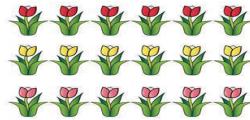




Community Provider Network

CARE MATTERS

Volume 9, Issue 1
Spring 2011



The Contra Costa Health Plan Provider Bulletin

Seniors and Persons with Disabilities (SPDs)

As you may know, the California 1115 Waiver was approved by Centers for Medicare & Medicaid Services (CMS) in early November 2010. This will mean that adult (non-dual) eligible Fee-for-Service Medi-Cal patients who are Seniors and Persons with Disabilities (SPDs), will be mandated to enroll into managed care beginning on June 1, 2011. This process will occur monthly for 12 months until June 2012.

CCHP expects to enroll 900 Medi-Cal Fee-For-Service patients each month. Many of these patients you may currently be seeing. CCHP is dedicated to maintaining continuity of care and to meeting the needs of our providers and members by providing timely and personalized service to both. We will assign new members to you who request you as their PCP. We will also be conducting Health Risk Assessments on all these members and offering high risk members CCHP Case Management. This individual information will be sent to you to use in your patient treatment plan.

CCHP is required to present SPD cultural awareness and sensitivity training to all providers in our network beginning in April to meet the needs of the SPDs. The training will be presented to providers in a variety of formats. The first training will be given at our quarterly CPN meetings in West County on April 19 and in Central/East County on April 26.

Facility Site Reviews

Starting February 1st, the California Department of Health Care Services has added a new component to our Facility Site Reviews called Attachment C. This new tool is aimed at evaluating offices and facilities for disabled accessibility. Its purpose is solely to allow CCHP to offer information to our disabled members, it is NOT scored and there is no related Corrective Action Plan. CCHP Site Reviewers will be measuring doorways, evaluating parking, checking elevators, etc. For Primary Care offices, this addendum will be done at the time of your next regular three-year site review. For our Specialty Provider offices, we will only review the high volume providers, beginning this spring. The results will be available on our website and directory for our members. We are posting the entire Facility Site Review and Medical Record Review tools on our website, as well as the new Attachment C. If you have further questions, please call Provider Relations at (925) 313-9500.

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HEDIS Award and other Quality Management News...

- ★ CCHP has won its first award for HEDIS excellence. California's Managed Risk Medical Insurance Board has recognized us for "Superior Performance" in HEDIS measures for the Healthy Families product for 2008. Statewide, only Kaiser and two other plans achieved this highest level of performance.
- ★ We were the only Local Initiative plan to receive the award.
- ★ Thank you for making this possible!
- ★ For 2011, we are bringing the HEDIS medical record review process in house. For several years we have used a vendor for this process, but the vendor's staff are not familiar with our clinics and community providers, and they sometimes missed important documentation. We think that doing the review ourselves will give better scores and more accurate measures of our performance, allowing us to better prioritize our improvement efforts.
- ★ Another plus is that rather than having strangers come to your office or records department, it will be the friendly faces of CCHP staff. We will be coming with laptops and hand scanners, so we won't have to take your charts apart or use your copier!
- ★ Expect a call soon to schedule our visit. Thank you for your cooperation!



New Process-Automated Eligibility Line

You no longer have to fax your patients' eligibility requests the day prior to their appointments. The automated eligibility line now gives the caller more information and is faster than the original system. Please use the automated system rather than calling or faxing the Health Plan. Callers will get an immediate answer to their eligibility requests, and are able to check multiple members' eligibility in a single call. Please use your NPI number when calling 1 (877) 800-7423.

The following is the information that will be given:

1. Eligibility status for current date
2. Member's name
3. Member's CCHP ID number
4. Member's Network
5. Member's PCP
6. Member's copayment for office visits (if any)
7. Medi-Cal Member's CIN number

If needed you can also connect with a "live staff" member.

SelectCare News

SelectCare is a Medicare Advantage Special Needs Plan offered by Contra Costa Health Plan. It is designed for Medicare beneficiaries who are also enrolled in the California Medi-Cal program. More information about **SelectCare** can be found at http://www.cchealth.org/health_plan/selectcare/. The complete **SelectCare** formulary can be found at <http://selectcare.performrx.com/>. No negative formulary changes have occurred to the **SelectCare** formulary thru March 2011.

Pharmacy and Therapeutics Update

The Pharmacy and Therapeutics committee at CCHP reviewed the efficacy, safety, cost and/or utilization of the following therapeutic categories/medications at the meeting. The changes are expected to be effective the week of June 5th, 2011.

| | | |
|---|--------------------------|-----------------------------|
| ➤ Hydrocodone/APAP combination products | ➤ Proton Pump Inhibitors | ➤ Inhaled Corticosteroids |
| ➤ Ciprodex | ➤ Glaucoma Agents | ➤ Ophthalmic Antihistamines |
| ➤ Ophthalmic Fluoroquinolones | ➤ Tobradex | ➤ Low-Dose Seroquel |
| ➤ Generic tamsulosin | | |

The committee approved **addition** of the following to the Preferred Drug List (formulary):

- Hydrocodone/APAP 5mg/500mg (**Vicodin**) capsules and hydrocodone bitartrate/APAP 7.5mg/500mg tablets. Please see hydrocodone/apap pricing table below to see what these and other agents cost.
- Protonix® (pantoprazole), **generic** is added.
- Dulera® (mometasone/formoterol) is added as an alternative to Advair®.
- Cipro HC®(ciprofloxacin/hydrocortisone) otic is added. Ciprodex® (ciprofloxacin/dexamethasone) otic will have step therapy added that will process as formulary if the patient has recent claims for Cipro HC.
- Vigamox®(moxifloxacin) added as formulary for ophthalmologist. PA for all other providers.
- Flomax® (tamsulosin), **generic** is added.

The committee approved **deletion** of the following to the Preferred Drug List (formulary):

- Advair® (fluticasone/salmeterol) removed. Existing patients will be grandfathered, new starts **must** use formulary agents Dulera® or Symbicort® within this class.
- Removal of all formulary hydrocodone/apap combo agents that have **greater than** 500mg of acetaminophen; Loracet 10/650, Loracet Plus 7.5/650, Loracet 7.5/750 Plus . This is in line with recent request by the U.S. Food and Drug Administration's (FDA) safety warning asking manufacturers to limit the strength of acetaminophen in prescription products.

The following were reviewed and **prior authorization criteria** approved or updated (remain non-formulary): ➤ None

| Active Ingredient(s) | Available Strengths & Dosage Forms | Current PDL Status | Unit Price |
|--|------------------------------------|--------------------|---------------|
| Hydrocodone Bitartrate –apap (Norco) | 5mg-325mg | Preferred | \$0.46 |
| Hydrocodone Bitartrate – apap (Vicodin tablet) | 5mg-500mg | Preferred | \$0.17 |
| Hydrocodone Bitartrate - apap (Vicodin capsule) | 5mg-500mg | Preferred | \$0.08 |
| Hydrocodone Bitartrate – apap (Norco) | 7.5mg-325mg | Preferred | \$0.46 |
| Hydrocodone Bitartrate – apap (Lortab) | 7.5mg-500mg | Preferred | \$0.19 |
| Hydrocodone Bitartrate – apap (Norco) | 10mg-325mg | Preferred | \$0.41 |
| Hydrocodone Bitartrate – apap (Lortab) | 10mg-500mg | Preferred | \$0.30 |

Tidbits from the Utilization and Case Management Team:

GOOD NEWS ↗↗↗ Two more codes added to the “No Auth Required” list!

The Utilization Management Department is continuing our efforts to streamline the authorization requirements for our providers. We are pleased to announce that we have added two more codes to the “No Auth Required” list for vascular surgery. The two billing codes are **93970** and **93990**. As emphasized in the Care Matters- Summer Bulletin 2010, the “No Auth Required” list only applies to Community Provider Network (CPN) members accessing care from CPN providers and does not apply to tertiary/quaternary care centers such as UCSF, UC Davis, Cal Pacific. Prior authorization is still required for these centers.

Authorization is still required for BHC/HCCI /MCE recipients and Regional Medical Center Network (RMCN) members for non-CCRMC services. The recipients network is noted on the front of their Health Plan recipients ID card and can be verified by calling the Provider Call Center, automated eligibility line at 1 (877) 800-7423.

We hope that you will be pleased with these changes. And as always, the Authorization Unit strives to provide satisfaction by continuously reviewing and improving our authorization process. If you have suggestions, please contact us at (925) 957-7260 or email scain@hsd.cccounty.us (please note on Subject line: Auth Unit Idea).

New Process-Authorization Unit is Using Esker® Fax Server

The Authorization Unit is now receiving prior authorization (PA) requests electronically. Esker® fax allows CCHP to receive PA requests directly to our workstation via email. This process is transparent to the providers but improves the PA workflow. You will no longer experience a ‘busy’ fax line because your incoming fax is electronically delivered to the Authorization Unit email address. There is no need to change how you currently submit your PA requests but you may choose to fax your PA requests directly to the **Authorization Unit new Esker® fax line at (925) 372-5106**. To increase our efficiency, we encourage our providers to send separate PA faxes for individual members rather than sending one large fax that contain multiple PAs for multiple members.

Unbundling???

Unbundling is a term used to describe the act of using two or more billing codes instead of one inclusive code for a defined panel of services where rules and regulations require "bundling" of such claims. Unbundling also refers to submitting multiple bills in order to obtain a higher reimbursement for tests and services that were performed within a specified time period and which should have been submitted as a single bill. Either practice may result in greater reimbursement. However, according to the **Federal False Claims Act** and the **Medicare Program Integrity Manual Chapter 4 - Benefit Integrity**, unbundling may be a form of fraudulent claims. See page 8 of weblink, <http://www.cms.gov/manuals/downloads/pim83c04.pdf>. The Health Plan tracks and monitors providers' billing patterns.

Our accredited **URAC Advice Nurse Unit** is available for our member's 24 hours a day, 7 days a week including holidays.

The Advice Nurse Unit can be reached by calling

1 (877) 661-6230 Press 1



New Law Requires Pertussis Immunization For Middle and High School Students in 2011...

Under a new law that takes effect in 2011, California middle and high school students must be vaccinated against pertussis (whooping cough). Beginning July 1, 2011, all students entering 7th through 12th grades in both public and private schools will be required to show proof of a “Tdap” booster before entering school. This requirement applies to all public and private schools.



Steps to take to meet Tdap requirements...

Act now to ensure your adolescent patients are protected against the ongoing threat of pertussis and ready for school entry next fall by taking the following steps:

1. **View the free 1 hour CME webcast: *Shots For School: Clinicians' Role in California's New Tdap Requirement for 7th – 12th Graders*, available at www.uctv.tv/capertussis/.**
2. **Send reminder and recall phone calls and notices NOW** to your patients who have not yet received a Tdap booster, including those who have received a dose of Td but not Tdap.
3. **Order enough Tdap vaccine to immunize your patients affected by the new law.** Before ordering, **ensure you have adequate storage** in your vaccine refrigerator for your orders – **in many clinics, multiple orders will be indicated.**
4. **Immunize with Tdap NOW at every opportunity**, including sports physicals and visits for mild illness or injury, and **give other recommended immunizations**: meningococcal conjugate, HPV, influenza, and any catch-up doses of varicella, MMR, and hepatitis B.
5. **Provide clear and accurate documentation about Tdap immunization for your patients and their schools.** Vaccines have similar names and abbreviations, e.g. Tdap, Td, DTaP, DT, etc., which can be confusing to the school staff who will be keeping records for the new law. If you use the California Immunization Registry, consider printing out a copy of the ‘Blue Card’ after Tdap has been given for the student to take to school.
6. **Have parents check with their child’s school** about how they should provide the Tdap documentation.
7. **Post downloadable electronic banners** on your practice’s website and in electronic newsletters to help notify your patients.

Contra Costa Health Plan Members who are unable to get their Tdap immunization from their physicians can get them at any Rite Aid or Walgreen Pharmacy in Contra Costa County.

For additional information on the new Tdap school requirement, visit www.ShotsForSchool.org.

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

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

Highlighting New CCHP Specialist Providers

New ENT—Sassan Falsafi, MD

Dr. Sassan Falsafi is a Board Certified Otolaryngologist and a Diplomate of the American Board of Otolaryngology, Head and Neck Surgery. He is a graduate of the Indiana University School of Medicine in Indianapolis, Indiana.

Dr. Falsafi completed his surgical internship at the Stanford University Medical Center in Palo Alto, California and his Otolaryngology, Head Neck Surgery training at the SUNY Buffalo/Roswell Park National Cancer Institute in Buffalo, New York, and the Boston University Medical Center in Boston, Massachusetts.

His earlier training includes undergraduate and graduate studies in chemical engineering at the University of California. His surgical experience is broad and includes thousands of procedures involving the head and neck region.

His special interests are in minimally invasive sinus surgery, cosmetic and reconstructive facial surgery including soft tissue flap reconstruction and rhinoplasty.

Dr. Falsafi practices at:

Lamorinda ENT, Face & Neck Surgery, Inc.
911 Moraga Road, Suite 102
Lafayette, CA 94549
Tel: (925) 299-9919
Fax: (925) 299-9924
www.lamorindaent.com.



Northern California Arthritis Center

Northern California Arthritis Center is a group of six board certified rheumatologists who provide care for both adults and pediatric patients with various rheumatic and auto-immune conditions. Services available include an infusion center, bone densitometry (DEXA), musculoskeletal ultrasonography and MRI.

Providers are; Rajiv Dixit, MD, Rashmi Dixit, MD, Zuzana Foster, MD, John Loeb, MD, Anthony Padula, MD, and David Wu, MD with practice locations in Walnut Creek, and San Ramon.

120 La Casa Via, Ste 204
Walnut Creek, CA 94598
Tel: (925) 210-1050
Fax: (925) 210-1082



5201 Norris Canyon Road, Ste 305
San Ramon, CA 94563
Tel: (925) 867-9090
Fax: (925) 867-2787

New Oculoplastic Surgeon

Dr. Scott E. Lee is a new specialist on the CCHP panel available to see Orbital and Oculoplastic referrals. He has a special interest in thyroid decompression and orbital tumor surgery.

Dr. Lee graduated with a MD-MPH combined program at Harvard and UCLA, followed by residency at UCSF. He trained at one of the largest oculoplastic centers in the world at the renowned Sydney Eye Hospital, in Sydney, Australia, treating a high volume of skin cancer and orbital trauma.

Dr. Lee practices at:

East Bay Ophthalmology
1420 Tara Hills Drive, Suite D
Pinole, CA 94564
Tel: (510) 724-1768
Fax: (510) 724-4714



The Bulletin Board

Mark your Calendar for Our Next PCP Community Provider Network Meeting
We encourage and appreciate your participation!

West County April 19, 2011

Doctors Medical Center

2000 Vale Road, Administrative Conference Room, 1st Floor

San Pablo, CA 94806

7:30 - 9:00 AM



Central/East County April 26, 2011

1350 Arnold Drive, Conf Room #103

Martinez, CA 94553

7:30 - 9:00 AM

Send All Claims to:

Contra Costa Health Plan

P.O. Box 2157

San Leandro, CA 94577



Welcome!!! To All Our New Specialty Providers

Eric Mariotti, MD, Plastic/Reconstructive Surgery, Concord

Thomas Mampalam, MD, Surgery-Neurological, Pinole

Jaromy Bell, DC, Chiropractor, Martinez

Antonio Brown, PA, Bayspine Medical Associates, Richmond

Bassem Said, MD, Otolaryngology, Brentwood

Rebecca Cole, MFT, Riverside Counseling, Antioch

Akindele Kolade, MD, California Psychiatric Services, Walnut Creek

Vidya Krishnan, MD; Mircea Truta, MD

Comprehensive Psychiatric Services, Walnut Creek, Fairfield

Lisa Chang, MD, Lerner Eye Center, Pittsburg

Vahid Feiz, MD, California Eye Clinic, Antioch

Kuniyoshi Kanai, OD; Jocelyn Niimi, OD

Optometric Vision Care, Antioch

Daniel Grossman, MD; Simranjeet Tagore, NP; Lisa Memmel, MD

Tara Scott, MD, Planned Parenthood, Concord

Sarah Buenaviaje, NP; Esther Catalya, MD; Gigi Chen, MD;

Jewell Johl, MD; Sachin Kamath, MD; Robert Robles, MD;

Michelle Rooney, NP; Matthew Sirott, MD; Tiffany Savhn, MD

Diablo Valley Oncology & Hematology Med., Grp., Pleasant Hill

Holidays Observed by CCHP

Memorial Day May 30, 2011

Independence Day July 4, 2011

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

Welcome!!! New PCP Providers

Laura Keels, FNP
Concord Health Center

Parham Gharagozlou, MD
Concord

Nita Patel, MD
John Muir Physician Network

Nirali Singh, MD
Pinwheel Pediatrics





595 Center Avenue, Suite 100
Martinez, CA 94553
Ph: (925) 313-9500
Fax (925) 646-9907
E-mail us: ProviderRelations@hsd.cccounty.us
Website: www.contracostahealthplan.org

Contra Costa Health Plan Provider Relations - Contracts Contact Information

| | | | |
|-------------------------|-----------------------------------|----------------|--|
| <i>Terri Lieder</i> | Provider Network Manager | (925) 313-9501 | Terri.Lieder@hsd.cccounty.us |
| <i>Vicki Turner</i> | Unit Administrative Assistant | (925) 313-9500 | Vicki.Turner@hsd.cccounty.us |
| <i>I-Mei Chen</i> | Administrative Analyst | (925) 313-9502 | I-Mei.Chen@hsd.cccounty.us |
| <i>BJ Jacobs, FNP</i> | Provider Liaison | (925) 313-9503 | Beverly.Jacobs@hsd.cccounty.us |
| <i>Mary Berkery, RN</i> | Facility Site Review Manager | (925) 313-9507 | Mary.Berkery@hsd.cccounty.us |
| <i>Maria Perez</i> | Credentialing Coordinator | (925) 313-9506 | L.Perez@hsd.cccounty.us |
| <i>Nicole Meyer</i> | Contracts Secretary | (925) 313-9521 | Nicole.Meyer@hsd.cccounty.us |
| <i>Heather Wong</i> | Credentialing/Contracts Assistant | (925) 313-9508 | Heather.Wong@hsd.cccounty.us |

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

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