



PROVIDER UPDATE

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CalOptima Welcomes Interim CEO

At its April 2, 2020, meeting, Richard Sanchez, REHS, MPH, the former director of the Orange County Health Care Agency (HCA), was named Interim Chief Executive Officer of CalOptima, by the CalOptima Board of Directors. Sanchez began his leadership role on Monday, April 6.

Sanchez comes to the position after serving on the CalOptima Board of Directors since March 2017. He replaces Michael Schrader who has been at CalOptima's helm for more than seven years and is leaving for a CEO position with a sister health plan in Northern California.

"I look forward to serving Orange County in this new capacity during the next stage of my career," Sanchez said. "While there's no doubt that this is a difficult time as we respond to COVID-19, CalOptima has a strong, longstanding record of delivering access to quality health care services. I will work to ensure CalOptima members and providers can continue to rely on the public agency that is critical to the health of our community."

Sanchez was HCA Director for three years, after having served as Assistant Director and Director of Environmental Health. Before his tenure in Orange County, he worked as Director of Environmental Health for the Sacramento Environmental Health Department and as Program Manager for the San Bernardino Environmental Health Department. Sanchez holds a bachelor's degree in biological sciences from UC Irvine and a Master of Public Health degree from Loma Linda University. He is also credentialed as a Registered Environmental Health Specialist (REHS).

"The Board welcomes Richard to his new role upholding CalOptima's mission focused on serving members," said Paul Yost, M.D., Chairman of the CalOptima Board of Directors. "Considering the current environment, it is especially reassuring to know that he will be able to hit the ground running given his extensive experience with CalOptima and the HCA."

Sweeping Regulatory Changes to Help U.S. Health Care System Address COVID-19 Patient Surge

The Centers for Medicare & Medicaid Services (CMS) recently issued an unprecedented array of temporary regulatory waivers and new rules to equip the American health care system with maximum flexibility to respond to the 2019 Novel Coronavirus (COVID-19) pandemic.

Made possible by President Trump's recent emergency declaration and emergency rule making, these temporary changes will apply immediately across the entire U.S. health care system for the duration of the emergency declaration. This allows hospitals and health systems to deliver services at other locations to make room for COVID-19 patients needing acute care in their main facility.

CMS's temporary actions announced today empower local hospitals and healthcare systems to:

- **Increase Hospital Capacity — CMS Hospitals Without Wall**
- **Rapidly Expand the Healthcare Workforce**
- **Put Patients over Paperwork**
- **Further Promote Telehealth in Medicare**

For additional background information on the waivers and rule changes, go to: <https://www.cms.gov/newsroom/fact-sheets/additional-backgroundsweeping-regulatory-changes-help-us-healthcare-system-address-covid-19-patient>.

For more information on the COVID-19 waivers and guidance, and the Interim Final Rule, visit the CMS COVID-19 flexibilities webpage: <https://www.cms.gov/about-cms/emergency-preparedness-response-operations/current-emergencies/coronavirus-waivers>.

APL 20-004: Emergency Guidance for Medi-Cal Managed Care Health Plans in Response to COVID-19

On March 27, 2020, the Department of Health Care Services (DHCS) released **All Plan Letter (APL) 20-004: Emergency Guidance for Medi-Cal Managed Care Health Plans in Response to COVID-19**. The purpose of this APL is to provide information to Medi-Cal managed care health plans (MCPs) on temporary changes to federal requirements as a result of the ongoing global pandemic.

In light of both the federal Health and Human Services (HHS) Secretary's January 31, 2020, public health emergency declaration, as well as the President's March 13, 2020, national emergency declaration, DHCS began exploring options to temporarily waive and/or modify certain Medicaid and Children's Health Insurance Program (CHIP) requirements. On March 16, 2020, and March 19, 2020, DHCS submitted requests to waive or modify a number of federal requirements under Section 1135 of the Social Security Act (Title 42 United States Code section 1320b-5) to the Centers for Medicare & Medicaid Services (CMS). DHCS' 1135 waiver submissions requested various flexibilities related to COVID-19. On March 23, 2020, CMS issued its approval letter to DHCS authorizing specific Section 1135 flexibilities.

To view **APL 20-006** in its entirety, visit: www.dhcs.ca.gov/Documents/COVID-19/APL-20-004-Emergency-Guidance-1135-Waiver.pdf.

CalOptima COVID-19 Provider Communications

In an effort to provide timely information related to the COVID-19 pandemic, CalOptima recently updated the Provider Communications section of our website with links to the following key regulatory agencies:

- The Center for Medicare and Medicaid Services (CMS)
- California Department of Public Health (CDPH)
- Department of Health Care Services (DHCS)
Orange County Health Care Agency (OC HCA)

We have also developed an “Additional Resources from CalOptima” area, highlighting:

- Telehealth
- Provider Alerts (Fax Blasts)

To access this update and additional provider communications, regarding COVID-19, visit:
<https://www.caloptima.org/en/Features/COVID-19/ProviderCommunication.aspx>.

APL 20-006: Site Review and Medical Record Review

On March 4, 2020, the Department of Health Care Services (DHCS) released **All Plan Letter (APL) 20-006 Site Review and Medical Record Review**. The purpose of this APL is to inform Medi-Cal managed care health plans (MCPs) of updates to the Department of Health Care Services’ (DHCS) site review process, which includes Facility Site Review (FSR) and Medical Record Review (MRR) policies.

This APL includes changes made to the criteria and scoring of DHCS’ FSR and MRR tools and standards. This APL supersedes Policy Letters (PL) 14-004, PL 03-002, and APL 03-007. MCPs are required to meet all requirements included in this APL by July 1, 2020.

To view **APL 20-006** in its entirety, visit: www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2020/APL20-006.pdf.

To view **APL 20-006** in its entirety, visit: www.dhcs.ca.gov/Documents/COVID-19/APL-20-004-Emergency-Guidance-1135-Waiver.pdf.

Attention:

Due to technical issues with the CalOptima Provider Portal, we will not be able to post the April 2020 CalOptima Community Network Provider Report Cards.

CalOptima is working hard to resolve the issue. We apologize for the inconvenience and hope to have the reports available to you in the near future.

CalOptima Seeks Candidates to Participate on Provider Advisory Committee

Application Deadline Extended to April 30, 2020

The CalOptima Board of Directors welcomes input and recommendations from the community regarding issues concerning CalOptima programs. For this reason, the CalOptima Board encourages providers to become involved through the Provider Advisory Committee (PAC).

Advisory Committee members advise the CalOptima Board of Directors and staff. The charge of the committees is to:

- Provide advice and recommendations to the CalOptima Board on issues concerning CalOptima programs as directed by the CalOptima Board.
- Engage in study, research and analysis of issues assigned by the Board or generated by the individual committees.
- Serve as a liaison between interested parties and the Board.
- Assist the Board in obtaining public opinion on issues relating to CalOptima programs.
- Initiate recommendations on issues for study to the CalOptima Board for their approval and consideration.
- Facilitate community outreach for CalOptima and the Board.

Service on the PAC is voluntary and with no salary. Currently, CalOptima is seeking the following representatives to serve on the PAC during their annual recruitment which runs from March 1, 2020, through April 30, 2020. Applicants will be appointed by the CalOptima Board of Directors and will begin their term on July 1, 2020, unless otherwise noted.

PAC

- Allied Health Representative (two seats) to fulfill remaining terms: one seat through June 30, 2021, and second seat through June 30, 2022
- Community Health Centers Representative
- Hospital Representative
- Physician Representative
- Safety Net Representative

Please email csimmons@caloptima.org or by phone at (714) 347-5785 indicating your seat of interest and to request a committee application.

Medi-Cal Chlamydia Screening

On March 9, 2020, the Department of Health Care Services (DHCS) shared a Quality Improvement (QI) opportunity with the managed care plans (MCPs), like CalOptima, highlighting promising practices to improve chlamydia screening.

Rates of sexually transmitted diseases, including chlamydia, have been increasing in California over the past five years and chlamydia rates are at their highest since 1990, underscoring the importance of this new Managed Care Accountability Set (MCAS) measure.

DHCS has included evidence-based practices found to be effective in improving chlamydia screening rates, as well as promising practices utilizing social media. The material within the document provides useful information to assist MCPs with their quality improvement efforts.

For questions regarding these practices to improve chlamydia screening, contact CalOptima Provider Relations at **714-256-8600**.

Importance of Annual Diabetic Eye Exams and Follow-Up

As a contracted CalOptima provider, we thank you for serving our members. As you already know, it is important for patients with diabetes to get an annual diabetic eye exam. CalOptima benefits allow for all eligible members with diabetes to have this an annual diabetic eye exam performed through an ophthalmologist referral or contracted VSP optometrist. Please refer your CalOptima members with diabetes for their annual eye exam today!

As vision care providers, we ask that you to send eye exam results, especially those showing complications such as diabetic retinopathy, to your patient's CalOptima PCP to ensure continuity of care and timely follow-up services. Primary care providers can obtain exam results directly from VSP with the member's consent, so please remind your patient to provide your information to the vision care specialist. Best Practices to Help Improve the HEDIS Diabetic Eye Exam Care Gap:

- PCPs should be sure to include the eye exam report from the vision care professional into their patient's chart, or be sure to document the history of a dilated eye exam with the date of service, test and result into a member's chart.
- Documenting a diabetic eye exam by an optometrist or ophthalmologist does NOT sufficiently meet the criteria to be counted for HEDIS. The medical record needs to indicate that a dilated or retinal exam was performed. If the words "dilated" or "retinal" are missing in the medical records, a notation of "dilated drops used" and findings for macula and vessels will meet the criteria for a dilated exam.
- A chart or photograph of retinal abnormalities indicating the date when the fundus photography was performed and evidence that an optometrist or ophthalmologist reviewed the results would also count.

Thank you for your commitment to improve diabetes management for CalOptima members. Getting timely results can help make a difference in providing timely care. For any questions regarding CalOptima's vision care benefits for members with diabetes, please contact CalOptima Health Management at **714-246-8895**.

Updated DHCS Hepatitis C Treatment Policy

On March 30, 2020, the Department of Health Care Services (DHCS) distributed an updated **Treatment Policy for the Management of Chronic Hepatitis C**.

The Hepatitis C policy has been updated to reflect the latest recommendations from the American Association for the Study of Liver Diseases (AASLD)/Infectious Diseases Society of America (IDSA) Guidelines. The updated policy removes previous language regarding a requirement to do genotype testing as this testing is no longer recommended in the majority of cases. The update also removes language regarding age requirements, which stated that the "Treatment candidate must be at least the minimum age approved by the Food and Drug Administration (FDA) for use of the medication." Additionally, language has been updated regarding populations unlikely to benefit from HCV treatment and refers to AASLD guidelines for more information.

CalOptima distributed the previous version of this Hepatitis C policy with All Plan Letter (APL) 18-013 in August 2018. You may view the complete Treatment Policy for the Management of Chronic Hepatitis C update by visiting <https://www.dhcs.ca.gov/Documents/Chronic-Hep-C.pdf>.

Health Education: Trainings and Meetings

Title	Description	Date and Time
Smoking Cessation for Pregnancy and Beyond	Learn about smoking cessation from experts in an informative, engaging and novel interactive format	5/1/2020 Available anytime
Smoking Cessation Leadership Center	Webinars, publications, toolkits, fact sheets and guides for providers	5/1/2020 Available anytime
Managed Health Care in California Archived Webinars	Multiple 90-minute webinars	5/1/2020 Available anytime
Available CME/CEU Recorded Webinars	Available recorded webinars with available CE/CME units from the Smoking Cessation Leadership Center	5/1/2020 Available anytime
Increasing Adolescent Immunization Coverage	Webinar intended for health professionals engaged in care of patients needing vaccinations	5/4/2020 Available anytime
“We Can” Program 90-Minute Online Training	Four Sessions: We Can! Energize Our Families: Parent Program	5/4/2020 Available anytime
Media-Smart Youth: Eat, Think and Be Active	Free 1-hour webinar for those interested in implementing youth programs	5/4/2020 Available anytime
Training Offered by Different Organizations	Various training opportunities offered by different organizations. Check specific trainings for dates and times	5/5/2020 Available anytime
Tobacco Dependence Treatment and Behavioral Health	Provides mental health and substance use disorder professionals the knowledge to assess and treat tobacco dependence in smokers with co-occurring psychiatric and/or addictive disorders	5/6/2020 Available anytime
Screening, Brief Intervention, and Referral to Treatment (SBIRT) Training	Virtual SBIRT learning webinar	5/6/2020 12–1 p.m.
How to Talk With Patients About Smoking Cessation and Anxiety	Free recorded webinar with 1.0 CE credit	5/13/2020 Available anytime
How to Talk With Patients About Smoking Cessation and Anxiety	Free recorded webinar with 1.0 CE credit	5/27/2020 Available anytime
The Resources for Integrated Care – Webinar Recordings	The Resources for Integrated Care website features recordings of webinars and additional resources and tools for providers and health plans	5/29/2020 12–1 p.m.

Policies and Procedures Monthly Update

The following is a list outlining changes made to CalOptima policies and procedures during **February 2020**. The full description of the policies below are finalized and available on CalOptima’s website at www.caloptima.org.

Policy Number	Policy Title, Description and Revisions	Policy Last Review and/or Last Revision Date
CalOptima Administrative		
AA.1201	CalOptima Mission, Vision, and Values	03/01/20
GG.1426	Pharmacy Management Residency Program	03/01/20
Medi-Cal		
AA.1000	Glossary of Terms – Medi-Cal	01/01/20
GG.1331	Health Homes Program (HHP) Services and Care Management	01/01/20
GG.1350	Health Homes Program (HHP) Member Eligibility	01/01/20
GG.1548	Authorization and Monitoring of Behavioral Health Treatment (BHT) Services	02/01/20
GG.1600	Access and Availability Standards	12/01/19

Policies and Procedures Monthly Update (cont.)

Policy Number	Policy Title, Description and Revisions	Policy Last Review and/or Last Revision Date
Medi-Cal (cont.)		
GG.1665	Telehealth and Other Technology-Enabled Services	03/01/20
GG.1900	Behavioral Health Services	03/01/20
Multiple Programs		
AA.1219b	Provider Advisory Committee	03/05/20
GG.1110	Primary Care Practitioner Definition, Role, and Responsibilities	03/01/20
GG.1602Δ	Non-Physician Medical Practitioner (NMP) Scope of Practice	03/01/20
GG.1616Δ	Fair Hearing Plan for Practitioners	03/01/20
GG.1628	Confidentiality of Quality Improvement Activities	03/01/20
GG.1629	Quality Improvement Program	03/01/20
GG.1634	Quality and Performance Improvement Projects	03/01/20
GG.1639Δ	Post-Hospital Discharge Medication Supply	10/03/19
MA.2100	Telehealth and Other Technology-Enabled Services	03/01/20
OneCare		
MA.1001	Glossary of Terms – OneCare	01/01/20
MA.4001	Member Rights and Responsibilities	01/01/20
MA.4007	Member Disclosures	01/01/20
MA.4009	Member Orientation	01/01/20
MA.4016	Direct Member Reimbursement for Covered Services	03/01/20
MA.6026	Coordination of Care, Medi-Cal Covered Services for OneCare	03/01/20
OneCare Connect		
CMC.1001	Glossary of Terms – OneCare Connect	01/01/20
CMC.4001	Member Rights and Responsibilities	01/01/20
CMC.4003	Member Enrollment (Voluntary)	03/01/20
CMC.4004	Member Disenrollment	03/01/20
CMC.4007	Member Disclosures	01/01/20
CMC.4008	Member Handbook	01/01/20
CMC.4009	Member Orientation	01/01/20
CMC.4012	Direct Member Reimbursement for Covered Services	03/01/20
CMC.6032	Comprehensive Care Coordination	03/01/20
CMC.6040	First Tier, Downstream, and Related Entity (FDR) Model of Care – Roles and Responsibilities with Specific Personal Care Coordinator (PCC) Requirements	03/01/20
PACE		
PA.1000	Glossary of Terms – PACE	01/01/20

Provider Code Updates

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

- Place of Service Code 25 (Birthing Center) Updates
- Rate Update for Fetal Aneuploidy
- Split-Billed Radiology Services Reimbursement Rate Adjustment
- Retroactive Frequency Limitation Updates for Vestronidase, HCPCS code J3397
- Provider Specialty Code Clarification
- New Provider Web Page Coming Soon to the New Medi-Cal Provider Website
- New Web Page for CHDP Providers
- Updates to the List of Contracted Incontinence Absorbent Products
- Updates to the List of Contracted Sterile Needles
- Updates to the List of Enteral Nutrition Products

For detailed information regarding these changes, please refer to the March 2020 General Medicine bulletin 549 on the Medi-Cal website <http://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/gm202003.asp> and the Durable Medical Equipment and Medical Supplies bulletin 534 <http://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/dme202003.asp>

For CalOptima's prior authorization required list, please refer to the CalOptima website: <https://www.caloptima.org/en/ForProviders/ClaimsAndEligibility/PriorAuthorizations.aspx>.

Important Meetings

Visit the Provider Events section of the CalOptima website to view the provider activities calendar and download registration forms. CalOptima's office is located at: 505 City Parkway West, Orange, CA 92868. Unless otherwise specified, meetings are held at CalOptima.

Meeting	Date and Time
CalOptima Board of Directors	May 7, 2 p.m.
CalOptima Provider Advisory Committee	May 14, 8 a.m.
CalOptima Board of Directors' Quality Assurance Committee	May 20, 3 p.m.
CalOptima Board of Directors' Finance and Audit Committee	May 21, 2 p.m.

Visit the CalOptima Website

Visit the CalOptima website at www.caloptima.org to view the Provider Manuals, Policies and Guides section for information regarding:

- Member Rights and Responsibilities
- QI Program and Goals
- Privacy and Confidentiality
- Pharmaceutical Management Procedures
- Cultural and Linguistic Services
- Changes to the Approved Drug List (Formulary)
- Clinical Practice Guidelines
- Complex Case Management
- Disease Management Services
- Utilization Management

Request hard copies by calling
714-246-8600