



CCRMC CARE MATTERS

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The Contra Costa Health Plan Provider Bulletin

Covered California

Due to CMS regulatory requirements and the resulting cost implications and financial burdens, Contra Costa Health Plan (CCHP) has informed Covered California that it will not seek recertification for the 2015 Plan Year.

This difficult decision to withdraw had to be made because the new requirements pose administrative and financial burdens that could impact our ability to fulfill our mission to serve the most vulnerable people in Contra Costa County. This will affect about 1,000 of our 138,000 CCHP members. We are working with Covered California and the California Department of Managed Health Care on plans to transition these CCHP members enrolled through the Exchange into other Health Plans in Contra Costa County by January 1, 2015.

We are disappointed that we will no longer be able to offer our plan on the Exchange. However, as the Affordable Care Act (ACA) encourages, we continue our focus on Medi-Cal enrollment and are encouraged by the success we have had in enrolling more than 31,000 people through Medi-Cal Expansion.

We are honored to have participated in Covered California in this sentinel first year and to be able to continue to contribute to the health care reform efforts that have brought access to health care for so many more people in need. We remain open to future consideration of participating in a state Bridge which would be focused on additional low income populations. We have previously participated in discussions with the state about the possibility of creating a Bridge and we would support these efforts. For more information or updates, go to www.contracostahealthplan.org.

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TIDBITS FROM UTILIZATION MANAGEMENT...

CONFLICT OF INTEREST STATEMENT

Contra Costa Health Plan's (CCHP) Utilization Management Unit (UM) provides oversight and monitoring of services provided to members. UM decisions are based only on appropriateness of care and service and the member's benefit package. CCHP does not compensate or reward the Medical Director, UM Manager, Medical Consultants or line staff members for issuing denials nor offer incentives to encourage denials.

The UM Unit's normal business hours are Monday through Friday from 8:00am to 5:00pm. After normal business hours, on weekends and holidays, the phone lines are routed to the Advice Nurse Unit for urgent matters or messages can be left on the UM phone lines for the next business day.

Providers can request, free of charge, copies of clinical guidelines used for decision-making by contacting the Authorization Unit at (925) 957-7260.

When requested services are denied or modified, providers have the opportunity to discuss the UM decision. Providers are notified (via Notice of Action, Notice of Non-Coverage, etc.) on how to contact the reviewer and when the reviewer is available to discuss the decision.

Any individual who has been professionally involved in an issue or case may not participate in the review, evaluation, or final disposition of the case or participate in the appeal/reconsideration process.



Request for Enteral Nutrition Products

The information below pertains to enteral nutrition products for our **Medi-Cal members**. Please note that periodic physical assessment and follow up evaluation with the primary care provider (PCP) are required for continued authorization of enteral nutrition products.

Upon receipt of a prescription signed by a licensed provider, the Health Plan will:

1. Make a decision regarding **therapeutic** enteral formula in a timely manner as described below:
 - a. Emergency requests: no prior authorization required when there is a bona fide emergency requiring immediate treatment.
 - b. Expedited requests: within three (3) working days for services if a provider or a plan determines that following the standard timeframe could seriously jeopardize the member's life or health or ability to attain, maintain, or regain maximum function.
 - c. Non-emergency requests: within five (5) working days when proposed treatment meets objective medical criteria, and is not contraindicated.
 - d. Regimen already in place: within five (5) working days for review of a currently provided regimen as consistent with urgency of the member's medical condition.
2. Include appeal rights on all Notices of Action.

Tidbits from UM continued on next page

TIDBITS FROM UTILIZATION MANAGEMENT Continued...

What About the Women, Infants and Children's (WIC) Program?



1. Providers should refer members to WIC for **basic formula** needs. Request for therapeutic enteral formulas should be sent to the Health Plan for review.
2. Women who are pregnant, breastfeeding, or postpartum, or the parent/guardian of a child less than 5 years of age should be referred to a local WIC agency for food supplement and nutrition education program services, with documentation of the referral made in the member's medical record.
3. Providers must provide a current hemoglobin (Hgb) or hematocrit (Hct) laboratory value with the WIC referral and periodically as needed for ongoing WIC program participation, and document the value in the member's medical record.
4. Local WIC offices are noted in the table below or use the following link for other locations:

http://www.apps.cdph.ca.gov/wic/resources/laSearch/results_sites.asp?agencyID=105

LOCAL AGENCY 105 - CONTRA COSTA COUNTY HEALTH SERVICES					
Site ID	Site Name	Address	City	Zip	Telephone
105009	Brentwood Health Center	171 Sand Creek Road	Brentwood	94513	(925) 513-6880
105008	Concord WIC Office	2355 Stanwell Circle	Concord	94520	(925) 646-5370
105006	Contra Costa County Health Department Richmond WIC Office	100 38th Street	Richmond	94805	(510) 231-8600
105007	Pittsburg WIC Office	2311 Loveridge Road	Pittsburg	94565	(925) 431-2460

Injection Safety Alert

The Joint Commission has issued an alert to all healthcare organizations to pay more attention to multi-dose injectable medications. According to the CDC, since 2001 more than 150,000 patients have had to be notified to be tested for blood-borne pathogens after their potential exposure to unsafe injections. Nearly half of these outbreaks involved transmission of hepatitis B or C, the rest were outbreaks of bacterial infections.

The most common misuse of vials primarily involves the reuse of single-dose vials. Single-dose vials typically lack preservatives, and using them more than once carries substantial risk for bacterial contamination, growth, and infection. Some unsafe practices with multi-use vials are using the same syringe to re-enter a vial multiple times for the same patient, or saving vials for use on another patient. A high percentage of these events have occurred in pain management clinics and cancer clinics.

Staff should always follow safe injection and infection control practices—including correct aseptic technique, hand hygiene and the one-time-only use of needles and syringes—along with the specific recommendations for single-dose/single-use vials and multiple dose vials.

Remember “**one needle, one syringe, only one time.**”

Pharmacy and Therapeutics News Notes

Preferred Drug List (PDL) changes should be effective the first week of July 2014.

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

- lovastatin

Other formulary changes:

- pravastatin new patient starts subject to step-therapy requiring at least 1-month claim within past year of either simvastatin or atorvastatin or ritonavir

Dispensing Controlled Substances

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

Controlled substance schedule II-V 30-day supply limit

CCHP will begin processing DEA schedule 2-5 controlled-substance prescriptions for no more than the quantity of medication calculated to last 30 days. For example if dosing 1 TID, #90 units for 30 days would process, but #180 units for 60 days would reject with a message that quantities greater than 30 days are not covered.

For prescriptions in schedules 3, 4, and 5, quantities greater than a 30 day supply can be saved or "rolled over" by the pharmacy as refills. For example, 1 qd with #90 would be processed by the pharmacy as #30 plus 2 more refills.

For schedule 2 prescriptions, which cannot legally be refilled, the pharmacy will be unable to save the excess quantity as refills. For patients who are seen at longer than monthly intervals, CCHP recommends issuing one triplicate for each month of medication desired. This set of monthly prescription security forms can be issued to a patient during one visit. The patient may drop off all forms at once at the pharmacy. The pharmacy can dispense the current month's form and "hold" the future forms in the patient's prescription profile. This mitigates the risk of lost prescription forms and eliminates the need for patients to return to the prescriber for each month's form.

Rationale:

- CCHP will be conforming more to DEA guidance for controlled substances by:
 - Reducing large quantities of medications having the highest potential for theft, fraud, diversion, abuse, and misadventuring from entering our communities
 - DEA vigilance increasing due to current nationwide prescription drug abuse epidemic
 - Please see www.pdmpexcellence.org/drug-abuse-epidemic
- CCHP peer health plans cover controlled substance prescriptions with only 30 day Supply limit
- Reducing potential waste
- Majority of currently issued prescriptions paid by CCHP are already 30 days or less

Pharmacy and Therapeutics continued on next page

Pharmacy and Therapeutics News Notes continued...

CCHP updates the Preferred Drug List (PDL) formulary after each quarterly Pharmacy & Therapeutics Committee meeting. CCHP invites and encourages practitioners to access each update through the following means:

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

<http://cchealth.org/healthplan/pdf/pdl.pdf>.

A searchable CCHP preferred drug list can be found here:

<http://formularynavigator.com/Search.aspx?siteID=MMRREQ3QBC>.

EPOCRATES – *free* mobile & online formulary resource

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

1. Go to www.epocrates.com.
2. Click on "My Account" in the top right.
3. Sign in with your Epocrates username and password, if needed.
4. Click on "Edit Formularies."
5. Follow the on screen instructions to select and download formularies or to remove formularies.
 - For the 'Select State' filter, click **California**
 - For the 'Select Category' filter, click **Health Plan**
 - Choose the **Contra Costa Healthplan** formulary; click the 'Add' button
 - Click the "Done" button when you've finished.



6. Update your device, and the formularies on your mobile device will be changed accordingly.

Epocrates mobile is supported on the iOS (iPhone, iPod, iPad), Android, & BlackBerry platforms

If you have any questions about the installation or use of Epocrates, please contact Epocrates Customer Support at goldsupport@epocrates.com or at 1 (800) 230-2150.

Questions and comments may be directed to CCHP Pharmacy by emailing

cchp_pharmacy_director@hsd.cccounty.us.

Blood Clotting Factor Product Carve-Out from Managed Care Medi-Cal

A note to blood clotting factor providers:

Effective starting July 1, 2014, providers should follow billing instructions for noncapitated services (fee-for-service Medi-Cal or special programs) as specified in the Blood and Blood Derivatives Section of the Medi-Cal provider manuals. The below-listed coagulation factors will be a noncapitated benefit and not reimbursed by Contra Costa Health Plan. These drugs are listed under the category "Blood Factors: Coagulation Factors."

Coagulation Factors:

- Factor XIII (antihemophilic factor, human)
- von Willebrand factor complex (human), Wilate
- Factor VIII (antihemophilic factor, recombinant) (XYNTHA)
- Antihemophilic factor VIII/von Willebrand factor complex (human)
- von Willebrand factor complex (Humate-P)
- Factor VIIa (antihemophilic factor, recombinant)
- Factor VIII (antihemophilic factor, human)
- Factor VIII (antihemophilic factor, recombinant)
- Factor IX (antihemophilic factor, purified, nonrecombinant)
- Factor IX complex
- Factor IX (antihemophilic factor, recombinant)
- Antiinhibitor (HCPCS J7198)

TIDBITS FROM UTILIZATION MANAGEMENT...

Request for Genetic, Gene, and BRCA Testing...

CCHP requires prior authorization for any genetic, gene or BRCA tests. These tests are not considered standard laboratory blood draws, and in fact require that the blood specimen is sent to a specialized laboratory. Below, we have listed the most common codes that are affected and require prior authorization from the health plan.

CPT	Description	CPT	Description	CPT	Description
81200	ASPA GENE (NON-BENEFIT)	81255	HEXA GENE	81321	PTEN GENE FULL
81201	APC GENE FULL SEQUENCE	81256	HFE GENE	81322	PTEN GENE KNOWN FAMILIAL
81202	APC GENE KNOWN FAM VARIANTS	81257	HBA1/HBA2 GENE	81323	PTEN GENE DUP/DEL
81203	APC GENE DUP/DELET VARIANTS	81260	IKBKAP GENE	81324	NON-BENEFIT
81205	BCKDHB GENE (NON-BENEFIT)	81261	IGH GENE REARRANGE AMP METH	81325	NON-BENEFIT
81206	BCR/ABL1 GENE MAJOR BP	81262	IGH GENE REARRANG DIR PROBE	81326	NON-BENEFIT
81207	BCR/ABL1 GENE MINOR BP	81263	IGH VARI REGIONAL MUTATION	81330	SMPD1 GENE COMMON VARIANTS
81208	BCR/ABL1 GENE OTHER BP	81264	IGK REARRANGEABN CLONAL POP	81331	SNRPN/UBE3A GENE
81209	BLM GENE (NON-BENEFIT)	81265	STR MARKERS SPECIMEN ANAL	81332	SERPINA1 GENE
81210	BRAF GENE	81266	STR MARKERS SPEC ANAL ADDL	81340	TRB@ GENE REARRANGE AMPLIFY
81211	BRCA1&2 SEQ & COM DUP/DEL	81267	CHIMERISM ANAL NO CELL SELECT	81341	TRB@ GENE REARRANGE DIRPROBE
81212	BRCA1&2 185&5385&6174 VAR	81268	CHIMERISM ANAL W/CELL SELECT	81342	TRG GENE REARRANGEMENT ANAL
81213	BRCA1&2 UNCOM DUP/DEL VAR	81270	JAK2 GENE	81350	UGT1A1 GENE
81214	NON-BENEFIT	81275	KRAS GENE	81355	VKORC1 GENE
81215	BRCA1 GENE KNOWN FAM VARIANT	81280	LONG QT SYND GENE FULL SEQ	81370	HLA I & II TYPING LR
81216	NON-BENEFIT	81281	LONG QT	81371	HLA I & II TYPE VERIFY LR
81217	BRCA2 GENE KNOWN FAM VARIANT	81282	NON-BENEFIT	81372	HLA I TYPING COMPLETE LR
81220	CFTR GENE COM VARIANTS	81290	MCOLN1 GENE	81373	HLA I TYPING 1 LOCUS LR
81221	CFTR GENE KNOWN FAM VARIANTS	81291	MTHFR GENE	81374	HLA I TYPING 1 ANTIGEN LR

Tidbits from UM continued on next page

TIDBITS FROM UTILIZATION MANAGEMENT continued...

Request for Genetic, Gene, and BRCA Testing...

CPT	Description	CPT	Description	CPT	Description
81222	CFTR GENE DUP/DELET VARIANTS	81292	MLH1 GENE FULL SEQ	81375	HLA II TYPING AG EQUIV LR
81223	CFTR GENE FULL SEQUENCE	81293	MLH1 GENE KNOWN VARIANTS	81376	HLA II TYPING 1 LOCUS LR
81224	CFTR GENE INTRON POLY T	81294	MLH1 GENE DUP/VARIANT	81377	HLA II TYPE 1 AG EQUIV LR
81225	CYP2C19 GENE COM VARIANTS	81295	MSH2 GENE FULL SEQ	81378	HLA I & II TYPING HR
81226	CYP2D6 GENE COM VARIANTS	81296	MSH2 GENE KNOWN VARIANTS	81379	HLA I TYPING COMPLETE HR
81227	CYP2C9 GENE COM VARIANTS	81297	MSH2 GENE DUP/VARIANT	81380	HLA I TYPING 1 LOCUS HR
81228	NON-BENEFIT	81298	MSH6 GENE FULL SEQ	81381	HLA I TYPING 1 ALLELE HR
81229	CYTOGEN M ARRAY COPY NO&SNP	81299	MSH6 GENE KNOWN VARIANTS	81382	HLA II TYPING 1 LOC HR
81235	EGFR GENE COM VARIANTS	81300	MSH6 GENE DUP/VARIANT	81383	HLA II TYPING 1 ALLELE HR
81240	F2 GENE	81301	MICROSATELLITE INSTABILITY	81400	MOPATH PROCEDURE LEVEL 1
81241	F5 GENE	81302	MECP2 GENE FULL SEQ	81401	MOPATH PROCEDURE LEVEL 2
81242	FANCC GENE	81303	NON-BENEFIT	81402	MOPATH PROCEDURE LEVEL 3
81243	FMRI GENE DETECTION	81304	MECP2 GENE DUP/DELET VARIANT	81403	MOPATH PROCEDURE LEVEL 4
81244	FMRI GENE CHARACTERIZATION	81310	NPM1 GENE	81404	MOPATH PROCEDURE LEVEL 5
81245	FLT3 GENE	81315	PML/RARALPHA COM BREAKPOINTS	81405	MOPATH PROCEDURE LEVEL 6
81250	G6PC GENE	81316	PML/RARALPHA 1 BREAKPIONT	81406	MOPATH PROCEDURE LEVEL 7
81251	GBA GENE	81317	PMS2 GENE FULL SEQ ANALYSIS	81407	MOPATH PROCEDURE LEVEL 8
81252	GJB2 GENE FULL SEQUENCE	81318	PMS2 KNOWN FAMILIAL VARIANTS	81408	MOPATH PROCEDURE LEVEL 9
81253	GJB2 GENE KNOWN FAM VARIANTS	81318	PMS2 KNOWN FAMILIAL VARIANTS	81479	UNLISTED MOLECULAR PATHOLOGY
81254	NON-BENEFIT	81319	PMS2 GENE DUP/DELET VARIANTS	0005M	HARMONY NIPT*



Referrals to Contra Costa Health Plan Case Management

The purpose of the Case Management (CM) Program at Contra Costa Health Plan is to ensure that medically necessary care is delivered to our members in the most efficient and effective setting and for psychosocial barriers to receiving care are addressed quickly to minimize their negative impact. CCHP CM is available for CCHP members only (non-CCHP members should be referred to Public Health).

To make a referral to CM via CCLink:

1. Open an encounter. If you did not have a face to face encounter, create an "order only encounter."
2. In the "Meds and Orders" section type "ref" and select the referral.
3. Refine search by typing key words, such as "ref case manage or case manage " for Case Management referrals. Referral orders for Case Management/Quality Management are REF162, REF163, REF172 and REF171. These are the only referral orders that will create a referral and generate an case create in-basket message to CCHP
4. Select the referral by double clicking or using arrow keys and Enter. The referral order should pop open
5. The **class field** is set to default to "internal."
6. Click "**To dept spec**" Case Management should auto populate
7. Fill in the Reason for the Referral, general concerns, presenting problem, goals and barriers to meeting goals
8. **Use F6 Comments field to list the specific data that supports the referral, such as office visit dates, study dates & results, lab dates & results.** CCHP will review these items. As a courtesy, CCHP can forward these items to the outside specialty service. However, the referring provider remains responsible for communicating with the referred to specialist about the patient.

To edit the order, click the blue Summary Sentence under the Unsigned Orders heading.

9. Click  **Associate** and associate the order with a diagnosis.
10. When you're finished placing orders, click  **Sign**.

Once a case is assigned to a CCHP CM, his/her name will be added to the Care Team on the Snapshot view in the EMR. You may contact them at any time via in-basket message.

If at any time you wish to call the CM department, please call (925) 313-6887. The secretary will connect you to the assigned case manager.



Provider Relations Tidbit

DHCS and Deactivation of FFS Medi-Cal Providers

As part of an ongoing process to update provider information, effective **July 1st**. DHCS will deactivate providers from the Provider Master File who have not billed FFS in the last 12 months. If you are using the POS system to access eligibility information, you may still obtain eligibility information by the following ways:

- Call the Automated Eligibility Verification System (AVES) at **1 (800) 407-1295**
- Go to <https://www.medi-cal.ca.gov/Eligibility/Login.asp>

Report of Tuberculosis in Contra Costa County - 2013

Facts

57 Number of People with TB Disease in Contra Costa in 2013

People with TB Disease

3 out of 10 have diabetes

In 2013, people with TB Disease were 3.7 times more likely to have diabetes than people without TB. If a person comes from a country with high rates of TB and has diabetes, they should get tested!

13 Average number of contacts exposed by each person with contagious TB in 2013

458 Total number of contacts tested for TB by Contra Costa Public Health in 2013

7 Months Average length of treatment for TB disease in 2013

TB Reporting

The TB Control Program receives reports on all cases of TB. Physicians, Clinical Lab directors and other providers are required by law to report confirmed and suspected cases of TB to Public Health within one working day of the diagnosis of TB or suspected TB. Providers should complete a Confidential Morbidity Report (CMR) and FAX to Contra Costa Public Health (CCPH) at **(925) 313-6465**. For Questions about TB reporting, providers should call at **(925) 313-6740**.

Medical Consultation

CCPH provides medical consultation to providers regarding the diagnosis and management of patients with LTBI and confirmed or suspected TB disease. For Medical Consultation, providers may call **(925) 313-6740**.

Medical consultation is also provided by the Curry International TB Center Warm line Consultation Service (response within 24 hours) Call **1 (877) 390-6682** or **(415) 502-4700**.



Welcome CPN Providers!

Diablo Valley Pediatrics Medical Group, Wesley Taft, MD—PCP-Pediatrics

Allergy and Asthma Medical Group, Angela Ingram, NP—Allergy and Immunology

Behavior Analysts, Inc., William Kent, BCBA—Behavior Analysis

Ed Support Services, LLC, Alissa Greenberg, BCBA-D—Behavior Analysis

Earl Holloway, MD—Cardiology

East Bay Cardiac Surgery Center Medical Group, Ryan Garcia, PA—Cardiology

Nutrition For Your Lifestyle, Sandy Cortez, RD—Dietitian

Diabetes and Endocrinology Specialists, Anita Bhat, MD—Endocrinology

Planned Parenthood, Kelly Lohman-Baesens, PA, Sarah McNeil, MD—Family Planning,
Rebecca Menashe, CNM—Midwife

Northern California Gastroenterology Consultants, Inc., Kiran Narsinh, MD—Gastroenterology

Epic Care-East Bay Medical Oncology-Hematology Associates, Jasdeepa Nagi, MD—Hematology/
Medical Oncology

East Bay Aids Center, Jessica Horwitz, NP—HIV/AIDS

Axis Community Health, Matthew Narron, PsyD—Psychology

Sarah Carson, LCSW—Clinical Social Work

East Bay Nephrology Medical Group, Inc., Ruby Harrison, NP—Nephrology

Beverly Richardson, NP, Affiliated with Debra L. Stewart, DO—OB/GYN

La Clinica De La Raza, Emily Corrigan, MD—OB/GYN

West Coast Retina Medical Group, Sara Haug, MD—Ophthalmology

Karen Pham, OD—Optometry

Comprehensive Psychiatric Services, Melissa Wycoff-Montenegro, MD, Roobal Sekhon, DO—
Psychiatry

LifeLong Medical Care, Linda Duritz, MD—Psychiatry

Medical Oncology-Hematology Associates, Mariam Korah, MD—Radiation Oncology

Walnut Creek Surgical Associates, Inc., Eugenia Kang, MD—General Surgery

Bay Area Surgical Specialists, Inc., Lloyd Ford, MD—Head/Neck Surgery

East Bay Cardiovascular and Thoracic Associates, Ricardo Aguirre, MD—Surgery Vascular



Welcome New CCRMC Providers located at the Martinez Wellness Center (MWC)
The Building Name: George and Cynthia Miller Wellness Center

PCP-Family Medicine

Kenneth Katzman, MD, David Pepper, MD, Monica Laimayum, MD, Jamie Navel, MD

PCP-Pediatrics

Joanna Chin, MD, Victoria Agnost, MD

Pediatrics

Patrick Maher, MD, Dan Barrett, DO, Gwendolyn Hamilton, MD

PCP-Adult Medicine

Nusrat Chaudhry, MD

Welcome New CCRMC Providers at other locations

Emma Winfield, NP

Antioch Health Center

Chere Sealey, NP, Lizabeth Linn, NP

Concord Health Center

Ian Wallace, MD, Ahmed Farrag, MD, Takanori Watanabe, MD

Martinez Health Center



The Bulletin Board

Holiday Observed by CCHP
September 1, 2014, Labor Day

CPN Meeting Materials
are available on our
website at:
www.contracostahealthplan.org.



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

Members can call The Advice Nurse
Unit at
1 (877) 661-6230 Press 1.



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

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

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



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 Staff Contact Information

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

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

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

Nicole Meyer Contracts Secretary (925) 313-9521 Nicole.Meyer@hsd.cccounty.us

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

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

