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PROVIDER UPDATE

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CalOptima Ending Faxed Monthly Provider Updates

In order to ensure provider communications are received in a timely manner, and to deliver better quality publications, CalOptima will be ending its faxed monthly Provider Update over the next several months and moving them to monthly emails.

CalOptima will continue to share important health care news, regulatory updates and meeting announcements through the improved emailed Provider Update. In addition to a more modern presentation, the transition will also allow for direct access to links, websites and other files.

To continue receiving the monthly updates, providers need to provide an administrative email address, per site location, to providerservicesinbox@caloptima.org. If providers have questions, they can contact their Provider Relations representative or call **714-246-8600.**

CalOptima Offering Vaccine Clinics through April

To further protect Orange County residents against COVID-19, CalOptima and its community partners are offering vaccination clinics for children ages 5–11 and community members on a regular basis through April.

The Saturday clinics will offer vaccines and boosters from Pfizer, Moderna and Johnson & Johnson. While primarily geared toward vaccinating children, unvaccinated community members of any age are welcome. Eligible CalOptima members will receive a $25 Member Health Reward.

The clinics will be held at the following locations and times:

- January 22: Orange County Social Services Agency Central Regional Office, 2020 W. Walnut St., Santa Ana, 9 a.m.–3 p.m.
- February 19: Second Baptist Church, 4300 Westminster Ave., Santa Ana, 9 a.m.–1 p.m.
- March 12: Golden West College, Building 95 (MPR 100), 15751 Gothard St., Huntington Beach, 9 a.m.–1 p.m.
- March 19: St. Anthony Claret Catholic Church, 1450 La Palma Ave., Anaheim, 9 a.m.–1 p.m.
- March 26: Orange County Social Services Agency Central Regional Office, 2020 W. Walnut St., Santa Ana, 9 a.m.–1 p.m.
- April 9: Golden West College, Building 95 (MPR 100), 15751 Gothard St., Huntington Beach, 9 a.m.–1 p.m.
- April 16: St. Anthony Claret Catholic Church, 1450 La Palma Ave., Anaheim, 9 a.m.–1 p.m.
- April 23: Orange County Social Services Agency Central Regional Office, 2020 W. Walnut St., Santa Ana, 9 a.m.–1 p.m.

To register, community members call the OC COVID-19 Hotline at 714-834-2000 or visit www.othena.com. Transportation for CalOptima members can be arranged by calling 888-587-8088.

CalAIM ECM and Community Support Referral Forms Available

With the launch of California Advancing and Innovating Medi-Cal, or CalAIM, on January 1, CalOptima has added resources to help members access new benefits.

CalAIM is a multi-year initiative by the California Department of Health Care Services (DCHS) which seeks to improve Medi-Cal, provide more flexibility, reduce complexity and increase health outcomes.

The two integral parts of CalAIM are Enhanced Care Management (ECM) and Community Supports, which seek to address non-medical factors that impact a members' health. ECM, including care coordination, integrating services and coordinating with community resources, is targeted to help adult high utilizers, individuals and families experiencing homelessness, adults with Serious Mental Illness or Substance Abuse Disorder, and individuals transitioning from incarceration. Additional groups may become eligible for ECM as CalAIM continues.

Community Supports now available include housing transition navigation services, housing tenancy and sustaining services, housing deposits and recuperative care. Additional Community Supports may be added in the future.

If providers, community-based organizations, authorized representatives, members or family members feel a member could benefit from ECM or Community Supports, they can fill out a referral form and submit it to the

Referral Forms (cont.)

member's health network. Referral forms for both ECM and Community Supports can be downloaded from the CalAIM section of CalOptima's website at www.caloptima.org/CalAIM.

Providers can also find more information about CalAIM, including ECM training, on the website.

DHCS Begins Timely Access Survey Provider Calls

Starting this month, DHCS is making calls to providers as part of its 2022 Timely Access Survey to gauge whether appointment wait times are meeting standards.

Phone calls to providers, call centers and nurse triage/advice lines began on January 10 and will continue through the end of March. During these calls, DHCS will collect information on the next available times for urgent and non-urgent appointments. Other survey questions will gather information on provider directory requirements, language interpretation services and telehealth services. The calls will be made during normal business hours, and surveyors will make a maximum of three calls in an attempt to reach a provider.

The Timely Access Survey had been suspended in 2020 due to the public health emergency, in an effort to alleviate undue burden on provider offices. However, DHCS announced last year that it regarded the survey as a critical way to gauge access to care and that it would begin again this month.

CalOptima's timely access standards are found below.

Telephone Access Standards

Description	Standard
Telephone triage	Telephone triage shall be available 24 hours a day, seven days a week. Telephone triage or screening waiting time shall not exceed 30 minutes.
Telephone wait time during business hours	A non-recorded voice within 30 seconds.
Urgent message during business hours	Practitioner returns the call within 30 minutes after the time of message.
Non-urgent and non-emergency messages during business hours	Practitioner returns the call within 24 hours after the time of message.
Telephone access after/during business hours for emergencies	The phone message and/or live person must instruct members to dial 911 or go to the nearest emergency room.
After-hours access	A primary care provider (PCP) or designee shall be available 24 hours a day, seven days a week to respond to after-hours member calls or to a hospital emergency room practitioner.

Timely Access Survey (cont.)

Access to Emergency/Urgent Care Services:

Type of Care	Standard
Emergency Services	Immediately, 24 hours a day, seven days a week
Urgent Care Services	Within 24 hours of request

Access to Primary Care:

Type of Care	Standard
Urgent appointments that **DO NOT** require prior authorization	Within 48 hours of request
Non-urgent primary care	Within 10 business days of request
Routine physical exams and wellness visits	Within 30 calendar days of request
Medi-Cal only Initial Health Assessment (IHA) or Individual Health Education Behavioral Assessment (IHEBA)	Medi-Cal Only: Within 120 calendar days of Medi-Cal enrollment

Access to Specialty and Ancillary Care:

Type of Care	Standard
Urgent appointments that **DO NOT** require prior authorization	Within 48 hours of request
Urgent appointments that **DO** require prior authorization	Within 96 hours of request
Non-urgent specialty care	Within 15 business days of request
First prenatal visit	OneCare Connect/OneCare: Within 2 weeks of request
Non-urgent ancillary services	Within 15 business days of request

Timely Access Survey (cont.)

Access to behavioral health

Type of Care	Standard
Non-urgent care with a mental health outpatient services provider	Within 10 business days of request
Follow-up routine care with a mental health outpatient services provider	Members have a follow-up visit with a mental health outpatient services provider within 20 calendar days of initial visit for a specific condition
Appointment for follow-up routine care with a physician behavioral health care provider	Members have a follow-up visit with a physician behavioral health care provider within 30 calendar days of initial visit for a specific condition

Other access standards

Description	Standard
In-office wait time for appoint-	Less than 45 minutes before being seen by a provider
Rescheduling appointments	Appointments will be rescheduled in a manner appropriate to the member's health care needs and that ensures continuity of care is consistent with good professional practice.

CalOptima Policies and Procedures:

GG.1600: Access and Availability Standards

MA.7007: Access and Availability Standards

Updated 9/10/2021

Resources on Medi-Cal Rx Transition Available

CalOptima reminds all providers that, as of January 1, 2022, Medi-Cal pharmacy benefits have been transitioned to the Medi-Cal Rx fee-for-service delivery system.

All benefits billed on a pharmacy claim have been transitioned to Medi-Cal Rx, which is also reviewing all Prior Authorizations (PAs).

If providers have questions about the transition, DHCS has added a Frequently Asked Questions section to its Medi-Cal Rx website at https://medi-calrx.dhcs.ca.gov/home/faq/. For additional inquiries, providers can contact the Medi-Cal Rx Customer Service Center at 1-800-977-2273, available 24 hours a day, 365 days a year, or email MediCalRxEducationOutreach@magellanhealth.com.

Medi-Cal Rx Transition (cont.)

A flyer of the Customer Service Center menu prompt options is also available at https://medi-calrx.dhcs.ca.gov/cms/medicalrx/static-assets/documents/provider/forms-and-information/PF_CSC_Main_Menu_Prompt_Options_Flyer.pdf.

DHCS also periodically releases news and updates via its Medi-Cal Rx Subscription Service (MCRxSS). Providers are encouraged to subscribe at the following link: https://mcrxsspages.dhcs.ca.gov/Medi-CalRxDHCScagov-Subscription-Sign-Up

Prescribing providers should be using the Medi-Cal Rx Secured Provider Portal, which grants access to various applications, education materials, training courses and other resources. Another option is using CoverMyMeds (CMM) to initiate and submit PAs. Those providers who use CMM to submit, view and manage PAs are not required to register for the Medi-Cal Rx Secured Provider Portal.

CalOptima has also mailed providers a postcard with information about Medi-Cal Rx.

CMS Reminds Providers About No Cost Sharing for COVID-19 Vaccines

The Centers for Medicare and Medicaid Services (CMS) is reminding providers serving OneCare (OC) and OneCare Connect (OCC) members that since January 1, 2022, COVID-19 vaccines and their administration, including boosters, are to be provided without cost sharing to members.

CMS also encourages providers to consider in-home vaccine administration payments and other activities to reach homebound members in 2022. Providers can download and read the full memo outlining the policy on CMS's website at https://www.cms.gov/httpseditcmsgovresearch-statistics-data-and-systemscomputer-data-and-systemshpmshpms-memos-archive/hpms-memos-wk-2-october-4-8. More information from CMS about the COVID-19 vaccine is at https://www.cms.gov/COVIDvax.

DHCS Releases 2022 Managed Care Accountability Set

On December 28, 2021, DHCS released the annual set of performance measures, known as the Managed Care Accountability Set. For Measurement Year 2022/Reporting Year 2023, there are 39 measures, and the full list of the Managed Care Accountability Set can be found on DHCS's website at https://www.dhcs.ca.gov/Documents/MCQMD/MY2022-RY2023-MCAS.pdf.

Children's Coalition Releases 27th Annual Report on Orange County Children

The Orange County Children's Partnership released its 27th Annual Report on the Condition of Children in Orange County.

The report tracks indicators of the health of Orange County's children across four interdependent focus areas: good health, economic well-being, educational achievement, and safe homes and communities.

The full report can be found here: https://www.ssa.ocgov.com/sites/ssa/files/2021-11/27th%20Annual%20Conditions%20of%20Children_With%20Supplemental%20Tables_0.pdf.

Rapid Whole Genome Sequencing Added as Medi-Cal Benefit

As of January 1, DHCS added Rapid Whole Genome Sequencing (rWGS) as a covered Medi-Cal benefit.

The rWGS benefit had been available to children as an inpatient service with a Treatment Authorization Request (TAR) when medically necessary. Now it is also available to children 1 year of age or younger who are receiving inpatient hospital services in an intensive care unit without a TAR.

For the Current Procedural Terminology (CPT) codes and provider manual updates associated with rWGS becoming a covered benefit, please visit DCHS' website at https://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/gm202112.aspx.

CalOptima Shares Reminders for OCC Providers

CalOptima is sharing the following reminders to OCC providers:

- Providers should start coordinating members' Annual Wellness Visit (AWV) and preventative services with chronic disease management visits. The OCC 2022 Primary Care Engagement and Clinical Documentation Integrity Attestation Program forms will be available and sent to providers after February 5, 2022.
- For the January OCC spotlight, please see the table below on the Diabetic Eye Care Health Effective Data and Information Set (HEDIS).

Eye exam for patients with diabetes; members 18–75 years of age	CPT II 2022F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed, with evidence of retinopathy diabetes
	CPT II 2024F and 2026F	Retinal photos (seven standard field stereoscopic) with evidence of retinopathy
	CPT II 2023F	Dilated retinal eye exam without evidence of retinopathy
	CPT II 2025F and 2033F	Retinal photos (seven standard field stereoscopic) without evidence of retinopathy
	CPT II 3072F	No evidence of retinopathy (payment year 2021)
Hemoglobin A1c control for patients with diabetes (HBD); members 18–75 years of age	CPT II 3044F CPT II 3051F CPT II 3052F CPT II 3046F	HbA1c level less than 7% HbA1c level ≥7% and <8% (control) HbA1c level ≥8% and ≤9% HbA1c level > 9% (poor control)
Blood pressure control for patients with diabetes (BPD); members 18–75 years of age	CPT II 3074F CPT II 3075F CPT II 3077F CPT II 3078F CPT II 3079F CPT II 3080F	Systolic <130 Systolic <130–139 Systolic ≥140 (noncompliant but acceptable) Diastolic <80 Diastolic <80–89 Diastolic ≥90 (noncompliant but acceptable)

OCC Reminders (cont.)

Existing nephropathy or documentation of microal-buminuria or albuminuria or are on an ACE inhibitor or ARB therapy	CPT II 3066F	Documentation of treatment for nephropathy (e.g., patient receiving dialysis; patient being treated for ESRD, CRF, ARF or renal insuffi-ciency; or any visit to a nephrologist)
Cholesterol	CPT II 3011F	Lipid panel results documented and reviewed (must include total cholesterol, DL-C, triglycerides and calculate LDL-C) (CAD)
Tobacco use	CPTII 1000F	Tobacco use assessed (CAD, CAP, COPD, PV) (DM) Tobacco use (Z72.0) History of tobacco dependence (Z87.891)

APL Provides Instruction on Hospital Directed Payment Program

On December 23, 2021, DHCS released All-Plan Letter (APL) 21-018: Public and Private Hospital Directed Payment Programs for State Fiscal Years 2017–18 and 2018–19, the Bridge Period, and Calendar Year 2021.

The purpose of the APL is to provide instructions on the payment process required for the Designated Public Hospital Enhanced Payment Program, the DPH Quality Incentive Pool, the District and Municipal Public Hospital QIP, and the Private Hospital Directed Payment programs for State Fiscal Years 2017-18 and 2018-19, the Bridge Period (July 1, 2019–December 31, 2020) and Calendar Year (CY) 2021, as applicable.

APL Gives Language and Nondiscrimination Requirement Standards

On January 10, 2022, DHCS distributed Revised All-Plan Letter (APL) 21-004: Standards for Determining Threshold Languages, Nondiscrimination Requirements, and Language Assistance Services.

The purpose of this APL is to inform providers of the dataset for threshold and concentration languages and clarify the threshold and concentration standards specified in state and federal law and MCP contracts. This dataset identifies the threshold and concentration languages in which, at a minimum, MCPs must provide written translated member information. This APL also provides guidance on federal and state requirements regarding nondiscrimination, discrimination grievance procedures, language assistance, and communications with individuals with disabilities.

DHCS Release Whole Child Model Program APL

On December 10, 2021, DHCS released Revised All-Plan Letter (APL) 21-005: California Children's Services Whole Child Model Program.

The purpose of this APL is to provide direction and guidance to all participating in the California Children's Services (CCS) Whole Child Model (WCM) program. This APL conforms with CCS Numbered Letter (N.L.) 03-0421, which provides direction and guidance to county CCS programs on requirements pertaining to the WCM program. This APL supersedes APL 18-023.

Policies and Procedures Monthly Update

The following list outlines changes made to CalOptima policies and procedures during **December 2021**. The full description of the policies below is available on CalOptima's website at www.caloptima.org.

Policy Number	Policy Title, Purpose, Revision, and Program	Policy Review and/or Revision Date
Medi-Cal		
DD.2006b	CalOptima Community Network Member Primary Care Provider Selection/ Assignment	10/01/21
DD.2013	Customer Service Grievance Process	12/01/21
EE.1143 Retired	Medi-Cal Network Provider and Subcontractor Terminations Monitoring and Oversight	11/01/21
FF.2001	Claims Processing for Covered Services for which CalOptima is Financially Responsible	01/01/22
FF.4002	Special Payments: Enhanced Care Management Supplemental Payment for Capitated Health Network	01/01/22
GG.1313	Coordination of Care for Transplant Members	06/03/21
GG.1353	Enhanced Care Management Service Delivery	01/01/22
GG.1354	Enhanced Care Management— Eligibility and Outreach	01/01/22
GG.1355	Community Supports	01/01/22
GG.1356	Enhanced Care Management Administration	1/01/22
GG.1401	Pharmacy Authorization Process	01/01/22
GG.1423 Retired	Medication Quality Assurance Program	01/01/22
GG.1428 New	Pharmacy Management Medi-Cal Rx Responsibilities	01/01/22
GG.1504	Dental Services	09/01/21
GG.1600	Access and Availability Standards	11/01/21
Multiple Programs		
FF.2014	Delegation and Oversight of Claims Activities	12/20/21
FF.3001	Financial Reporting	12/20/21
GG.1505	Transportation: Emergency, Non-Emergency, and Non-Medical	01/01/22
GG.1608Δ	Full Scope Site Reviews	01/01/22
GG.1639Δ	Post-Hospital Discharge Medical Supply	12/01/21
GG.1660	Federal Qualified Health Center (FQHC) and Rural Health Clinic (RHC) Financial Incentives and Pay for Performance Payments	10/01/21
MA.2002	Marketing Activity Standards	10/01/21
MA.2012	Training and Oversight of CalOptima-Employed Community Partners	10/01/21
MA.2030	Personal/Individual Marketing Appointments	10/01/21
MA.6023	Notice of Medicare Non-Coverage and Notice of a Detailed Explanation of Non-Coverage	10/01/21
MA.6104	Opioid Medication Utilization Management	12/20/21
MA.6106	Medication Therapy Management	12/20/21
MA.6114	Medicare Part D Redeterminations	12/20/21
OneCare		
MA.4015	Medicare Secondary Payer (MSP) / Part D Coordination of Benefits (COB)	10/01/21
OneCare Connect		
CMC.1818	Treatment in Place (TIP) for CalOptima Community Network (CCN) Members Residing in Long Term Care Facilities	11/01/21

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Health Education: Trainings and Meetings

January Webinars	
Wellness in 8D: A Lens to Build Resilience **Thursday, January 27, 2022** **1:00 p.m.**	https://magellanhealth.zoom.us/webinar/register/WN_Gwh91jDKQfeyNxg29HTTZg

Monthly Webinars	
The Resources for Integrated Care – Webinar Recordings	https://www.resourcesforintegratedcare.com/
Asthma Management Academy (AsMA)	https://www.cdph.ca.gov/Programs/CCDPHP/DEODC/EHIB/CPE/Pages/AsMA.aspx

Every Tuesday and Thursday	
Chlamydia Screening for Adolescent Patients E-learning Collaborative (CT eLC)	https://californiaptc.com/national-quality-improvement-center/chlamydia-screening-for-adolescent-patients-elearning-collaborative/?utm_source=eLearning+Collaborative+Announcement+-+CT+Screening&utm_campaign=eLC_Recruitment&utm_medium=email
Medi-Cal Learning Portal	https://learn.medi-cal.ca.gov/

Ongoing/On-Demand Webinars	
Training for Health Care Professionals – CDC	https://www.cdc.gov/coronavirus/2019-ncov/hcp/training.html
Screening, Brief Intervention, and Referral to Treatment (SBIRT) Training	https://healtheknowledge.org/course/index.php?categoryid=50
Smoking Cessation Leadership Center	https://smokingcessationleadership.ucsf.edu/webinars
National Diabetes Education Program	https://www.cdc.gov/diabetes/professional-info/training.html?CDC_AA_refVal=https://www.cdc.gov/diabetes/ndep/training-tech-assistance/index.html
Free Continuing Education (CME) for MMWR and Medscape	https://login.medscape.com/login/sso/getlogin?urlCache=aHR0cDovL3d3dy5tZWRzY2FwZS5jbmcvdmlld2FydGljbGUvODg4ODIx&ac=401
LifeScan Institute LLC Webinars	https://www.lifescandiabetesinstitute.com/
Medicare Learning Network	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/WebBasedTraining

Provider Code Updates

Based on the Medi-Cal bulletins and news flashes, CalOptima has updated the procedure codes for the subjects listed below:

- 2022 HCPCS Annual Update
- Safety Net Clinic Billing Instructions for CalAIM Dental Initiatives
- Non-Specialty Mental Health Services Are Updated
- COVID-19 Global Outreach Language
- Remote Physiologic Services Added as Medi-Cal Benefits
- Rapid Whole Genome Sequencing Codes Are Covered Benefits per AB 133
- J7303 Rate Update for Medi-Cal and Family PACT Programs
- Modifier Update for E&M Codes
- Updates to Duchenne Muscular Dystrophy Code
- Postpartum Care Expansion
- National Correct Coding Initiative Quarterly Update for December 2021
- New Electronic Claim Resubmission Helps Providers Avoid Paper CIFs/Appeals
- 2022 ICD-10-CM/PCS Codes Update
- Update on Medication Therapy Management Pharmacy Services
- Eligibility of Pfizer-BioNTech COVID-19 Booster Dose Expanded to 16 Years of Age and Older
- Update on Medication Therapy Management Services
- Alcohol Wipes Billing Code Update

For detailed information regarding these changes, please refer to: December General Medicine Bulletin 570 https://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/gm202112.aspx, Medi-Cal Newsflashes https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_31326_01.aspx, https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_31543.aspx, https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_31132_44.aspx, https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_31537.aspx, https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_31516_01.aspx

Important Meetings

Meeting	Date and Time
CalOptima Board of Directors	**February 3, 2 p.m.**
CalOptima Provider Advisory Committee	**February 10, 8 a.m.**

Unless otherwise specified, all meetings are held virtually at this time due to COVID-19. To select the virtual meeting you would like to attend, visit the CalOptima website at www.caloptima.org/en/About/BoardAndCommitteeMeetings.aspx.

Follow CalOptima on Social Media

CalOptima regularly posts on social media to engage members with heath tips, community resources, event dates, program updates and other pertinent information.

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