July 30, 2024

Welcome to Contra Costa Health Plan 2024 Q3 Provider Network Training

Irene J. Lo, Chief Medical Officer

Contra Costa Health Plan

Agenda

Agenda Items	Presenter
1. Welcome and Introduction	*Irene J. Lo, MD* Chief Medical Officer, CCHP
2. Abortion Services	***Guest Speaker - Sarah McNeil, MD*** Medical Staff President, Contra Costa Regional Medical Center
3. Foster Youth Transition	*Pasia Gadson, MSN, AGPCNP-BC* Director of CalAIM, CCHP
4. Language Services	*Otilia Tiutin PhD, DNM* Cultural and Linguistic Services Program Manager, CCHP
5. Authorization/Utilization Management Updates	*John V. Carpetta* Authorization/Utilization Management Clerical Supervisor
6. Chief Medical Officer Updates to include: 1. CPT Code Search Tool	*Irene J. Lo, MD* Chief Medical Officer, CCHP

Abortion Services

Sarah McNeil, MD, Medical Staff President

Contra Costa Regional Medical Center

(Dr. McNeil will screenshare)

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2025 Mandatory Enrollment for Foster Children and Youth

Pasia Gadson, Director of CalAIM Programs and Transitional Care Services

July 30th, 2024

Agenda

- Overview
- Background and Rationale
- Kay Changes and Benefits
- Provider Responsibilities and Support

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

Initiative Overview:

Starting January 1, 2025, DHCS mandates enrollment of current and former Foster Care children and youth in Single Plan Counties from FFS Medi-Cal to Managed Medi-Cal Plans.
Contra Costa Health Plan (CCHP) serves as the Single Plan in Contra Costa County.

Purpose:

Enhance continuity and quality of care for foster youth.
Provide coordinated and comprehensive health services.

Transition Details:

Current and former Foster Care children and youth currently in FFS Medi-Cal will be enrolled into CCHP's Managed Medi-Cal Plan.
CCHP will welcome these individuals into its membership.

Background and Rationale

Foster Youth: A Vulnerable Population

- Unique and complex healthcare needs.
- Historically reliant on Fee-For-Service (FFS) Medi-Cal.

Challenges of FFS Medi-Cal:

- Fragmented care.
- Limited access to specialized services.

Transition to Managed Medi-Cal Plans:

- Enhanced integration of healthcare services.
- Emphasis on preventive care and care coordination.
- Access to a broader network of providers.

Benefits for Foster Youth:

- Coordinated and comprehensive health services.
- Improved continuity of care.
- Better management of healthcare needs.

Key Changes and Benefits

Continuity of Care	• CCHP will accept and review requests for Continuity of Care to maintain trusted relationships and access to needed services post-2025 transition.
Enhanced Care Management	• Dedicated care coordinators will assist foster youth in navigating the healthcare system, ensuring timely access to medical and behavioral health services.
Comprehensive Provider Network	• Access to CCHP's extensive network of primary care providers, specialists, and behavioral health professionals for continuous and comprehensive care.
Preventive Services	• Emphasis on preventive care, including regular check-ups, immunizations, and screenings, to proactively address health issues and maintain overall well-being.
Behavioral Health Integration	• Integration of behavioral health services with primary care to provide a holistic approach to mental and physical health needs of foster youth.
Support Services	• Additional services such as transportation assistance and health education to reduce barriers to care and promote health literacy among foster youth.

Provider Responsibilities and Support

Timely Appointments:

- Ensure foster youth have timely access to appointments, recognizing their potential need for urgent and consistent care.

Care Coordination:

- Collaborate with CCHP care coordinators to develop and implement comprehensive care plans tailored to each foster youth.

Cultural Competency:

- Provide culturally competent care, acknowledging the diverse backgrounds and experiences of foster youth.

Training and Education:

- Participate in CCHP's training sessions and educational programs to better understand foster youth's needs and available resources.

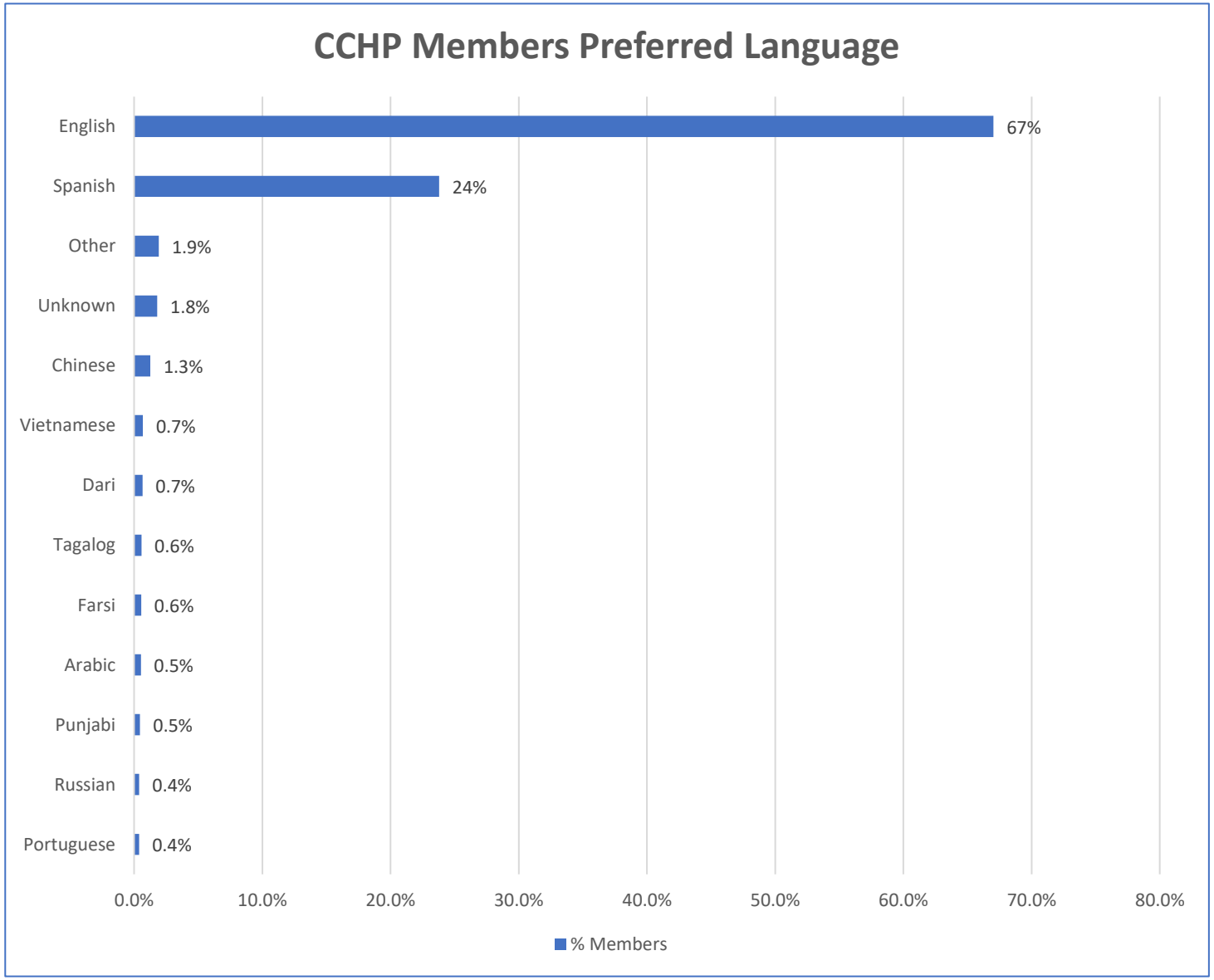
Contra Costa Health Plan is committed to supporting our providers throughout this transition. The transition of foster youth to Managed Medi-Cal plans represents a significant step forward in improving the quality and continuity of care for this vulnerable population. We appreciate your partnership and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

Language Access/ Interpreter Services

By Otilia Tiutin, PhD, Quality Manager Health Equity Department, Contra Costa Health Plan

Language Demographics

We have approx. 1500 providers speaking a foreign language. Most prevalent languages are Spanish 47%, Chinese 10%, Hindi 7%, Farsi 6% and Vietnamese 4%.



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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

CCHP discourages the use of Family and Friends as Interpreters

- They can make mistakes and may create liability issues
- May have their own agenda
- They may hold information from patient due to embarrassment, protection, emotional involvement
- May cause guilt or trauma if they make a mistake

Regulations

Providers are required by regulations to offer free interpreter services as provided by CCHP. Please discourage patients from using their own interpreters, such as family members, friends or minors. If patient insists that they want to use their adult family member, they reserve that right. In that case, document in the patient chart.

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Interpreter Services for CCHP Community Providers

The law requires that we offer free interpreter services or American Sign Language!

Telephonic interpreter services:

DIAL: 1-866-874-3972

- **PROVIDE:** your 6-digit Client ID - **298935** (Mental health providers use ID **525970**)
- **INDICATE:** the language you need or press
  - 1 for Spanish
  - 2 for all other languages and state the name of the language you need

- **PROVIDE:** Additional information:
  - Patient Name
  - Patient Date of Birth
  - Contra Costa Health Plan Member ID
  - Doctor Name
  - Doctor Phone Number

To see if you meet the criteria for face-to-face interpretation, go to our website: https://cchealth.org/healthplan/provider-interpretation.php

- If you need assistance with using interpreters for Telehealth appointments, you can email: otiutin@cchealth.org or call 925-313-6063.

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Translation of documents

If you need assistance with translating documents for CCHP Members,

You can email the document in Word format to:
otiutin@cchealth.org

Access to TTY-(TeleType) for Hearing Impaired and People w/Disabilities

Calling-California Relay Service (CRS) & Speech to Speech Relay Service (STS)

- **Dial 7-1-1** Telecommunication - California Relay Service Program
- **TTY - TeleType** - Helps to type out messages for individuals with hearing impairment or speech disability
- Service is available 24 hours a day, 7 days a week
- Callers have access to unlimited toll-free calls
- Services include directory assistance
- Both TTY and voice callers may make and/or receive calls through CRS

For more information go to:

https://ddtp.cpuc.ca.gov/default1.aspx?id=1483#TTY_Relay_Service

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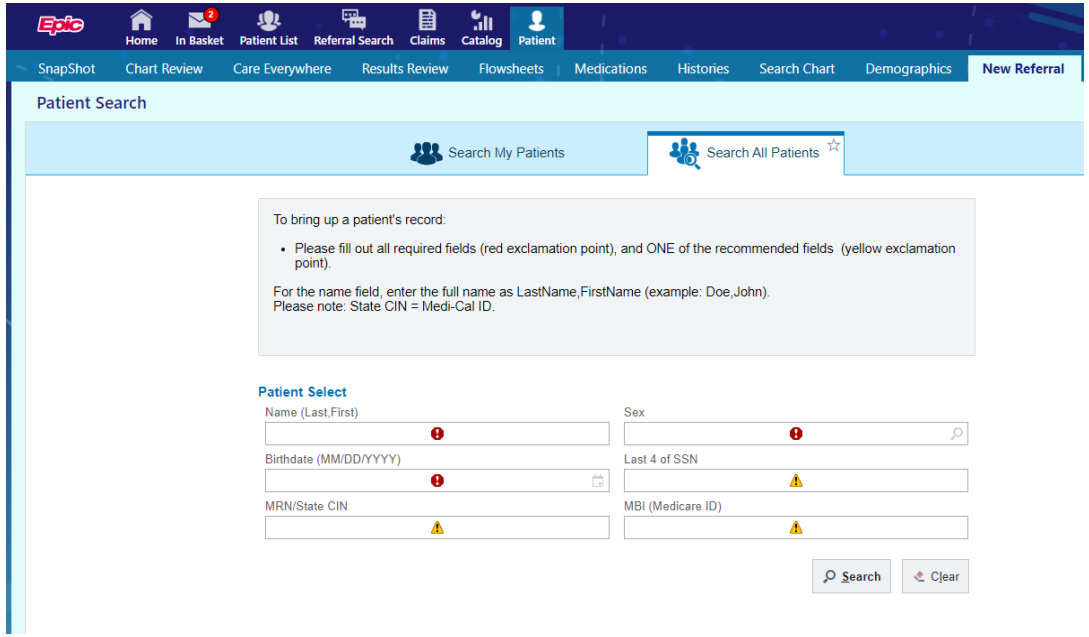
Authorization/ Utilization Management Updates

John Carpetta - Supervisor
Authorization/Utilization Management
Contra Costa Health Plan

Step 1: Select "Create Referral"

Step 2: Locate Patient



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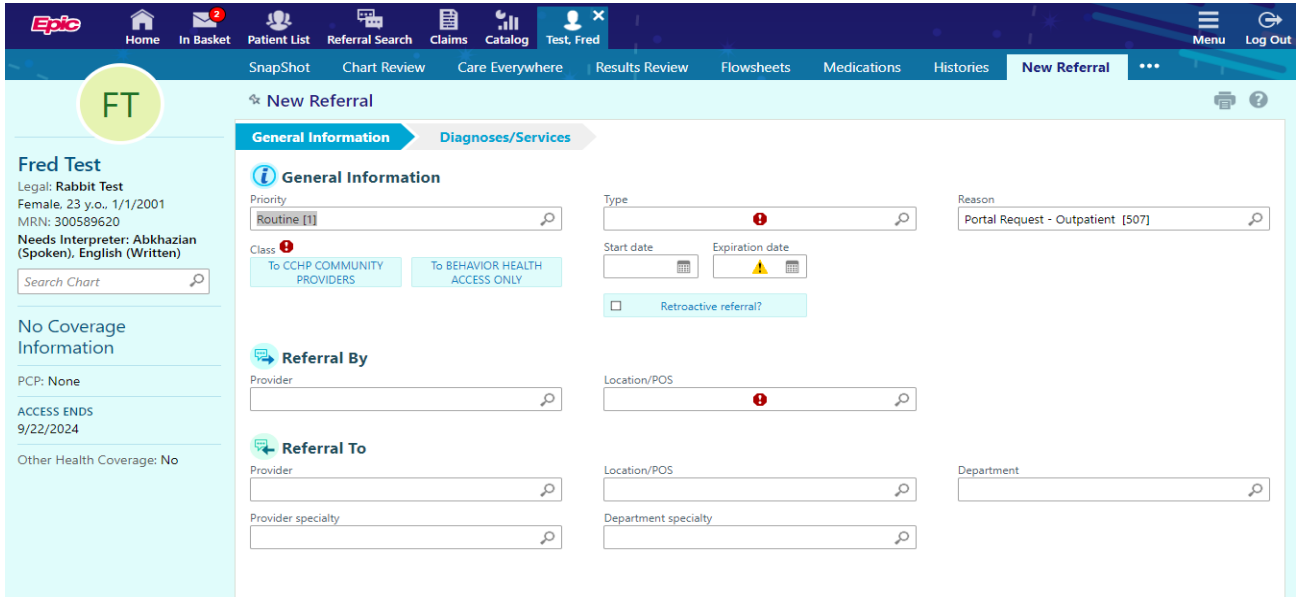
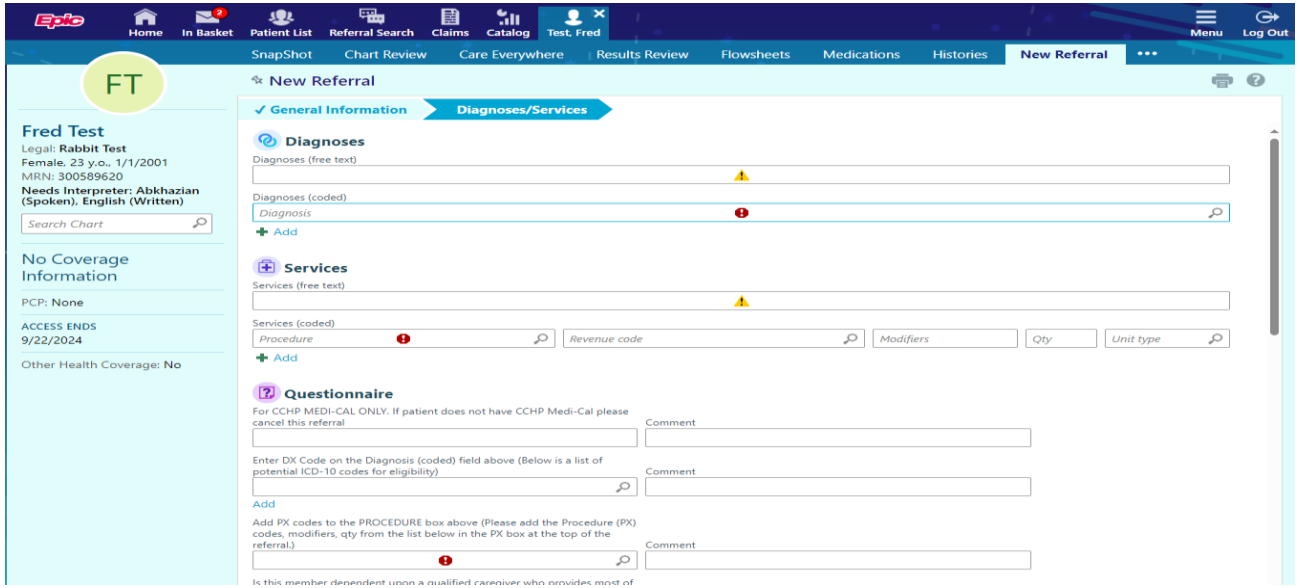
Step 3: Fill Out General Information



Step 4: Diagnosis, Services and Questionnaire



*Any field with this symbol must be filled in to continue

*Find Location/POS before filling out other fields in the Referred by and Referred to section.
*If unable to find, chose "Generic Place of Service" Or "Contracted Place of Service" and then put the full name and address of desired provider in the Notes section.
Chose "Next"

*Entering in the free text *might* make suggestions.

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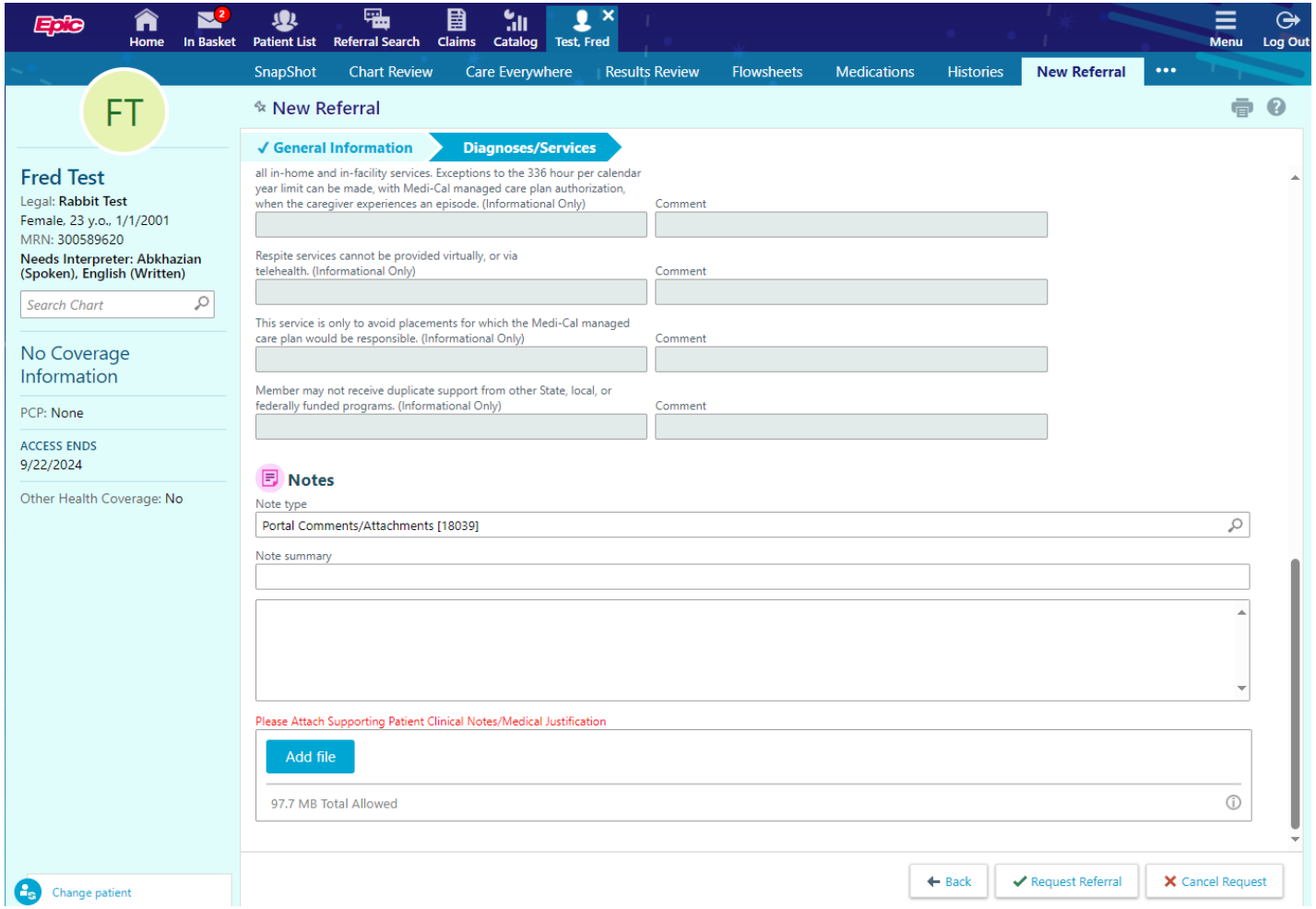
Step 5: Attach clinical notes, medical justification and general notes



*If provider could not be found in Location/POS fields, that information may be added here.
*Additional notes may also be added to the request at any time.
*Once complete click "Request Referral"
*Status of the referral may be checked at any time through the portal.

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No Auth Required

- Many services do not require review by Auth-UM, and are listed on the Prior Authorization Matrix.
- For these services, a referral may be sent to any contracted, in-network provider rather than making a request through the portal.
- A No Auth Required notification is not required to be submitted to claims.
- If any provider requests a No Auth Required, please contact auth-umsupport@cchealth.org and we will reach out to the provider.

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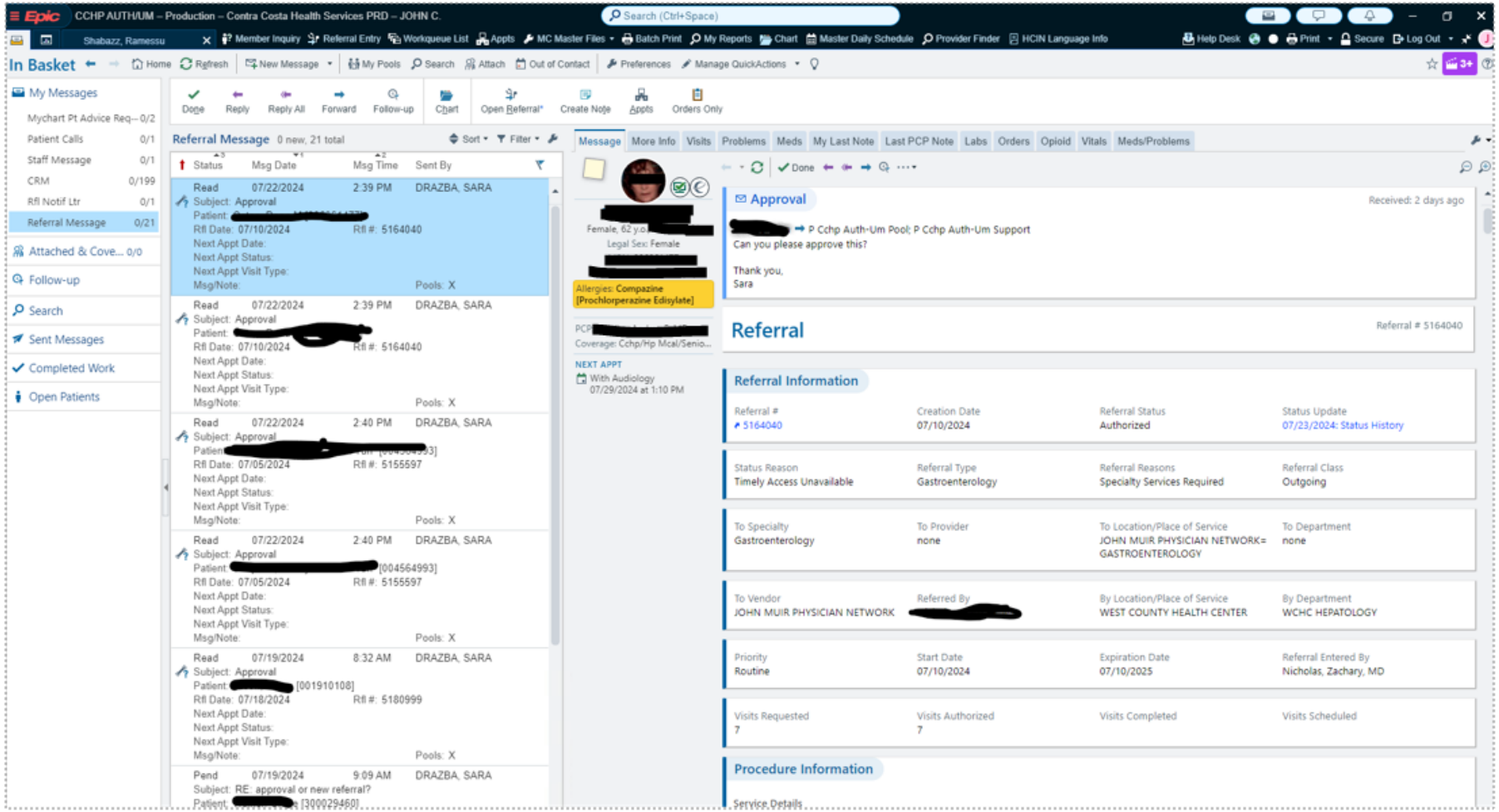
CPN/EPIC In-Box

- Requests for more information or other correspondence may be made through the Epic In-box.
- When CCHP Auth-UM requires more information or clarification to decide, a request may be made through, and responded to, this in-box.



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CMO Updates

Irene Lo, MD, FACS

• *July 30, 2024*

Outline

- Coming Soon
- DME Project
- CPT Code Search Tool

Coming Soon!

- DHCS Audit – 8/19/2024 - 8/30/2024
- Foster Youth Transition – 1/1/2025
- NCQA Audit – Quality and Health Equity - 2025
- D-SNP – 1/1/2026

DME Project

CPT Code Search Tool

Questions?

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Thank You