



progress notes

A Newsletter for Our Physician Partners

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L.A. Care
HEALTH PLAN®

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Help Your Medi-Cal Patients Access CBAS

Do you have patients who require a high level of care, but wish to remain living at home? They may be able to get assistance through several Long Term Services and Supports (LTSS) that can be accessed with assistance from L.A. Care, including the **Community Based Adult Services (CBAS)** program. CBAS provides outpatient facility-based services to eligible individuals anywhere from one to five days a week. The goal of the program is to keep individuals living safely at home instead of in a nursing home or other expensive care settings.

CBAS uses a partnership between the patient, their family, their caregiver, their primary care physician (PCP) and their health plan to get the patient the care they need. Participation in CBAS does not affect your patient's Medicare coverage or their ability to see you as an L.A. Care contracted provider.

Some of the services offered through CBAS include:

- skilled nursing care
- medication monitoring
- physical therapy
- occupational therapy
- speech therapy
- personal care
- social services
- group activities
- meals and nutrition services
- transportation to and from medical appointments



You can make a referral for CBAS by working directly with an L.A. Care contracted CBAS center or by faxing a CBAS Request for Services Form to L.A. Care at 213-438-5739. This form can be downloaded from our website at www.lacare.org/providers/communitybasedadultservices.

Referrals for CBAS can also be made by patients, family members, hospital discharge planners or social workers. If the referral comes from one of these sources, L.A. Care will need to obtain a written order for CBAS services from you BEFORE eligibility can be determined. An L.A. Care Case Manager will contact you regarding the needed documentation.

In addition to having a written order from their PCP, CBAS applicants must:

- Receive Medi-Cal and be enrolled in a Medi-Cal Managed Care Plan
- Be over 18 years of age

- Must meet one of the following:
 - Meet Nursing Facility A or B requirements
 - Have Organic/Acquired or Traumatic Brain Injury and/or Chronic Mental Health conditions
 - Have Alzheimer's disease or other dementia
 - Have Mild Cognitive Impairment
 - Have a Developmental Disability

L.A. Care will conduct a face-to-face assessment to determine program eligibility, authorize days of service, and provide assistance with finding a CBAS center that can provide the right services in a location close to the patient's home. If the patient is not eligible for CBAS services, L.A. Care will provide assistance seeking out alternative solutions for care through our Social Services and LTSS Departments.



Gertrude "Trudi" Carter, M.D.

Chief Medical Officer

Medi-Cal Eligibility Expansion Will Bring New Patients

Beginning January 1, hundreds of thousands of uninsured Angelenos will be eligible for Medi-Cal. As the nation's largest publicly operated health plan, with more than 15 years of experience serving this population, we are excited for the opportunity to serve even more members and for more members to have access to all of the services offered by the program.

All Healthy Way LA members will automatically be enrolled into Medi-Cal on January 1, 2014, with many likely to join L.A. Care. We are partnering with L.A. County to ensure a smooth transition by helping patients maintain easy access to the clinics where they currently receive services. Our goal is to maintain continuity of care so that members have access to their same doctors, and to make the transition as seamless as possible.

"Serving these new members and supporting the physicians who care for them is essential to our mission."

The Affordable Care Act (ACA) broadens the Medi-Cal program to include all low-income individuals who are legal permanent residents. For the first time, low-income adults who don't have dependent children living at home will be eligible for Medi-Cal. In addition, increased outreach and simplified enrollment procedures will help to reach individuals who are already eligible but haven't yet enrolled.

Serving these new members and supporting the physicians who care for them is essential to our mission. Safety net providers, who have traditionally cared for the most vulnerable individuals in our communities, are fundamental to the success of the expansion.

L.A. Care Health Plan is working with L.A. County to ensure that Medi-Cal reaches as many newly eligible individuals as possible. Healthy Way L.A., a county program for individuals who will be eligible for Medi-Cal next year, has already enrolled more than 250,000 newly eligible adults. This program is the biggest in the state and represents more than half of the newly eligible individuals in the county.

The Medi-Cal expansion is one pillar of health reform to ensure that everyone has access to affordable health insurance. Broader eligibility and simplified enrollment for Medi-Cal will mean more individuals can get and keep health insurance. We have the opportunity to provide needed services such as case management. It also allows L.A. Care to meet the triple aim of improved outcomes, excellent member satisfaction, and improved health system efficiency and effectiveness.



Accreditation of Medi-Cal, Healthy Kids and Healthy Families Program

PROGRESS notes is a publication of L.A. Care Health Plan for our Medi-Cal and Medicare Advantage (HMO SNP) provider networks.

If you have any questions or comments about topics in this issue, please write to us at editor@lacare.org or call us at 1-866-LA-CARE6 (1-866-522-2736).

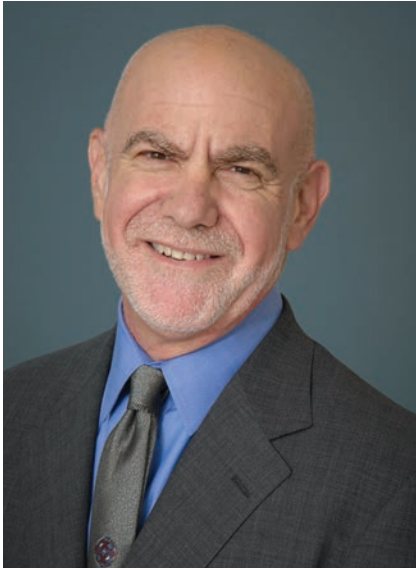


L.A. Care Compliance Helpline

24 hours a day,
7 days a week
1-800-400-4889

L.A. Care Health Plan
1055 West 7th Street, 10th Floor
Los Angeles, CA 90017
www.lacare.org

L.A. Care
HEALTH PLAN®
For a Healthy Life



Howard A. Kahn, Chief Executive Officer **ACA Brings Better Access to Affordable Health Insurance**

“I am proud that L.A. Care Health Plan stands solidly in the middle of an historic transformation and will be instrumental in its success. After years of preparation, we are ready for action!”

Having watched the political wrangling that has revolved around health care for decades, I truly believe that the Affordable Care Act (ACA), while far from perfect, is the right thing at the right time and the right place for improving our health care system. I am proud that L.A. Care Health Plan stands solidly in the middle of an historic transformation and will be instrumental in its success. After years of preparation, we are ready for action!

With the formal launch of the ACA (also referred to as Obamacare) on October 1, the past two months have been real cause for celebration because it will bring better access to affordable health insurance for more people.

With all of the community events, advertising launches and media stories, it may be easy to forget that we are still at the starting gate, not at the finish line. We still have a long way to go to get the approximately 1.7 million uninsured residents of Los Angeles County synced up with a medical home. The ACA is massive, complicated and confusing, and people may not know which program — Medi-Cal or Covered California — is right for them. In Los Angeles County, more than 750,000 individuals who are uninsured or do not have access to affordable coverage are eligible for Covered California, and nearly 400,000 individuals are newly eligible for the Medi-Cal expansion.

To provide more clarity, Covered California, health plans, foundations and community benefit organizations have saturated the county with education and outreach information about the new coverage options available. However, doctors and their staffs remain one of the most trusted sources for information about health care — and rightly so. Recognizing the need to educate physicians, clinic staff, community based organizations, and others on the ground, L.A. Care recently partnered with Insure the Uninsured Project, California Community Foundation and Community Clinic Association of Los Angeles County to host several ACA trainings across the county. These sessions provided neutral, fact-based information on Covered California, the Medi-Cal Expansion and the options available to the remaining uninsured after the ACA is fully implemented. We also conducted two webinars on Covered California and the Medi-Cal Expansion, which are available to watch on our website at lacare.org/hcrtoolkit.

Despite the multipronged outreach efforts and the ACA’s goal to increase the number of insured Americans, more than one million Los Angeles County residents will remain uninsured. These individuals will still rely on the L.A. County safety net of clinics and hospitals. Consequently, L.A. Care remains steadfast in our mission to support the physicians, community clinics and county public health system that serve as a critical part of our health care safety net.

Patient Centered Medical Home (PCMH) Initiative May Help Increase Provider & Patient Satisfaction

L.A. Care Health Plan launched the Patient Centered Medical Home (PCMH) in October, 2010. The Patient Centered Medical Home Initiative is aligned with L.A. Care's mission to provide access to quality health care for Los Angeles County's vulnerable and low income communities and to support the safety net required to achieve this purpose. This project upholds L.A. Care's organizational objectives of enhanced provider systems and performance while increasing provider and patient satisfaction. While the research on patient centered medical homes is not yet conclusive, evidence suggests that care provided through a high performing medical home may result in improved quality and reduced costs. This project is one of the initiatives L.A. Care is engaging in to prepare, develop and sustain a provider network to serve additional seniors and people with disabilities as part of the State of California's 1115 Waiver process, and to prepare for Medicaid expansion through health care reform.

A high performing patient centered medical home (PCMH) gives a patient access to a primary care provider who provides coordinated, continuous and comprehensive primary care. A PCMH has the following features:

- An ongoing relationship with a personal physician who directs a patient care team
- Enhanced access to care
- Utilization of health information technology to improve patient outcomes

The PCMH model has the potential to improve clinical quality and patient experience, and reduce health system



costs. The Commonwealth Fund's 2007 report, *Closing the Divide: How Medical Homes Promote Equity in Health Care*, stated that most health care disparities disappear when patients are part of an accessible robust medical home.

The PCMH model has the potential to improve clinical quality and patient experience, and reduce health system costs.

The standards for the PCMH model were developed in 2007 and endorsed by four primary care specialty societies - the American Academy of Family Physicians, the American Academy of Pediatrics, the American College of Physicians, and the American Osteopathic Association. The standards continue to evolve.

L.A. Care's initiative utilizes the National Council for Quality Assurance model that recognizes

practices that have met the 6 major elements of qualifying as a Patient Centered Medical Home. This process of redesigning a practice to transition to a Medical Home to meet NCQA PCMH standards takes about 18 months at a minimum. L.A. Care hired a nationally recognized PCMH consultant to provide workshops and help the practices become an NCQA PCMH Recognized practice. The practices received on-site training and remote support to improve workflow, patient access, communication, and coordination of services.

We are proud to announce that since L.A. Care launched the first cohort in Fall, 2010 with 10 practices, 2 have received NCQA Recognition. Another 4 practices have submitted applications and are awaiting a response from NCQA. The second cohort, launched in May, 2012 has 7 practices of which 3 submitted applications and are also awaiting a response from NCQA. The practices in cohorts 1 and 2 serve approximately 100,000 L.A. Care members.

Care and Compliance Among Diverse Populations

L.A. Care's Cultural and Linguistic Unit can assist with improving treatment compliance among culturally and linguistically diverse patient populations through provider education program. L.A. Care offers a full array of education sessions free to network providers and are available in person or online for your convenience. The workshops include:

COMMUNICATING THROUGH HEALTHCARE INTERPRETERS (2 hours, online)

This CME course is for physicians. Learn how to reduce doctor-patient language barriers and work effectively with in-person and telephonic interpreters. The first 25 physicians to register and complete the course will receive a \$100 stipend.

DISABILITY AWARENESS (1.5 hours, in-person)

This course is for providers, front and back office staff. Revisit appropriate disability regulations, understand the contemporary meaning of "disability," learn appropriate terminology, and gain a better understanding of people with disabilities through this interactive experiential exercise.

INTRODUCTION TO CULTURAL COMPETENCY (1.5 hours, in-person)

This course is for providers, front and back office staff. Learn how to provide care more effectively to culturally diverse patients. This course explores cultural biases, communication style, and perception, and examines the elements and steps to cultural competency.

Please contact CLStrainings@lacare.org for more information.

Health Education Supports You & Your Patients

Did you know that health education offers many benefits to both physicians and patients? The overall goal of health education is to promote health and prevent disease through improved knowledge, attitude, skill, and behavior change. This doesn't just sound good on paper; it has real-world patient benefits including increased understanding of health, increased ability to manage health conditions and better health outcomes.

Patients aren't the only ones who benefit from health education. Physicians enjoy improved physician-patient relationships, better informed patients, improved patient compliance, and improved efficiency through cost-effective care.

It's easy to take advantage of the many health education resources available at L.A. Care. Easy-to-read patient handouts in multiple languages are just a few clicks away on L.A. Care's website. Wellness workshops and group appointments are continuously offered in local, easily accessible locations, including physician offices. Individual consults are available telephonically. To refer a patient, complete the Health Education, Cultural and Linguistic Services referral form on L.A. Care's website and fax to 213-438-5042. If you'd like to host a health education event call Christine Mayola, Health Educator at 213-694-1250 x4148

Would You Like a Little Holiday Help From L.A. Care?



The holiday season may present scheduling difficulties for your practice. With the holidays come scheduling conflicts between physician, staff, and patient vacations, as well as inclement weather which may arrive and create traffic or interference that may interrupt your schedule. All of these factors increase strain on a physician's ability to meet the demands of their patients.

The nurse advice line is a free service for members* available 24 hours a day, 7 days a week, even on holidays. The nurse attempts to give the same advice a patient would receive from a physician by following patented algorithm-based, physician-developed clinical assessment tools. In addition to using these algorithms, the nurses are highly trained and have on average 25 years of experience. The Nurse Advice Line can help relieve your workload by providing self-care tips to your patients, potentially negating the need for them to see you in person. Because the nurse advice line is staffed 24 hours a day, the service may also reduce the need to manage runny noses in the middle of the night.

We encourage you to remind your patient's of the Nurse Advice Line. L.A. Care and its sub-contracted plans all operate a Nurse Advice Lines. Members can find the number to call on the back of their Member ID Cards. For reference, the numbers are as follows:

L.A. Care
1-800-249-3619

Care1st
1-800-609-4166

Kaiser
1-888-576-6225

Anthem Blue Cross
1-800-224-0336

Help Your Bi-Lingual Staff to Ensure Accurate Communication

Have you ever questioned if your bilingual staff members are expressing themselves accurately? Being bilingual has its challenges both for patients and providers. Misrepresented language terms, and the smallest of errors, can make a tremendous difference when it comes to accuracy of medical instructions and information; and ultimately, it may affect a patient's health. Let's look at some scenarios:

- A bilingual nurse at an urgent care center stated that the doctor's office "was closed *UNTIL* 4:00pm" rather than saying it "was closed *AT* 4:00pm". The misuse of terms nearly obstructed the patient's access to care as the patient almost went back home that morning. Fortunately, someone intervened with the correct information and clarified that the patient could go there immediately for urgent care.
- A patient was instructed by a bilingual medical practitioner to take medication with doses of "at least four" per day, instead of the accurate order of "less than four" doses per day. The error seriously affected the patient's care.
- A bilingual medical assistant, while transcribing a patient's medical record into an Electronic Health Record System (EHR), transposed the patient's diagnosis as "Hypothyroid" rather than "Hyperthyroid"; and thus, affected the patient's future treatment and prescriptions.

Small misinterpretations could yield fatal results. And it's equally important for both the patient and provider to have accurate understanding of medical information. Sensitivity to cultural diversity is a value of L.A. Care and we



want to help raise awareness about the seriousness of this matter with regard to bilingual staff and prevent such mistakes which may cost the patient's health. If any of your bilingual staff or patients are uncertain of accurate use or interpretations of any words, medical terms, or otherwise, please ask and encourage them to get help. When in doubt, please ask for clarification.

L.A. Care, along with the Industry Collaborative Effort (I.C.E.) Team, has developed an Employee Language Skills Self-Assessment that can be used to document bilingual skills of providers and staff. This form can be downloaded at L.A. Care's website at lacare.org/providers/resources/downloadableforms. You may distribute the tool to all your clinical and non-clinical employees using their non-English language skills in the workplace. The information collected may be used as a first step to improve communication with your diverse patient base.

L.A. Care also offers face to face and telephonic interpreting services for medical appointments. The use of professional interpreters improves patient care and complies with language access regulations. Interpreting services are available at patient key points of contact including primary care physician sites, pharmacy sites, and ancillary sites. Face to face and telephonic interpreting services are provided in multiple languages at no cost to you. Member's may request a face to face interpreter for medical visits by calling L.A. Care's Member Services Department at (800) 839-9909. Telephonic interpreting services are readily accessible 7 days a week, 24-hours a day at the following telephone numbers:

Network Practitioners
(888) 930-3031

Network Pharmacies
(888) 942-7670

Clear and most importantly *accurate* communication is a critical element of a patient's diagnosis and treatment.

Health & Literacy – Help Your Patients Learn to Be Well

There currently exists a “mismatch” between the high literacy levels required to successfully obtain quality health care and the significantly lower literacy levels of many patients. The negative consequences of this mismatch range from problematic to catastrophic. Here are some of the biggest challenges faced by low-literate individuals when accessing health care and how you and your staff can help overcome them.

THE CHALLENGE:	TIPS TO OVERCOME THE CHALLENGE:
<p>Challenge #1: Painful Paperwork Many low literate adults state the single most difficult aspect of participating in the health care process is completing paperwork. Some delay or fail to seek care because of this.</p>	<ul style="list-style-type: none">• Enlist a health advocate or other staff member to help complete paperwork.• Read written material aloud.• (See also Additional Resources listed below.)
<p>Challenge #2: Talking in Code The second most difficult aspect of participating in the health care process is to understand the language and medical terminology used by doctors and other medical staff. Further, language access issues impact the delivery of health care for non-native English speakers.</p>	<ul style="list-style-type: none">• Use simple language and speak slowly.• Keep your message to only two or three concepts.• Use L.A. Care’s free professional interpreting services when needed. To request a face-to-face interpreter, call L.A. Care’s Member Services Department at (800) 839-9909, available 24/7 and holidays.• Take L.A. Care’s free online CME course “Communicating Through Healthcare Interpreters.” Please contact CLStrainings@lacare.org for more information about the program and enrollment.
<p>Challenge #3: Language Access and Health Literacy While health care professionals are very aware of language access issues, there is less awareness of health literacy issues. In fact, 67% of low-literate adults state they do not believe their physician is aware of their difficulty reading. Further, only 69% of administrators state they provide plain language materials to patients.</p>	<ul style="list-style-type: none">• Use the teach-back method of communication – instead of asking patients if they understand, have them repeat back what you said.• Download or order easy-to-read health education materials from L.A. Care at lacare.org/providers/resources/healtheducation.• Use visual aids. (See Additional Resources listed below.)

Additional Resources

If you are interested in learning more about low literacy, consider these resources:

Health Literacy and Patient Safety: Helping Patients Understand - this 23 minute video shows real patients with real physicians and highlights strategies to help ensure effective communication. [youtube.com/watch?v=cGtTZ_vxjyA](https://www.youtube.com/watch?v=cGtTZ_vxjyA)

Health Literacy and Patient Safety: Helping Patients Understand Clinician Manual - provides practical tips for clinicians to use in making their office practices more “user friendly” to patients with limited literacy. Part of the American Medical Association’s Health Literacy Kit at ama-assn.org/ama.

Effective Communication Tools for Healthcare Professionals – a series of free, online, go-at-your-own-pace courses designed to acknowledge cultural diversity, address low health literacy, and accommodate low English proficiency. CMEs available. hrsa.gov/publichealth/healthliteracy/

The Health Literacy Resource Center - a central resource for health literacy information and training. It is a one-stop-shop for Web-based health literacy resources. cahealthliteracy.org/resource_center.html

Mental Health Conference – Join Us December 16, 2013!



Join us at The California Endowment, Dec. 16, 2013, 8am-Noon, for a free continuing medical education behavioral health workshop targeted to primary care physicians who work in both community clinics and private practice. Topics will include how to assess your adult patient's mental health status, manage low level mental health issues, make referrals for mental health issues that need a specialist, distinguish between consultation vs. referral and prescribe appropriate medications to manage patients with a range of behavioral health issues.

Through panel discussions, case studies and lectures, the program will focus on coordination and integration of care, the interdisciplinary care team's role in managing the complex adult population, and L.A. Care's resources and vendors. L.A. Care, L.A. County of Department of Mental Health and Health Net are providing speakers and sponsoring the activity. Flyers will be sent to providers in early October. Mark your calendars and join us! Free parking will be available at the event.

Location: California Endowment,
1000 N. Alameda Street, L.A. 90012

NEW Staying Healthy Assessment Tool

A new health education behavioral assessment tool was recently released by DHCS via Policy Letter 13-001 "Requirements for the Staying Healthy Assessment." The new Staying Healthy Assessment (SHA) must be implemented by **December 31, 2013**.

Designed to assist providers in identifying and prioritizing members' health education and cultural and linguistic needs, the Department of Health Care Services (DHCS) requires the SHA be administered to all Medi-Cal patients within 120-days of enrollment as part of their Initial Health Assessment and then subsequently during well care visits as members enter a new age category.

The SHA is now available in nine age categories and 12 languages. Appropriate administration of the SHA is included on the DHCS medical record review tool and provider compliance is audited at the health plan level.

The SHA is available for download from the DHCS website at dhcs.ca.gov/formsandpubs/forms/Pages/StayingHealthy.aspx and the L.A. Care website at lacare.org/providers/resources/stayinghealthyforms. Hard copies may be ordered through L.A. Care's online health education materials order form at lacare.org/providers/resources/healtheducation/order-form.

Medi-Cal Managed Care Health Plans are collaborating to offer on-going SHA webinar trainings. L.A. Care strongly encourages your attendance in order to learn the details of the new SHA as the documentation has changed.

New Preventive Health Guidelines

L.A. Care Health Plan shares a common goal with our providers. We want to keep members healthy and ensure they have all necessary screenings and immunizations. Members are mailed Preventive Health Guidelines (PHGs) booklets annually to serve as a reminder of what immunizations or tests they may need and the frequency for which they need them. These guidelines are in compliance with the United States Preventive Health Task Force and are updated annually. **There are several new additions which should be particularly noted for the 2013 PHGs.**

- It is now recommended that adults born between 1945-1965 receive a one-time Hepatitis C test, along with others at risk as recommended by a physician.
- HIV screening should be performed at least once for those ages 15-65, and screening for those of all age groups at risk.
- All pregnant women should be screened for HIV, including those who present in labor with unknown HIV status.

All members were mailed PHGs in September and new members receive the PHGs each month. If you want more information or copies mailed to you, please call us at: (213) 694-1250 ext 4027. Also you may locate the PDF of PHGs at: lacare.org/providers/resources/clinicalguidelines

When Your Patient Needs a Nebulizer

If you believe your L.A. Care patient needs a nebulizer, you may request approval from L.A. Care for a nebulizer and for any of the benefits and services covered under Medi-Cal or Medicare that are medically necessary.

Complete a Pre-Authorization Request Form and fax the completed form with the relevant medical records to support medical necessity to L.A. Care's Utilization Management (UM) Department at FAX# 1-213-438-5777, as per the usual authorization process for covered services. *The UM clinical review process routinely takes approximately five business days, and upon completion L.A. Care will notify the provider of UM's decision with a letter.* If for any reason an urgent authorization is required, L.A. Care can expedite the process within 72 hours on a case by case basis. The form is available for download online at: lacare.org/providers/resources/downloadableforms

If the treating physician would like to discuss the patient's case with the physician or nurse reviewer or to obtain a copy of the criteria used to make the decision for approval, you may call L.A. Care's UM Department at 1-877-431-2273.

As a rule of thumb, nebulizers take 2-3 minutes to mist every one millimeter of the prescribed medication. Ask your patients how long it takes them to complete their treatments



to ensure they are completed in timely manner. Most nebulizer machines need to be turned off after 30 minutes of use. Also, most nebulizers are effective for 100 treatments or six to twelve months. Periodically check with your patients on how their nebulizer equipment is functioning to ensure that the patients' respiratory conditions are managed well. If your patient's nebulizer is deteriorated, damaged, broken or lost, and a replacement is needed, please contact the distributor or L.A. Care directly for assistance.

If your patient's nebulizer does not successfully treat the symptoms, please call L.A. Care's About Asthma at 1-888-200-3094 to have one of the nurse specialists conduct an evaluation to assist with finding the right product for your patient.

More Than 2,200 HITEC-LA Eligible Primary Care Providers Achieve Meaningful Use with Certified Electronic Health Records

A project of L.A. Care, HITEC-LA helps small practices and clinics switch from paper files to electronic records that help improve patient care

HITEC-LA announced that more than 2,200 of its members who are eligible primary care providers have reached meaningful use with certified electronic health record (EHR) systems. HITEC-LA's goal is to help 3,000 eligible primary care providers in L.A. County reach meaningful use by 2014. Providers that meaningfully use certified EHRs can expand the capabilities of their practices, leading to greater strides towards improving clinical quality, lowering costs, and enhancing patient experience.

"We are excited to help lay the groundwork for improving care for

millions of individuals and families in the L.A. County communities that these health care providers serve," says Dr. Trudi Carter, Chief Medical Officer for L.A. Care. "This supports providers in their efforts to have the best outcomes for their patients."

HITEC-LA belongs to the network of 62 Regional Extension Centers across the country formed under the Health Information Technology for Economic and Clinical Health (HITECH) Act, which is part of the American Recovery and Reinvestment Act of 2009. In addition to developing the Regional Extension Centers, the HITECH

Act also created the Medicare and Medicaid EHR Incentive Programs, which provide incentive payments to eligible professionals as they adopt, implement, upgrade or demonstrate meaningful use of certified EHR technology. Eligible health care providers can receive up to \$63,750 under the Medicaid EHR Incentive Program or up to \$44,000 under the Medicare EHR Incentive Program.

For more information you may call 1-888-524-4832, or visit hitecla.org.



Introducing L.A. Care's New Sr. Director, Provider Network Operations & Strategy: Paul Van Duine



Paul Van Duine comes to L.A. Care with over 25 years of experience in managed health care and an MBA in Business Administration from USC-Marshall School of Business. As Sr. Director of Provider Network Operations & Strategy, Paul is responsible for the direct oversight of L.A. Care's Provider Network Operations department, which includes provider contracting, provider database management and provider relations. Paul will oversee provider research, policy creation, contract development and expansion of L.A. Care's provider networks for all lines of business.

Paul shares, "I am happy to be a part of furthering the mission of L.A. Care and contributing to the dynamic growth of the company in this ever-changing and exciting time in healthcare."

Paul is a member of the Healthcare Financial Management Association, and in his spare time, enjoys playing guitar with his band. Paul hails from New Jersey and has made Southern California his home for the last 35 years. L.A. Care is pleased to have him with us!

ACA Increased Medicaid Payment for Primary Care Physicians

Section 1902(a)(13)(C) of the Social Security Act (SSA), as amended by the Affordable Care Act (ACA), provides an increase to Medicare rates for 2013 and 2014 for specified primary care services provided by eligible physicians. To be eligible for the enhanced payment, physicians must attest to practicing in the area of general internal medicine, family medicine, pediatric medicine, or a sub specialty under one of those specialty designations. In addition, physicians must attest to either Board certification in a covered specialty or sub specialty or that 60% of the services billed during the most recent completed calendar year fall within the range of services specified as primary care for purposes of this increase. Those services are as follows:

- E&M (99201 - 99499)
- Vaccine Administration (90460, 90461, 90471 - 90474, or their successors)

The Department of Health Care Services (DHCS) has developed an online registration process for physicians to attest to their eligibility. The attached All Plan Letter provides specific details regarding which providers and clinics must complete the online attestation in order to be eligible to receive the payment increase. When attesting, providers should indicate with which plans they contract. DHCS will only be able to reconcile for eligible services provided by physicians who have met the attestation requirements.

As a Participating Physician Group within L.A. Care's contracted provider network, we encourage you to work with your network to ensure that all providers, who meet eligibility requirements, complete the attestation process. The link to the DHCS website is:

medi-cal.ca.gov/acaattest/certform1.aspx

Should you have questions regarding any of the above, please do not hesitate to contact your Provider Relations Account Specialist for assistance.



Get Updated on Pharmacy & Formularies at lacare.org!

L.A. Care has a very active Pharmacy Therapeutics and Technology Committee (PT&T) which updates our formularies on a regular basis. L.A. Care wants our providers to have access to all the necessary information regarding our pharmacy programs and approved formulary drugs. Stay up to date with the pharmacy and formulary issues on all of L.A. Care's lines of business by accessing our website, lacare.org/providers/pharmacy.

Protecting Patient Privacy in Open Areas

When you are talking to or about a patient, do you give much thought to who might be listening? While HIPAA does not require that all risk of possible disclosures be eliminated, doctor's offices, clinics, health plans, and other entities covered by HIPAA must have reasonable safeguards in place to avoid prohibited disclosures and to limit incidental disclosures (disclosures that are an unavoidable byproduct of an otherwise permitted disclosure).

But, aren't incidental disclosures (such as when a patient overhears a conversation about another patient) okay? Yes, the HIPAA Privacy Rule does permit certain incidental disclosures, however only to the extent that reasonable and appropriate safeguards are in place and the minimum necessary rule is applied. For example, if a patient overhears front office staff gossiping about another patient's test results, the incidental disclosure may not be permitted. Why? Because gossiping is not a legitimate use or disclosure of patient information in the first place and the provider failed to have safeguards preventing it.

The Office for Civil Rights (OCR) publishes helpful Q&As, some of which address issues of incidental disclosures and what the OCR expects entities to do to protect patient privacy. In a Q&A entitled "Does the HIPAA Privacy Rule require hospitals and doctors' offices to be retrofitted, to provide private rooms, and soundproof walls to avoid any possibility that a conversation is overheard?" the OCR provides the following advice:

- Review your own practices and determine what steps are reasonable to safeguard patient information.

- Assess the potential risks to patient privacy and impacts on patient care, as well as any administrative or financial burden from implementing any particular safeguard.
- Consider steps that other prudent health care professionals take to protect patient privacy.
- Examples that may be considered as reasonable safeguards provided by the OCR include:
 - Asking waiting patients to stand a few feet back from a counter used for discussing patient information
 - Using cubicles, dividers, shields, curtains, or similar barriers in an area where multiple patient-staff communications routinely occur
 - Ensuring patient files are supervised or locked



Please be mindful of privacy rules and guidance. When speaking with a patient about information and/or instructions that are personal and should be private, keep in mind who might be listening and take care to have reasonable safeguards in place to avoid prohibited disclosures. For more information, check out the Frequently Asked Questions section on the Office for Civil Rights' Privacy website, [hhs.gov/ocr/privacy](https://www.hhs.gov/ocr/privacy).

Program for Women, Infants and Children (WIC) Supports Breastfeeding

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC), funded by the USDA, provides nutritious food and nutrition and breastfeeding education to low-income pregnant and postpartum women, and children up to age 5. In Los Angeles County WIC serves over 500,000 participants every month. A premier public health nutrition program, WIC promotes and supports exclusive breastfeeding

up to 6 months of age for all infants. Breastfeeding has long been recognized as a proven disease-prevention strategy and recently has been found to play a key role in preventing childhood obesity. Please remember to refer eligible members to WIC.

As per Medi-Cal Managed Care Division (MMCD) Policy Letter 98-10, formula samples, coupons, and materials from infant formula



companies should not be routinely distributed to pregnant and postpartum Medi-Cal members as this may inadvertently be perceived by the member as an endorsement of these products by their health care provider, hospital or health plan.



PROGRESS notes

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news alert

ACA Increased Medicaid Payment for PCPs

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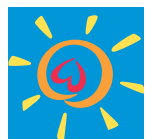
PROGRESS notes

A NEWSLETTER FOR OUR PHYSICIAN PARTNERS



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