



# PROVIDER UPDATE

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## COVID-19 Updated Guidance for Medicare Advantage Organizations

The Centers for Medicare & Medicaid Services (CMS) is issuing updated information related to its previously issued April 21 guidance, "Information Related to Coronavirus Disease 2019 — COVID-19."

- Q. Do the Inpatient Stays Paid under Inpatient Prospective Payment System (IPPS) payment increase under section 3710 of the CARES Act apply to payments made by Medicare Advantage (MA) organizations?
- A. For contracted hospitals, section 1854(a)(6)(B)(iii) of the Act and 42 CFR § 422.256(a)(2)(i) and (ii) prohibit the Centers for Medicare & Medicaid Services from interfering in payment arrangements between MA organizations and contract hospitals by requiring specific price structures for payment. Thus, whether and how the IPPS payment adjustment might affect an MA organization's payments to its contract hospitals governed by the terms of the contract between the MA organization and the hospital.

Non-contract hospitals (including hospitals that are "deemed" to be contracting under a private fee-for-service (PFFS) plan), are required under section 1866(a)(1)(O) of the Act to accept the original Medicare payment amount as payment in full for services furnished to an MA enrollee on a non-contract basis. Because the IPPS payment adjustment provided by section 3710 of the CARES Act increases the amount acute care hospitals are entitled to receive under Medicare Part A, this adjustment also applies to MA organizations' payments to non-contract acute care hospitals. The payment adjustment applies to discharges occurring during the national emergency period of enrollees with a COVID-19 diagnosis.

## CalOptima Board Transition Begins

On June 2, the Orange County Board of Supervisors began the transition to a new CalOptima Board of Directors by appointing six new members and reappointing one member. Each member will serve a four-year term beginning in August 2020.

During the June 4 CalOptima Board meeting, outgoing Board members were recognized for their service. CalOptima expressed appreciation to the following directors:

- Paul Yost, M.D., an anesthesiologist affiliated with CHOC Children's and St. Joseph Hospital, who is the Board chair for the past three years during his current term and was also on the Board previously from 2001–09
- Lee Penrose, a health care executive, who represents hospitals since November 2011 and was previously vice chair for six years
- Dr. Nikan Khatibi, an anesthesiologist, pain specialist and addiction medicine physician, who serves as the current vice chair
- Ria Berger, CEO of Healthy Smiles for Kids of Orange County
- Ron DiLuigi, a retired health system executive
- Alexander Nguyen, M.D., MPH, a psychiatrist and assistant clinical professor at VA Long Beach Healthcare System and UC Riverside

Additionally, CalOptima welcomes the following Board members, serving terms from August 4, 2020–August 3, 2024. Each director fills a designated seat designed to reflect CalOptima's broad constituency.

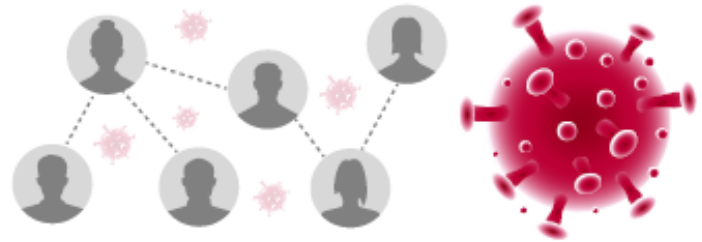
- Victor Jordan, Chief Operating Officer of Providence St. Joseph Health Southern California, filling the seat for a current or former hospital administrator
- Trieu Tran, M.D., an orthopedic surgeon, filling the seat for a licensed medical provider in current practice but not affiliated with a contracted health network
- Mary Giammona, M.D., MPH, a medical director at Molina Healthcare, filling the seat for a licensed physician in current practice who represents a contracted health network
- Clayton Corwin, president of StoneCreek Company, a commercial real estate firm, filling the seat for a legal resident of Orange County
- J. Scott Schoeffel, a health care attorney, reappointed for a second term to fill the seat for an accounting or public finance professional, or an attorney
- Isabel Becerra, CEO of Coalition of Orange County Community Health Centers, filling the seat for a community clinic representative
- Jackie Brodsky, R.N., a retired nurse, filling the seat for a CalOptima member or family member of a member

The remaining three seats of the 10-member Board are statutorily filled by two members of the Board of Supervisors and the Director of the Orange County Health Care Agency (OC HCA). They are Board of Supervisors Chair Michelle Steel, Board of Supervisors Vice Chair Andrew Do and Clayton Chau, M.D., Director of the HCA (non-voting member). Supervisor Doug Chaffee is an alternate.




"CalOptima will benefit from the new Board members' diverse experience and valuable insight," said Richard Sanchez, CalOptima Interim Chief Executive Officer. "Orange County's health care environment has changed dramatically in the past few months, and the staff and I look forward to collaborating with the Board to ensure that CalOptima remains responsive to members and upholds our longstanding commitment to quality care."

# CASE INVESTIGATION and CONTACT TRACING





COVID-19 case investigation and contact tracing is underway with public health professionals from the OC Health Care Agency (HCA) – your local health department – including doctors, nurses, epidemiologists, and investigators with training in communicable diseases and interviewing skills.



These folks make up our Case and Contact Investigator (CCI) team. So how does it work?

<p><b>1</b> Step</p> 	<p>When a resident takes a diagnostic PCR test and the results are positive for COVID-19, it is reported to our CCI team. The process generally takes 1-3 days.</p>
<p><b>2</b> Step</p> 	<p>The CCI team makes contact with the resident using methods like phone, mail, and email to ensure they have the ability to isolate and get their day-to-day needs met. *If you've tested positive, need assistance and have yet to hear from us, our Health Referral Line is here to help at (800) 564-8448.</p>
<p><b>3</b> Step</p> 	<p>The CCI team builds a timeline of when the individual's symptoms began, and helps identify a list of potential contacts. Then, they get to work notifying the people on the list of the potential exposure, check-in on them regularly, and offer personalized guidance based on their unique health history related to testing, treatment and care.</p>

### Stay Informed

 @ochealth  @ochealthinfo  @ochealthinfo  [www.ochealthinfo.com/novelcoronavirus](http://www.ochealthinfo.com/novelcoronavirus)



Please know the HCA does not perform contact tracing and case investigation based on serology/antibody test results. Serology results are NOT used to diagnose a current COVID-19 infection and are not reportable to the HCA.

Guidance related to COVID-19 quarantining from the HCA is available here:  
<http://www.ochealthinfo.com/self-quarantine-guidance/>

## Prop 56 Directed Payments for ACES Services Training

On December 30, 2019, the Department of Health Care Services (DHCS) distributed **All Plan Letter (APL) 19-018: Proposition 56 Directed Payments for Adverse Childhood Experiences Screening (ACES) Services.**

AB 340 required DHCS, in consultation with the California Department of Social Services (CDSS) and others, to convene an advisory workgroup to update, amend, or develop, if appropriate, tools and protocols for screening children for trauma as defined with the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit.

DHCS requires managed care plans (MCPs), like CalOptima, to either directly or through their delegated entities and subcontractors, to comply with a minimum fee schedule of \$29 for each qualifying ACE screening service by a network provider with **dates of services on or after January 1, 2020.**

A qualifying ACE service is one provided by a network provider through the use of either the PEARLS tool or a qualifying ACE questionnaire to a member enrolled with CalOptima who is not dually eligible for Medi-Cal and Medicare Part B. To qualify, the ACE questionnaire must include questions on the 10 original categories of ACEs linked in APL 19-018. Providers may utilize either an ACE questionnaire or the PEARLS tool for members 18 or 19 years of age; the ACEs screening portion of the PEARLS tool (Part 1) is also valid to conduct ACEs screenings among adults ages 20 years and older. To be eligible for the directed payment, the network provider must meet the following criteria:

- The network provider must utilize either the PEARLS tool or a qualifying ACEs questionnaire, as appropriate.
- The network provider must bill using one of the HCPCS codes listed in the APL based on the screening score from the PEARLS tool or ACEs questionnaire used.
- The network provider that rendered the screening must be on DHCS' list of providers that have completed the state-sponsored trauma-informed care training.

DHCS will provide and/or authorize ACEs-oriented trauma-informed care training for providers and their ancillary office staff. The training will be available in-person, including regional convenings and online. The training will include general training about trauma-informed care, as well as specific training on the use of the ACEs questionnaire and PEARLS tool. It will also include training on ACEs Screening Clinical Algorithms to help providers assess patient risk of toxic stress physiology and how to incorporate ACEs screening results into clinical care and follow-up plans.

The training requirement will be waived for dates of services prior to July 1, 2020. However, **Beginning July 1, 2020, network providers must self-attest to completing certified ACEs training on the DHCS website to continue receiving directed payments.** DHCS will establish a website for providers to self-attest to their one-time completion of the state-sponsored trauma-informed care training. While CalOptima will have access, DHCS will maintain the list of providers who have self-attested to their completion of the training.

Providers must document all of the following and retain the information in the member's medical record, making it available upon request:

- Tool that was used
- Completed screen was reviewed
- Results of the screen and the interpretation of results
- What was discussed with the member and/or family
- Appropriate actions taken

For additional information, please review **APL 19-018** in its entirety by visiting <https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2019/APL19-018.pdf>



## RECOMMENDATIONS DURING COVID-19



### MANAGING DIABETES (Part 1)

People with diabetes are more likely to experience severe symptoms and complications when infected with COVID-19.

- California Department of Health Care Services

#### A REMINDER OF RESOURCES FOR MCPs

##### Provider Re-Engineering

- ▶ **Video Visits:** Staff provides [iPad](#) to the member, waiting in car, for a video visit and sanitizes iPad in between members' use.
- ▶ **Project Echo Diabetes Program:** [A hub team](#) of experts train primary care physicians on how to deliver subspecialty care in primary care settings about diabetes amid COVID-19.
- ▶ **Pharmacy Access:** Members call first before picking up medications curbside; consider reducing or waiving prescription delivery costs.
- ▶ **Telemedicine Application:** Using [Tidepool](#) and [CGMs](#), clinicians are able to access member glucometer and insulin pump data to adjust medications.

##### Support for Members

- ▶ **Medication Availability:** Ensure a minimum of 90 days supply of maintenance medications (both generic and brand name) and a week ahead supply of insulin; home delivery options.
- ▶ **Use of Quick Reference Guide:** Encourage members to use a [one-page resource](#) with local numbers and website links of pharmacy and community health support, and personal emergency contacts.
- ▶ **Diabetic Self Care Tips:** Gather [supplies](#) and important information, such as [diabetes meal planning](#); [plate method](#); [fitness](#) and [sample exercises](#); [physical activity recommendations](#) for different age groups; what to do [if sick](#) with COVID-19.



## RECOMMENDATIONS DURING COVID-19



### MANAGING DIABETES (Part 2)

People with diabetes are more likely to experience severe symptoms and complications when infected with COVID-19.

- California Department of Health Care Services

#### MCP SPOTLIGHT

##### SUPPORTING PROVIDERS AND MEMBERS DURING COVID-19

- ▶ **Virtual Town Hall Meetings:** MCP facilitates provider meetings to share effective practices to improve and safely provide preventive services to members.
- ▶ **Community Partnerships:** MCP assists providers with SNAP referrals, food bank linkages, and endocrine specialty referrals.
- ▶ **Medication and Medical Equipment Assistance:** MCP facilitates prior authorization needs for medications to manage diabetes not on formulary.
- ▶ **Food Access Assistance:** MCP, in partnership with grocery stores, provided two weeks food supply using the food box program.
- ▶ **Transport Assistance:** MCP assists transport of members to shelter care or motel room for COVID-19 self-quarantine purpose.
- ▶ **Strategic Outreach:** MCP uses data to identify high risk members for targeted messaging with wellness tips and immunization reminders.
- ▶ **Messaging:** MCP assures members that they can continue to safely receive vital health services and needed immunizations to keep members healthy.

To view the above recommendations online and to access information links, visit [https://www.caloptima.org/~media/Files/CalOptimaOrg/508/COVID19/2020-05\\_DiabetesQIPostcard\\_508.ashx](https://www.caloptima.org/~media/Files/CalOptimaOrg/508/COVID19/2020-05_DiabetesQIPostcard_508.ashx)



# ECHO DIABETES

## IN THE TIME OF COVID-19

Join us for this Webinar Series Addressing Complex Diabetes Management in the Primary Care Setting

REGISTER TODAY — SPACE IS LIMITED!

Limited access to endocrinologists and diabetes specialty care necessitates the management of patients with complex diabetes in the primary care setting. Now, more than ever, during COVID-19, it is important for care teams in the primary care setting to support patients with diabetes to obtain achievable goals for their blood glucose, blood pressure and lipids during this pandemic and beyond.

## WEEKLY SERIES WEDNESDAYS

9:00 – 10:15 am PT • 12:00 – 1:15 pm ET

### TARGET AUDIENCE:

Primary care providers and all members of the primary care team in all practice settings who provide front-line care for high-risk individuals with diabetes.

### PROGRAM AT-A-GLANCE:

- Live Webinar Series: Free public series of 16 weekly interactive webinars (certified for 1.25 AMA PRA Category 1 Credits™ each) led by nationally/internationally renowned faculty team of diabetes experts from Stanford and over 10 different diabetes and ECHO organizations.
- On-demand Webinars: Access to free video/slide webcasts (certified for 0.5 AMA PRA Category 1 Credits™).
- Curbside Consultations for participating providers: Unique opportunity for participants to submit Q&A and case presentations to expert multidisciplinary faculty
- Clinician/Patient Resources: Consolidated COVID-19 resources related to diabetes management in the primary care setting



### SAMPLING OF WEEKLY SESSION TOPICS:

- Leveraging Telehealth and Remote Monitoring
- Diabetes Patient Needs in the Time of COVID-19
  - DPP-4 Inhibitor, GLP-1 Receptor Agonist, & SGLT Inhibitor Therapies
  - Continuous Glucose Monitoring (CGM) & Beyond A1c Targets
  - Identifying High-Risk Diabetes Patients for COVID-19 Triage
  - COVID-19 & Sick Day Management for People with Diabetes
  - Tackling Therapeutic Inertia
  - Insulin Dosing & Therapeutic Inertia in the Time of COVID-19
  - Diabetes Distress & Coping in the Time COVID-19
  - Diabetes & Exercise in the Time of COVID-19
  - Diabetes and Pregnancy in the Time of COVID-19

LEARN MORE & RESERVE YOUR SPOT TODAY — SPACE IS LIMITED!

[diabetescovid.stanford.edu](https://diabetescovid.stanford.edu)



ABOUT PROJECT ECHO: During this time of global crisis, the Project ECHO model has a special role to play in quickly helping to connect experts and frontline healthcare professionals caring for patients with diabetes during the time of COVID-19.  
CONTACT: [DIABETESCOVID@STANFORD.EDU](mailto:DIABETESCOVID@STANFORD.EDU)

## CalOptima Medi-Cal Members May Qualify For Low- or No-Cost Telephone Service

The California LifeLine is a statewide program that provides discounted home phone and prepaid cell phone services with unlimited calls and unlimited text. Compare services between a cell phone and a land line and choose an option that works best. “Bring Your Own Device (BYOD)” services are also available, which may lower the cost even further.

**How to get the phone?** The following instructions will help your patients apply for the California LifeLine program:

- Go to [www.californialifeline.com](http://www.californialifeline.com)
- Once online, click on the Help tab and choose “Provider Search” from the drop-down menu.
- Enter your ZIP code to choose a provider in your area and complete the application with one of the identified providers.

After making your request, you will receive a letter in the mail with a Personal Identification Number (PIN) and a form. Fill out the form and send it back with copies of requested documents. Make sure to include your PIN and the Phone Number or Enrollment Code printed on the form you received to complete the request.

If you do not receive a form within three weeks, call 866-272-0357 to get help.

**Important:** The benefit is limited to one service per household. Getting multiple discounted phone services per household is against the law. Penalties range from losing the benefits to being put in prison.

**Be aware of scammers!** Call 1-866-272-0357 for any questions or visit [www.californialifeline.com](http://www.californialifeline.com).

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## CalAIM Implementation Update

On May 27, 2020, the Department of Health Care Services (DHCS) provided an update regarding California Advancing and Innovating Medi-Cal (CalAIM). DHCS has postponed CalAIM implementation timelines to allow continued focus on the response to the COVID-19 pandemic in our communities. Governor Newsom’s proposed May Revision of the Fiscal Year (FY) 2020-21 State Budget also notes that implementation of CalAIM is delayed.

More specifically, the activities listed below are **no longer targeted** for implementation on **January 1, 2021**:

- Institutional long-term care carve-in to managed care
- Major organ transplant carve-in to managed care
- Specialty mental health carve-out to fee-for-service (Partnership Solano Kaiser members and Kaiser Sacramento only)
- Mandatory enrollment in managed care for non-dual populations
- Transition of Whole Person Care to statewide Enhanced Care Management
- Implementation of In Lieu of Services and Incentive Payments

In addition, the May Revision proposes to discontinue the Multipurpose Senior Services Program (MSSP), **effective no sooner than July 1, 2020**.

# Proposition 56 Directed Payments for Family Planning Services

On May 13, 2020, the Department of Health Care Services (DHCS) distributed **All Plan Letter (APL) 20-013: Proposition 56 Directed Payments for Family Planning Services**.

The purpose of this APL is to provide Medi-Cal managed care plans (MCPs), like CalOptima, with guidance on directed payments, funded by the California Healthcare, Research and Prevention Tobacco Tax Act of 2016 (Proposition 56), for the provision of specified family planning services with dates of service on or after July 1, 2019.

To view **APL 20-013** in its entirety, visit <https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2020/APL20-013.pdf>.

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## Provider Code Updates

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

- Child Health and Disability Program (CHDP) Gateway Flexibilities Due to COVID-19
- Presumptive Eligibility for Pregnant Women (PE4PW) Flexibilities Due to COVID-19
- Hospital Presumptive Eligibility (HPE) Flexibilities Due to COVID-19
- April 2020 HCPCS Quarterly Update: Policy Updates
- MRI Breast Screening for Every Woman Counts Program
- Meningococcal Conjugate Vaccine is a Medi-Cal Benefit
- Split-Bill Modifiers Added for Myocardial Imaging
- Hepatitis C Screening Now Billable with Any Diagnosis Codes
- 2020 Update to CHDP Gateway Income Eligibility Guidelines
- 2020 Income Eligibility Guidelines for PE4PW
- Second Update to NCCI Quarterly Update for January 2020
- Medi-Cal Subscription Service Upgrade Coming Soon
- Drug Safety Communication: Withdrawal of All Ranitidine Products
- Quality of Care Update: Risks Associated with Use of Fluoroquinolones
- Non-Wheelchair Accessories and Supplies Included in Rental Rate
- Policy Update for Back-up Ventilators
- Negotiated Prices and Oxygen Modifier Policy Updates
- Updates to the List of Enteral Nutrition Products
- New COVID-19 Specimen Collection Rate
- COVID-19 Specimen Collection is a New Medi-Cal Benefit
- Substance Use Disorder Medication Flexibilities During COVID-19

For detailed information regarding these changes, please refer to the May 2020 General Medicine Bulletin 551 on the Medi-Cal website <http://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/gm202005.asp#a1>, the May 2020 DME Bulletin 536 <http://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/dme202005.asp>, [http://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom\\_30339\\_63.asp](http://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_30339_63.asp), [http://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom\\_30339\\_56.asp](http://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_30339_56.asp) [http://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom\\_30339\\_54.asp](http://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_30339_54.asp)

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

Visit the Provider Events section of the CalOptima website to view the provider activities calendar and download registration forms.



## New Provider Dispute Resolution Request Form Now Available

As a reminder, CalOptima offers a Provider Dispute Resolution Request (PDR) process for providers to resolve issues involving claims submitted to CalOptima. The PDR process is used primarily to address underpayment and overpayment issues.

You may submit a provider complaint related to CalOptima Direct, CalOptima Community Network or to dispute a claim paid by the CalOptima Claims department by visiting <https://www.caloptima.org/en/ForProviders/Resources/ProviderComplaintProcess.aspx> to obtain and complete a copy of the new PDR form. Completed Level 1 forms should be sent to:

**CalOptima Claims Provider Dispute**  
**P.O. Box 57015**  
**Irvine, CA 92619**

For routine follow-up regarding claims status, call the CalOptima Claims Provider Line at **714-246-8885**

**Please note**, providers wishing to dispute a health network claim should contract the health network directly.

## 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	7/1/2020 Available anytime
Smoking Cessation Leadership Center	Webinars, publications, toolkits, fact sheets and guides for providers	7/1/2020 Available anytime
Managed Health Care in California Archived Webinars	Multiple 90-minute webinars	7/1/2020 Available anytime
Available CME/CEU Recorded Webinars	Available recorded webinars with available CE/CME units from the Smoking Cessation Leadership Center	7/1/2020 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	7/1/2020 Available anytime
Screening, Brief Intervention, and Referral to Treatment (SBIRT) Training	Virtual SBIRT learning webinar	7/1/2020 12–1 p.m.
Increasing Adolescent Immunization Coverage	Webinar intended for health professionals engaged in care of patients needing vaccinations	7/6/2020 Available anytime
“We Can” Program 90-Minute Online Training	Four Sessions: We Can! Energize Our Families: Parent Program	7/6/2020 Available anytime
Media-Smart Youth: Eat, Think and Be Active	Free 1-hour webinar for those interested in implementing youth programs	7/6/2020 Available anytime
Training Offered by Different Organizations	Various training opportunities offered by different organizations. Check specific trainings for dates and times	7/7/2020 Available anytime
How to Talk With Patients About Smoking Cessation and Anxiety	Free recorded webinar with 1.0 CE credit	7/8/2020 Available anytime
How to Talk With Patients About Smoking Cessation and Anxiety	Free recorded webinar with 1.0 CE credit	7/22/2020 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	7/31/2020 12–1 p.m.

## Policies and Procedures Monthly Update

The following is a list outlining changes made to CalOptima policies and procedures during **May 2020**. The full description of the policies below are finalized and available on CalOptima's website at [www.caloptima.org](http://www.caloptima.org).

Policy Number	Policy Title, Description and Revisions	Policy Last Review and/ or Last Revision Date
<b>Medi-Cal</b>		
AA.1219a	Member Advisory Committee	03/01/20
DD.2002	Cultural and Linguistic Services	02/01/20
FF.2011	Directed Payments	05/01/20
<b>Multiple Programs</b>		
GG.1107	Coverage for Members Transitioning between CalOptima and a Health Network or between Health Networks, including CalOptima Community Network	05/01/20
GG.1620	Quality Improvement Committee	05/07/20
GG.1656 <sup>Δ</sup>	Quality Improvement and Utilization Management Conflicts of Interest	05/07/20
GG.1660	Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC) Financial Incentives and Pay for Performance Payments	05/07/20
MA.6104	Opioid Medication Utilization Management	05/07/20
<b>OneCare</b>		
MA.4003	Member Enrollment	04/01/20
<b>OneCare Connect</b>		
CMC.2001	Primary Care Engagement and Clinical Documentation Integrity Program for Community Care Network Contracted Providers	05/07/20
CMC.6030	Transition of Care	05/01/20

## Important Meetings

Unless otherwise specified, all meetings are held virtually at this time due to COVID-19. To select which virtual meeting you would like to attend, visit the CalOptima website at:

<https://www.caloptima.org/en/About/BoardAndCommitteeMeetings.aspx>

Meetings	Date and Time
CalOptima Board of Directors	No regular meeting scheduled
CalOptima Provider Advisory Committee	No regular meeting scheduled
CalOptima Member Advisory Committee	No regular meeting scheduled
CalOptima Whole-Child Model Family Advisory Committee	June 23, 9:30 a.m.
CalOptima OneCare Connect Member Advisory Committee	June 25, 3 p.m.
CalOptima Investment Advisory Committee	No regular meeting scheduled
CalOptima Board of Directors Finance and Audit Committee	No regular meeting scheduled
CalOptima Board of Directors Quality Assurance Committee	No regular meeting scheduled

## Visit the CalOptima Website

Visit the CalOptima website at [www.caloptima.org](http://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**