselor
Natalie Lang, MFT	Planned Parenthood, Concord	Mental Health Therapist/Counselor
Shelzea Zamora, APCC	Serene Health, San diego	Mental Health Therapist/Counselor
Charlie Myers, NP	John Muir Physician Network, Walnut creek, Pleasant hill	Mid-level - Cardiology
Giovana Meza, PA	John Muir Physician Network, Pleasanton	Mid-level - Cardiology
Jesse Hsiao, NP	John Muir Physician Network, Pleasanton	Mid-level - Cardiology
Lindsay Wagner, PA	John Muir Physician Network, Concord	Mid-level - Cardiology
Lynne Shaw, PA	John Muir Physician Network, Concord	Mid-level - Cardiology
Padmaja Murtinty, PA	John Muir Physician Network, Pleasanton	Mid-level - Cardiology
Alixandra Cheitlin, NP	Planned Parenthood, Concord	Mid-level - Family Planning
Christianne Collinson, NP	Planned Parenthood, San francisco	Mid-level - Family Planning
Jessica Delgado, NP	Planned Parenthood, Richmond	Mid-level - Family Planning
Julia Lowenthal, NP	Planned Parenthood, Concord	Mid-level - Family Planning
Carmen Yung, NP	John Muir Physician Network, Walnut creek	Mid-level - Gastroenterology
Jonelle Donica Pelobello, NP	John Muir Physician Network, Orinda	Mid-level - Obstetrics and Gynecology
Megan Smith, PA	Golden State Orthopedics & Spine, Walnut creek, San ramon	Mid-level - Orthopaedic Surgery Assistant
Nataliya Stogniy, PA	Vital Total Health Medical Group, INC, Walnut creek	Mid-level - Psychiatry
Yajuan Leonard, NP	John Muir Physician Network, Walnut creek	Mid-level - Psychiatry
Kristen Lateiner, NP	JMPN - John Muir Cancer Services, Walnut creek	Mid-level - Surgery - General
Rachel Valdez, NP	John Muir Physician Network, Walnut creek	Mid-level - Surgery - General
Aklil Rostai, PA	John Muir Physician Network, Walnut creek	Mid-level - Urgent Care
Debra Goettsch, PA	STAT Med Urgent Care, Concord	Mid-level - Urgent Care
Frances Prado, NP	John Muir Physician Network, Walnut creek, Concord, Brentwood, San ramon, Berkeley	Mid-level - Urgent Care
Helen Lu, NP	John Muir Physician Network, Walnut creek	Mid-level - Urgent Care

Welcome Community Provider Network (CPN) Providers

Specialty Care Providers (Continued)

Rita Keileh, PA	John Muir Physician Network, Walnut creek	Mid-level - Urgent Care
Elizabeth Davis, PA	John Muir Physician Network, Walnut creek	Mid-level - Urology
Jessica Couch, PA	John Muir Physician Network,	Mid-level - Urology
Nicoya Pucci, CNM	Planned Parenthood, Clear lake	Midwife
Blake Zwerling, MD	Planned Parenthood,	Obstetrics And Gynecology
Jennifer Kerns, MD	Planned Parenthood, San francisco	Obstetrics And Gynecology
Nicole Araneta, MD	John Muir Physician Network, Walnut creek	Obstetrics And Gynecology
Christianne Wa, MD	Bay Area Retina Associates, Antioch, Walnut creek	Ophthalmology
Connie Choi, OD	La Clinica De La Raza, Oakland, Concord	Optometry
Jeff Chen, MD	Boomerang Healthcare - Integrated Pain Management, Walnut creek, Brentwood	Pain Management, Physical Medicine and Rehabilitation
Sepi Mahooti, MD	Genesis Healthcare Partners, P.C., San pablo	Pathology
Shehlanoor Huseni, MD	Jiva Health, Concord, Antioch	Pediatric Sleep Medicine, Sleep Medicine
Lingie Chiu, MD	John Muir Physician Network, Walnut creek	Pediatrics
Meaghan Pugh, NP	John Muir Physician Network, Pleasant hill	Pediatrics
Ilce Rodriguez-Avila, SLP	Child's Play Therapy Services, PC, Lafayette, Pleasanton	Pediatrics, Speech Pathology
Suleiman Lapalme, MD	John Muir Physician Network, Walnut creek	Physical Medicine and Rehabilitation
Apoorva Phadke, PT	Back on Track Physical Therapy, Pleasanton	Physical Therapy
Pardis Esmaeili-Firidouni, PT	Lyon-Martin, San francisco	Physical Therapy
Lydia Yun, DPM	Sun Healthcare and Surgery Group, Inc., Martinez	Podiatry
Thomas Greely, MD	John Muir Physician Network, Walnut creek	Primary Care
Stacy Sphar, NP	Bright Heart Health Medical Group, Walnut creek	Psychiatric-Mental Health Nurse Practitioner
David Kan, MD	Bright Heart Health Medical Group, Walnut creek	Psychiatry
Jamison Bradshaw, DO	, San francisco	Psychiatry
Jon Stenson, PhD	Berkeley	Psychology
Steven Brown, MD	TeleMed2U, Roseville	Pulmonary Disease
Alexa Sanchez, BCBA	KYO Autism Therapy, LLC, Hayward, Concord	Qualified Autism Professional
Alayna Gerstel, BCBA	KYO Autism Therapy, LLC, Concord	Qualified Autism Provider
Anjelica Meliala, MS	FirstSteps for Kids - Bay Area, Walnut creek	Qualified Autism Provider
Annika Stanley, BCBA	Butterfly Effects, LLC, Stockton	Qualified Autism Provider
Ashley Scherry, BCBA	Butterfly Effects, LLC, Stockton	Qualified Autism Provider
Celia Medina, BCBA	Autism Learning Partners, LLC, San jose, San mateo	Qualified Autism Provider
Cheyenne Tipton, BCBA	FirstSteps for Kids - Bay Area, Walnut creek	Qualified Autism Provider
Christian Borrromeo, BCBA	KYO Autism Therapy, LLC, Concord	Qualified Autism Provider
Courtney Wolff, BCBA	Autism Learning Partners, LLC, San jose	Qualified Autism Provider
Emily Lambert, BCBA	BM Behavioral Center, LLC, Hercules	Qualified Autism Provider
Jamie Valdez, BCBA	Behavioral Health Works, Inc., Hayward	Qualified Autism Provider
Jaspreet Dhaliwal, BCBA	Adapt: A Behavioral Collective, Inc., San francisco	Qualified Autism Provider
Kimberly Solorio, BCBA	KYO Autism Therapy, LLC, Concord	Qualified Autism Provider
Luis Ortega, BCBA	Inclusive Hearts - Ability Development Center, Madera	Qualified Autism Provider
Marjorie Lacap, BCBA	Adapt: A Behavioral Collective, Inc., San francisco	Qualified Autism Provider
Matthew McAlear, BCBA	FirstSteps for Kids - Bay Area, Walnut creek	Qualified Autism Provider

Welcome Community Provider Network (CPN) Providers

Specialty Care Providers (Continued)

Nicole Werdesheim, BCBA	Behavior Treatment and Analysis, Inc., Walnut creek	Qualified Autism Provider
Ronald He, BCBA	Star Future, Inc, Pleasanton	Qualified Autism Provider
Roxana Bloch, BCBA	Behavior Treatment and Analysis, Inc., Walnut creek	Qualified Autism Provider
Shainamel Pilapil, MA	Adapt: A Behavioral Collective, Inc., San francisco	Qualified Autism Provider
Danielle Smith, SLP	Expressable Speech-Language Pathology, PC, Los angeles	Speech Pathology
Oneida Chi, SLP	Lyon-Martin, San francisco	Speech Pathology
Rebekah Ferrante, SLP	Child's Play Therapy Services, PC, Lafayette	Speech Pathology
Tiffany Simpson, SLP	Expressable Speech-Language Pathology, PC, Los angeles	Speech Pathology
Violet Kozloff, SLP	Child's Play Therapy Services, PC, Lafayette	Speech Therapy
Isabelle Struve, MD	Walnut creek	Surgery - General
Sabrina Torres, PA	BASS Medical Group, Inc., Walnut creek	Surgery - General
Taylor Cuenin, PA	Walnut creek	Surgery - Neurological
Kathy Nguyen, NP	John Muir Physician Network,	Urology
Shauna Weisburst, NP	Planned Parenthood, San francisco	Womens Health
Benjamin Lopez, PA	CEP America - AUC PC, Walnut creek	Wound Care

Facilities

Facility Name	Facility Type	City
JM Homecare Services, LLC	Community Supports	San Ramon
La Clinca De La Raza- Monument	Enhanced Care Management	Concord
JM Homecare Services, LLC	Enhanced Care Management	San Ramon
Seneca Family of Agencies	Enhanced Care Management	Oakland
La Clinca De La Raza Pittsburg Medical	Enhanced Care Management	Pittsburg
La Clinca De La Raza- Oakley	Enhanced Care Management	Oakley
DELTA MEDICAL PHARMACY ANTIOCH	Pharmacy	Antioch
CENTRAL RX PHARMACY	Pharmacy	Brentwood
MINI PHARMACY	Pharmacy	Los Angeles



Welcome Contra Costa Regional Medical Center (CCRMC) Providers

Moremi Gravesandy Vassall, MD	Psychiatry,
Rebecca Nkrumah, MD	Psychiatry,
Tyler Torrico, MD	Psychiatry,
Manabu Manandhar, DDS	Dentist,
Marc Kudisch, MD	Gastroenterology,
Stephanie Strozier, NP	Mid-level - Family Medicine,
Rupali Saraiya, MD	Emergency Medicine,
Arlene Sussman, MD	Radiology,
Samuel Bone, MD	Diagnostic Radiology,
Jacqueline Johal-Morales, MD	Family Medicine,
Sanjiv Sheel, MD	Diagnostic Radiology,
Waikeong Wong, MD	Diagnostic Radiology,
Stephanie Glick, MD	Family Medicine, San pablo
Stephannie Ratcliff, MD	Family Medicine, Martinez
Cory Fung, NP	Mid-level - Family Medicine,
Charles Henry,	Diagnostic Radiology, Martinez
Barbara McCorvey, MD	Radiology, Martinez
Sherilyn Baughman, MD	Dermatology, Martinez
Jennifer Gutierrez,	, Martinez
Miriam David,	Diagnostic Radiology, Martinez
Lawrence Briggs,	Radiology, Martinez
Oana Mischiu,	Diagnostic Radiology, Martinez
Jeffrey Wensel, MD	Diagnostic Radiology,
Una Morris, MD	Diagnostic Radiology,
Sharon Hood, MD	Obstetrics And Gynecology, Perinatology,
Hyun-Kee Lee, DDS	Dentist,
Gregg Pottorff, MD	Orthopaedics,

INTERPRETER SERVICES

**PROVIDERS NEEDING HELP
WITH INTERPRETER
SERVICES OR NEEDING
HELP WITH ARRANGING
FACE-TO-FACE AMERICAN
SIGN LANGUAGE
INTERPRETATION SERVICES
MAY CALL
877-800-7423 OPTION 4.**

**CCHP ONLINE RESOURCES:
[WWW.CCHEALTH.ORG/HEALTH-
INSURANCE/
INFORMATION-FOR-PROVIDERS](http://WWW.CCHEALTH.ORG/HEALTH-INSURANCE/INFORMATION-FOR-PROVIDERS)
UNINSURED INDIVIDUALS:
[WWW.CCHEALTH.ORG/HEALTH-
INSURANCE](http://WWW.CCHEALTH.ORG/HEALTH-INSURANCE)**



**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://WWW.CCHEALTH.ORG/HEAL
THINSURANCE/
INFORMATION-FOR-PROVIDERS](https://www.cchealth.org/health-insurance/information-for-providers) AND
DOWNLOAD THE PDF UNDER THE
CCLINK LOGO
(RIGHT SIDE OF SCREEN).**

**ELECTRONIC CLAIM SUBMISSIONS
ENROLL IN CCHP'S EDI PROGRAM SO YOU CAN SEND CLAIMS
AND RECEIVE PAYMENTS ELECTRONICALLY.
FOR MORE INFORMATION, EMAIL:
EDISUPPORT@CCHEALTH.ORG**

CCHP KEY CONTACTS

595 CENTER AVE. SUITE 100
MARTINEZ, CA 94553
WWW.CCHEALTH.ORG

PROVIDER ONLINE FORMS AND RESOURCES

[HTTPS://CCHEALTH.ORG/HEALTH-INSURANCE/INFORMATION-FOR-PROVIDERS](https://cchealth.org/health-insurance/information-for-providers)

Authorization Department/Hospital Transition Nurse: 877-800-7423, option 3

- Email Auth Questions (do not email auth requests): HPauthorizations@cchealth.org
- Email SNF Questions: CCHPSNF-auth@cchealth.org
- Fax Numbers for Prior Authorization Requests:

Medi-Cal Member Authorization eFax Numbers:

Out of Area (Hospital) Face Sheet: Fax: (925) 313-6645

Mental Health (only if not yet on portal): Fax: (925) 313-6196

Commercial Member Authorization eFax Numbers:

Confidential Mental Health (if not on portal): Fax: (925) 313-6196

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

- Noncontracted providers and out-of-area hospitals: Fax: 925-313-6645
- Email Auth Questions (do not email auth requests): CCHPauthorizations@cchealth.org

Behavioral Health Unit (BHAU): 877-661-6230, option 4

- Requests should be submitted through ccLink or the ccLink Provider Portal.
- Fax for providers waiting for ccLink access: 925-252-2626
- Email Behavioral Health Related Questions: CCHPBHD@cchealth.org

ccLink Provider Portal:

ccLink Portal Application: <https://www.cchealth.org/health-insurance/informationfor-providers>

- Email ccLink Application and Questions: CCHPportalsupport@cchealth.org
- IT Support to reset password or access issues: 925-957-7272

Claims Department: 877-800-7423, option 5

- Email Claims Questions: ClaimStatus@cchealth.org

Facility Site Review Department Email: CCHPfsr@cchealth.org

Member Eligibility and PCP Assignment: 877-800-7423, option 1

- ccLink Provider Portal (web based eligibility checks): cclinkproviderportal.cchealth.org

Member Services Department: 877-800-7423, option 7

Pharmacy Department: 877-800-7423, option 2

Provider Relations Department: 877-800-7423, option 6 Fax: 925-608-9411

Email General Questions: ProviderRelations@cchealth.org

Email Contract Related Questions: CCHPcontracts@cchealth.org

Email Credentialing Related Questions: CCHPcredentialing@cchealth.org