PROVIDER UPDATE

What’s Inside:

- APL 20-022: COVID-19 Vaccine Administration (Revised)
- Recommendations During COVID-19 – Addressing Maternal Health Disparities QI Postcard
- HHS COVID-19 Vaccination Information and Access
- Understanding California Advancing and Innovating Medi-Cal (CalAIM) Initiative
- Triple P Online – Positive Parenting in Uncertain Times
- APL 21-004: Standards for Determining Threshold Languages, Nondiscrimination Requirements, and Language Assistance Services — RVD
- APL 21-005: California Children's Services Whole Child Model Program
- NL 03-0421: California Children's Services Whole Child Model Program (Revised)
- APL 21-006: Network Certification Requirements
- CalOptima COVID-19 Provider Toolkit Now Available
- HMA Systems of Care Webinar Series
- Health Education: Trainings and Meetings
- Policies and Procedures Monthly Update
- Provider Code Updates
- Important Meetings

COVID-19 Daily Reporting (New Data Fields)

On May 5, 2021, the Department of Health Care Services (DHCS) provided updated guidance to managed care plans (MCPs) regarding daily COVID-19 reporting.

Beginning May 17, 2021 and forward, the existing daily COVID-19 survey will be updated to include the following data field questions related to grievances filed for COVID-19 vaccine transportation:

- **Field 4:** Number of grievances received related to transportation for COVID-19 vaccine
- **Field 5:** Open transportation grievances related to COVID-19 vaccine
- **Field 6:** Closed transportation grievances related to COVID-19 vaccine

As a reminder, DHCS suggests reporting new impacts only (do not report information that has been reported previously). Additionally, you do not need to report Community-Based Adult Services (CBAS) facility impacts.

**Do not complete the daily survey if there is nothing to report for that day.**

For more information regarding the daily COVID-19 reporting updates, call the CalOptima Provider Relations department at 714-246-8600.
APL 20-022: COVID-19 Vaccine Administration (Revised)

On April 30, 2021, the Department of Health Care Services (DHCS) distributed Revised All-Plan Letter (APL) 20-022: COVID-19 Vaccine Administration. The purpose of this APL is to provide Medi-Cal managed care plans (MCPs) with information and guidance regarding COVID-19 vaccine coverage and administration in the Medi-Cal program. To view a copy of the revised APL 20-022 in its entirety, visit https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2020/APL20-022.pdf.

Revised APL text is outlined below in italics.

COVID-19 Vaccine Administration

The California Department of Public Health (CDPH) provides guidance on vaccine priorities and allocations. Currently, vaccines may be given to every Californian age 16 and older. DHCS would like to emphasize that health care providers should still use their clinical judgment to prioritize and vaccinate individuals who are deemed to be at the highest risk for morbidity and mortality from COVID-19 as a direct result of one or more severe health conditions-, or if, as a result of a developmental or other severe high-risk disability, one of the following applies:

- The individual is likely to develop severe life-threatening illness or succumb to death from the COVID-19 infection.
- Acquiring COVID-19 will limit the individual’s ability to receive ongoing care or services vital to their well-being and survival.
- Providing adequate and timely COVID-19 related care will be particularly challenging as a result of the individual’s disability.

An update to the MyTurn appointment request system will add a check box that will ask if an individual needs transportation to a vaccine appointment, or is homebound because they are unable to leave home due to limited mobility or fragile health and need a vaccine in their home. If the individual checks this box, they will be notified that they will receive a call to schedule their vaccine appointment.

A customer service representative from the California COVID-19 Vaccination Services Information Line call center will contact the individual. If the individual needs transportation and has Medi-Cal, and is enrolled in an MCP, the call center representative will schedule their vaccine appointment and connect them to their MCP for transportation coordination.

If the individual is homebound, the call center representative will provide the individual’s information to the Local Health Department (LHD). The LHD will then arrange for a medical team to visit the individual at home to vaccinate the individual and any family members.

MCPs should take steps to identify members who may be homebound and contact those members to determine if they have already been vaccinated against COVID-19 and, if not, whether they want to be vaccinated. For those members who have not been vaccinated, and want to be, the MCP should ascertain whether the member wants an in-home vaccination. After the MCP identifies those homebound members who want an in-home vaccination, the MCPs are to refer the member to the MyTurn appointment request system and instruct the member to check the box to indicate they need an in-home vaccination. Assistance for members is also available through the California COVID-19 Hotline. For those members who do not want an in-home vaccination, MCPs are to assist in coordination of vaccine services and transportation as needed.

MCPs must work with subcontractors and network providers to vaccinate members who are ages 16 and older. MCPs are encouraged to communicate to vaccine providers who are also the member’s medical care provider to use the vaccination appointment as an opportunity to check in with members and take care of medical and/or preventive care issues.

MCPs are to report counts of COVID-19 vaccine-related transportation grievances through DHCS’s Managed Care Operations Division (MCOD) daily COVID-19 reporting process.

Additional Information

Blue Shield of California, the State of California’s Third Party Administrator, will be working closely with onboarding partners to identify prospective COVID-19 vaccine providers. All current and prospective COVID-19 vaccine providers must hold the appropriate credentials and licensing in the jurisdiction where vaccination will take place, meet federal and state requirements, and have the capacity to properly maintain and administer the COVID-19 vaccine.
Recommendations During COVID-19

Addressing Maternal Health Disparities

American women die in childbirth at a higher rate than in any other developed country, while non-Hispanic Black women are more than 3 times more likely to have a maternal death than white women in the United States. Most pregnancy-related deaths are preventable. (American Journal of Managed Care)

The Impact of COVID-19 in California and Maternal Health

COVID-19 death rates per 100,000 population

- Limited information available about SARS-CoV-2 infection in pregnant women in California.
- Nationally, Hispanic and non-Hispanic black pregnant women appear to be disproportionately affected by SARS-CoV-2 infection during pregnancy.
- Among reproductive-age women with SARS-CoV-2 infection in the U.S., pregnancy was associated with hospitalization and increased risk for intensive care unit admission, and receipt of mechanical ventilation, but not with death.
- During the study period of January to June 2020, 22.1% of the total 8,207 cases of COVID-19 in pregnant women reported to the CDC, were Black.

Resources to Address COVID-19 and Maternal Health

- Explore educational webinars from the California Maternal Quality Care Collaborative.
- Explore virtual care platforms such as Babyscripts app to facilitate remote monitoring and delivery of prenatal care by interfacing between the member and provider.
- Use a COVID-Watch tool that sends automated text messages to pregnant and newly postpartum women who are experiencing symptoms of COVID-19.

To view the above recommendations online and to access information links, visit https://www.caloptima.org/~media/Files/CalOptimaOrg/508/COVID19/2021-04-23_MaternalHealthQIPostcard_508.ashx.
RecommenDations during COVID-19

Addressing Maternal Health Disparities

Despite impressive reductions in maternal mortality for all racial/ethnic groups in California, Black mothers/birthing people are still three to four times as likely to die (PDF) from pregnancy/birth-related causes and twice as likely to suffer a maternal morbidity (such as hemorrhage and infection) than those in all other racial/ethnic groups.

California Health Care Foundation (CHCF)

Resources to Support Maternal Mental Health

- Use A Black Mama's Guide to Living and Thriving from Mamatoto Village that provides a framework for self-healing and wellness.
- Provide resources (i.e., BIPOC resources and intensive treatment programs) for members and families affected by maternal mental health (MMH) conditions that are often undiagnosed and untreated.
- Encourage members to use the Shades of Blue Project that provides online mental health support to women of color.
- Encourage the use of the Postpartum Support International where PSI Coordinators assist with linking members to specialized providers, resources and support groups.

Resources to Support Maternal Emotional Well-Being

- Create community listening sessions to allow women from high-risk areas across the state to share stories about their birth experiences and their thoughts on the maternal mortality rate.
- Use social navigators to assist with coordinating services for pregnant mothers.
- Use community partners (e.g., parks, hair and nail salons, retail stores, local colleges etc.) to inform members of benefits and services, and partner with local hospital leadership, public health and Black Infant Health program (BIH) programs.
- Learn from Medi-Cal Managed Care Health Plans’ Doula Pilot Programs to support women giving birth. (*Note: not a current Medi-Cal covered benefit but under consideration for the future).
HHS COVID-19 Vaccination Information and Access

In response to access barriers faced by certain populations and individuals who are inappropriately being charged for COVID-19 vaccine fees, the United States Department of Health and Human Service (HHS) developed a set of COVID-19 Patient and Provider Fact Sheets available in English and Spanish.

The fact sheets serve as a reminder that vaccines, testing, and treatment for COVID-19 are provided at no cost to all individuals living in the United States, regardless of immigration status. CalOptima encourage you to share the materials with those who may find this information helpful.


Understanding California Advancing and Innovating Medi-Cal (CalAIM) Initiative

California Advancing and Innovating Medi-Cal (CalAIM) is a multi-year initiative spanning from 2022 to 2027. Relaunched by the Department of Health Care Services (DHCS), the initiative attempts to improve quality of life and health outcomes while addressing complex challenges facing California’s most vulnerable residents such as individuals experiencing homelessness, behavioral health care access, complex medical care for children, the growing number of justice-involved populations who have significant clinical needs and the growing aging population.

There are three primary goals of CalAIM:

1. Identify and manage member risk and need through whole-person care (WPC) approaches and addressing social determinants of health.
2. Move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility.
3. Improve quality outcomes, reduce health disparities, and drive delivery system transformation and innovation through value-based initiatives, modernization of systems and payment reform.

To better identify and manage member risk and need for beneficiaries who may be challenged with medical and behavioral conditions, access to care as well as chronic illnesses and disabilities, DHCS is proposing a whole system, person-centered approach that will result in a better quality of life for our members, as well as long-term cost savings and avoidance. Components of this system include:

- A statewide population health management strategy
- A statewide Enhanced Care Management (ECM) benefit
- Implementation of optional In Lieu of Services (ILOS)
- Implementation of incentive payments for plans and providers
- Participation in the Serious Mental Illness (SMI)/Serious Emotional Disturbance (SED) demonstration
- Required screening and enrollment for Medi-Cal prior to release from county jail
- Pilot full integration of physical health, behavioral health and oral health under one contracted entity in a county
- A long-term plan for foster care children and youth

CalOptima, in collaboration with the Orange County Health Care Agency and other community partners, is working diligently on a seamless transition for current HHP and WPC beneficiaries, who will be among the first to receive CalAIM benefits such as ECM and ILOS starting January 1, 2022.

For more information on the components of CalAIM, visit https://www.dhcs.ca.gov/provgovpart/Pages/CalAIM.aspx.
TRIPLE P ONLINE
Resilient children cope better

POSITIVE PARENTING IN UNCERTAIN TIMES:
UNDERSTAND YOUR CHILD’S BEHAVIOR TO HELP THEM REACH THEIR POTENTIAL

Support your child’s emotional wellbeing (and improve yours, too!)
We all face challenges sometimes—and recent events have added extra stress into family life. But positive parenting skills and strategies can make a huge difference to your child’s development and wellbeing. And that can have a far-reaching impact on their life, and yours.

Why Triple P works
The Triple P – Positive Parenting Program is one of the world’s best. Having already helped 4 million children and their families, Triple P gives you proven parenting strategies that will help you develop your child’s talents and life-skills—so they can be happy, confident and successful. In the meantime, your home life will be better too: with rules followed, relationships stronger, and parents who are much less stressed!

Now, there’s Triple P Online, so you can set your own parenting goals, learning step-by-step whenever you like. It’ll help you:
• Cope with difficulties and emotional stress
• Encourage good behavior
• Prevent tantrums & manage misbehavior
• Take the stress out of shopping
• Manage problems calmly and without yelling
• Get your child to cooperate and follow instructions
• Strengthen your relationship as you teach them new skills

START MAKING POSITIVE CHANGES TODAY!
Right now, this world-class program is available FREE in Orange County, and you can do it all online.

www.triplep-parenting.com

Triple P is funded by the Orange County Health Care Agency.
APL 21-004: Standards for Determining Threshold Languages, Nondiscrimination Requirements, and Language Assistance Services — RVD

On April 15, 2021, the Department of Health Care Services (DHCS) distributed 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 all Medi-Cal managed care plans (MCPs) of the dataset for threshold and concentration languages and clarifies 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. APL 21-004 also provides guidance on federal and state requirements regarding nondiscrimination, discrimination grievance procedures, language assistance, and communications with individuals with disabilities.


APL 21-005: California Children's Services Whole-Child Model Program

On April 19, 2021, the Department of Health Care Services (DHCS) distributed All-Plan Letter (APL) 21-005: California Children's Services Whole-Child Model Program to managed care plans (MCPs).

The purpose of this APL is to provide direction and guidance to Medi-Cal MCPs participating in the California Children’s Services (CCS) Whole-Child Model (WCM) program. This APL conforms with CCS Numbered Letter (NL) 03-0421, which provides direction and guidance to county CCS programs on requirements pertaining to the WCM program.


NL 03-0421: California Children's Services Whole Child Model Program (Revised)

On April 19, 2021, the Department of Health Care Services (DHCS) posted Numbered Letter (NL) 03-0421: California Children's Services Whole Child Model Program (Revised) to the DHCS website.

The purpose of this NL is to provide guidance to local county California Children’s Services (CCS) programs about requirements pertaining to the CCS Whole Child Model (WCM) program. This NL is written in conformance with APL 21-005, which provides guidance to participating MCPs on requirements pertaining to the implementation of the WCM. The CCS program publishes this NL under its authority to authorize services that are medically necessary to treat CCS-eligible conditions.

This NL supersedes NL 04-0618.

APL 21-006: Network Certification Requirements

On April 27, 2021, the Department of Health Care Services (DHCS) distributed a final version of All-Plan Letter (APL) 21-006: Network Certification Requirements and the following attachments:

- Attachment A: Network Adequacy Standards  
- Attachment B: Annual Network Certification Instruction Manual  
- Attachment C: Alternative Access Standard (AAS) Request Template  

The purpose of this APL is to provide guidance to Medi-Cal managed care plans (MCPs) on the Annual Network Certification (ANC) requirements pursuant to Title 42, Code of Federal Regulations (CFR), Sections 438.68, 438.206 and 438.207, and Welfare and Institutions Code (WIC), Section 14197.

The ANC provides a prospective look at the MCP’s network for the upcoming contract year (CY). MCPs are required to annually submit documentation to DHCS to demonstrate adequacy of their networks for the upcoming CY. DHCS reviews all MCP network submissions and provides assurance of MCP’s compliance with the ANC requirements to the Centers for Medicare & Medicaid Services (CMS) before the CY begins.

This APL supersedes APL 20-003.


CalOptima COVID-19 Community and Provider Toolkits Now Available

Need help with your communications about COVID-19 vaccines? CalOptima developed toolkits for our community partners and providers, and they are full of useful information and resources to encourage vaccination. The toolkits can assist you in building confidence and raising awareness about the benefits of COVID-19 vaccines, and help you respond to common questions and concerns. Check out the tools at the links:

For Providers:  https://www.caloptima.org/en/Features/COVID-19/ProviderToolkit.aspx

Tools include:
- Don't Wait, Vaccinate! Provider 11 x 17 Poster
- Don't Wait, Vaccinate! Provider 8.5 x 11 Flyer
- COVID-19 Vaccine FAQ
- Sample Provider Letter to CalOptima Members
- Vaccine Myth Buster Fact Sheet (Facts vs. Fiction)
- What to Expect When You Get the COVID-19 Vaccine Fact Sheet
- Telephone On-Hold Message
- Trusted Messenger and COVID-19 Explainer Videos (videos for your website or social media pages)
“I’m Not Worthy”
Overcoming Substance Use Disorder Self-Stigma to Increase Treatment Engagement

THURSDAY, MAY 27, 2021
12:00 PM – 1:00 PM PST

About this webinar:
Among the many barriers to effective substance use disorder (SUD) treatment, self-stigma is one of the most insidious and difficult to change. Harsa self-criticism and shame prevent many individuals with SUD from reaching out for treatment or sticking with treatment programs. In this highly interactive webinar, we’ll define and illustrate SUD self-stigma and suggest specific therapeutic means for addressing it to reduce barriers to care. Case illustrations from behavioral health and primary care settings will be used to illustrate the challenges and solutions.

Speakers:
Barry Jacobs, Psy D, Principal, Health Management Associates
Abba Drew, MPH, CHES, Associate, Health Management Associates

Overcoming SUD Self-Stigma Office Hours

THURSDAY, JUNE 3, 2021
12:00 PM – 1:00 PM PST

About office hours:
As part of the Systems of Care Webinar Series, we are offering office hours after each presentation. At the office hours session the presenters or other subject matter experts will be available to provide one hour of open “office hours” via a Zoom meeting. You can log in at any time during the hour and ask questions related to the webinar topic.

To Register Visit:
https://healthmanagement.zoom.us/webinar/register/WN_R8efdlJsrStf8ji8vXvKzNw

For more information, please contact:
JANYA TAGAT
Research Associate
tagat@healthmanagement.com

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# Health Education: Trainings and Meetings

## June Webinars

<table>
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<tr>
<th>Event</th>
<th>Details</th>
<th>URL</th>
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<td>Partnership Health Plan (PHC) Events: Virtual ABCs of Quality Improvement</td>
<td>Wednesday, June 2, 2021 1 p.m.</td>
<td><a href="http://partnershiphp.org/Providers/Quality/Documents/Performance%20Improvement%202021/ABCs%20Flyer_02_25_21_COMMS.pdf?Web=1">http://partnershiphp.org/Providers/Quality/Documents/Performance%20Improvement%202021/ABCs%20Flyer_02_25_21_COMMS.pdf?Web=1</a></td>
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## May Webinars

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<td>Accelerated Learning Education Program: Diabetes Management HbA1C Good Control Webinar</td>
<td>Tuesday, May 25, 2021 12 p.m.</td>
<td><a href="http://partnershiphp.org/About/Pages/PHC-Events.aspx">http://partnershiphp.org/About/Pages/PHC-Events.aspx</a></td>
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## Monthly Webinars

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<td>Asthma Management Academy (AsMA)</td>
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## Tuesday and Thursday

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</table>

## Ongoing / On Demand Webinars

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<td>Free Continuing Education (CME) from MMWR and Medscape</td>
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<td>LifeScan Institute LLC Webinars</td>
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<td><a href="https://www.lifescandiabetesinstitute.com/">https://www.lifescandiabetesinstitute.com/</a></td>
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The following list outlines changes made to CalOptima policies and procedures during April 2021. The full description of the policies below is finalized and available on CalOptima’s website at [www.caloptima.org](http://www.caloptima.org).

<table>
<thead>
<tr>
<th>Policy Number</th>
<th>Policy Title, Purpose, Revision, and Program</th>
<th>Policy Review and/or Revision Date</th>
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<tr>
<td>AA.1214</td>
<td>Guidelines for Endorsements by CalOptima, for Letters of Support and Use of CalOptima Name or Logo</td>
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<tr>
<td>GA.8048</td>
<td>Restrictions on Smoking and Unregulated Nicotine Products</td>
<td>04/01/21</td>
</tr>
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<td>GA.8053</td>
<td>Workplace Violence</td>
<td>04/01/21</td>
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<td>Medi-Cal Glossary of Terms</td>
<td>03/01/21</td>
</tr>
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<td>GG.1105</td>
<td>Coverage of Organ and Tissue Transplants</td>
<td>04/01/21</td>
</tr>
<tr>
<td>GG.1116</td>
<td>Pediatric Preventive Services</td>
<td>04/01/21</td>
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<tr>
<td>GG.1401</td>
<td>Pharmacy Authorization Process</td>
<td>04/01/21</td>
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<td>Member Grievance</td>
<td>04/01/21</td>
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<td>04/01/21</td>
</tr>
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<td>Vision Services</td>
<td>04/01/21</td>
</tr>
<tr>
<td>GG.1112</td>
<td>Standing Referral to Specialty Care Provider or Specialty Care Center</td>
<td>04/01/21</td>
</tr>
<tr>
<td>GG.1113</td>
<td>Specialty Practitioner Responsibilities</td>
<td>04/01/21</td>
</tr>
<tr>
<td>GG.1114</td>
<td>Authorization for Disposable Incontinence Supplies</td>
<td>04/01/21</td>
</tr>
<tr>
<td>GG.1118</td>
<td>Family Planning Services, Out-of-Network</td>
<td>04/01/21</td>
</tr>
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<td>GG.1502</td>
<td>Criteria and Authorization Process for Durable Medical Equipment (DME), Excluding Wheelchairs</td>
<td>04/01/21</td>
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<td>Summary Suspension or Restriction of Practitioner Participation in CalOptima’s Network</td>
<td>03/04/21</td>
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<td>04/01/21</td>
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<td><strong>OneCare Connect</strong></td>
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<td>OneCare Connect Glossary of Terms</td>
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</tr>
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<td>CMC.4007</td>
<td>Member Disclosures</td>
<td>04/01/21</td>
</tr>
<tr>
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<td>04/01/21</td>
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<td></td>
</tr>
<tr>
<td>PA.1001</td>
<td>Equipment Maintenance and Storage</td>
<td>04/01/21</td>
</tr>
<tr>
<td>PA.1003</td>
<td>PACE Center Space and Physical Requirements</td>
<td>04/01/21</td>
</tr>
<tr>
<td>PA.1004</td>
<td>Maintenance and Housekeeping Standards</td>
<td>04/01/21</td>
</tr>
<tr>
<td>PA.1005</td>
<td>Collection, Storage, and Removal of Waste</td>
<td>04/01/21</td>
</tr>
<tr>
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<td>Wander Risk and Missing Participants</td>
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Provider Code Updates

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

- CCS Service Code Groupings Update
- New COVID-19 HCPCS Codes for the Every Woman Counts Program
- 2021 HCPCS Q2 Update
- New Vaccines for Children (VFC) Benefit
- Update: Adverse Childhood Experiences (ACE) Screening Policy
- Hereditary Retinal Disorders is a Medi-Cal Benefit
- Updates to Billing Instructions for Contraceptive Vaginal Rings
- Frequency Limit Updated for HCPCS Codes G0480 thru G0483 and G0659
- Temporary Increased COVID-19 FSSA/NF-B Rates for Calendar Year 2021


For CalOptima’s prior authorization required list, please refer to the CalOptima website: www.caloptima.org.

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.

<table>
<thead>
<tr>
<th>Meeting</th>
<th>Date and Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CalOptima Board of Directors</td>
<td>June 3, 2 p.m.</td>
</tr>
<tr>
<td>CalOptima Provider Advisory Committee</td>
<td>June 10, 8 a.m.</td>
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<tr>
<td>CalOptima Member Advisory Committee</td>
<td>June 10, 2:30 p.m.</td>
</tr>
<tr>
<td>Whole-Child Model Family Advisory Committee</td>
<td>June 22, 9:30 a.m.</td>
</tr>
<tr>
<td>CalOptima OneCare Connect Member Advisory Committee</td>
<td>June 24, 3 p.m.</td>
</tr>
</tbody>
</table>

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

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