Progress Notes WINTER 2019 - VOLUME 14 - ISSUE 1

L.A. Care Signs Groundbreaking Deal With UCLA Health to Serve Medi-Cal Patients



A new three-year contract will allow L.A. Care's 2.2 million members to receive advanced and highly specialized care at the Ronald Reagan UCLA Medical Center in Los Angeles. This marks the first Medi-Cal contract between L.A. Care and UCLA.

"We take great pride in providing outstanding, patient-centered care to patients and families," said Johnese Spisso, President of UCLA Health & CEO of the UCLA Hospital System. "UCLA Health is pleased to partner with L.A. Care to provide access to care for patients who need our advanced services."

In the new contract, 3,500 L.A. Care members will also be eligible to receive primary care from the UCLA Medical Group.

This is the second time this year that L.A. Care and UCLA have partnered to serve the Medi-Cal population in Los Angeles County. In July, L.A. Care announced four full medical school scholarships to students at the David Geffen School of Medicine at UCLA, as part of Elevating the Safety Net, an initiative to recruit highly-qualified primary care physicians to the L.A. County safety net. Each of the four students has expressed a desire to work with the county's underserved communities.

Inside:



news in BRIEF

Care1st Health Plan Changed Its Name



Promise Health Plan

On January 1, 2019, Care1st Health Plan (Care1st) changed its name to Blue Shield of California Promise Health Plan. In 2015, Blue Shield of California bought Care1st to help provide Californians access to high quality, affordable care. Under its new name, Blue Shield of California Promise Health Plan will continue to serve Medi-Cal and Medicare members in Los Angeles and San Diego counties.

Medical Providers! Receive Free CE Credit and Help Transform Oral Health for L.A. County Children

Over half of California's kindergarteners have experienced tooth decay. To improve oral health for children on Medi-Cal, More LA Smiles (a UCLA Dental Transformation Initiative funded by the California Department of Health Care Services) offers Medical Providers (and Dental Providers) serving children ages 0-20 in L.A. County:

6-Month Primary Care Practice Quality Improvement - free CE and MOC credit and 6 months of support from a Quality Improvement Specialist while learning to integrate preventive oral health services into practice settings for children ages 0-6.

No-Cost Clinical Trainings for Medical Providers and Clinical Staff - free CE credit through basic and advanced courses covering topics such as risk-based caries prevention and disease management protocols with the goal of delivering preventive oral health services and referrals to a dental home for children ages 0-20.

For questions or to enroll, please email moreLAsmiles@ucla.edu or visit moreLAsmiles.org/enroll.



New California Laws on Prescribing Opioids

The State of California is taking action against the opioid epidemic. New laws have been created with specific requirements for physicians prescribing opioids.

California law now requires prescribers to check the Controlled Substance Utilization Review and Evaluation System (CURES) and offer naloxone when prescribing opioids. Full compliance to California law is mandatory for prescribers. Failure to comply may lead to a fine, citation, disciplinary action, sanctions, public reprimand, suspension, probation, or revocation.

Assembly Bill No. 2760

- 1. When prescribing opioids, the prescriber shall offer a prescription of naloxone to a patient if:
 - a. The prescription daily dose is > to 90 morphine milligram equivalents
 - b. An opioid is prescribed with a benzodiazepine
 - c. The patient has an increased risk for overdose
- 2. When prescribing opioids, the prescriber shall provide education on overdose prevention and the use of naloxone to the following individuals:
 - a. Patient
 - b. One or more persons designated by the patient

Assembly Bill 2760: https://leginfo.legislature.ca.gov

CURES Mandatory Consultation

A physician must check CURES and run a Patient Activity Report (PAR) the first time a Schedule II-IV controlled substance is prescribed, ordered or administered.

- 1. The **PAR must be run within 24 hours** or the previous business day.
- 2. A physician must **check CURES** at least every 4 months if use of the controlled substance continues.

Medical Board Website:

http://www.mbc.ca.gov/Licensees/Prescribing/CURES/



Medicare Regulation to Improve Opioid Safety

As of January 1, 2019, at the pharmacy, point of sale safety restrictions will be implemented to limit initial opioid prescription fills for the treatment of acute pain to no more than a 7-day supply. Additional safety restrictions will be implemented to detect the concurrent use of opioids and benzodiazepines, and long-acting opioid duplicate therapy.

CMS Website:

https://www.cms.gov (search: 2019 Medicare Advantage and Part D Rate Announcement and Call Letter)

To find out more about L.A. Care's list of covered drugs called the Formulary, and monthly updates, visit the L.A. Care website at **lacare.org**. You will also find information about limits or quotas, generic and brand medications, restrictions on medication coverage, the medication request process, drug preferences and procedures on how to use the Formulary.



Value-based Care for Children With Pharyngitis

Sore throats are common and occur frequently when kids return to school in the fall. Although most sore throats are simple viral infections, streptococcal pharyngitis is important to correctly identify and treat.

In the past, these infections may have been treated with an antibiotic prescription without testing. However, with widespread antibiotic resistance, the Infectious Diseases Society of America (IDSA) now recommends testing* for children presenting with sore throat before treating; and treating only those with a positive test.

This may require more education of parents at the bedside, but care will be more optimally delivered. It may offer the opportunity to counsel parents on the key strep symptoms of sudden onset of throat pain, difficulty swallowing and fever.

The National Committee for Quality Assurance (NCQA) sets the standards to improve the quality of health care. NCQA defines testing children for strep infection prior to initiating treatment as a national quality measure. It is known as appropriate testing for children with pharyngitis (CWP).



Therefore, documenting this care whether using an in-office rapid test or strep culture is important. Helping to identify a positive strep diagnosis will allow more confidence when treating children with pharyngitis. This will be a win for all as you deliver excellent value-based care to our patients!

- *Visit https://www.idsociety.org/ and search for "Clinical Practice Guideline for the Diagnosis and Management of Group A Streptococcal Pharyngitis: 2012 Update by the Infectious Diseases Society of America" for more information.
- ** Group A Strep Tests CPT Codes- 87070, 87071, 87081, 87430, 87650-87652, 87880
- ** Group A Strep Tests LOINC Codes 11268-0, 17656-0, 17898-8, 18481-2, 31971-5, 49610-9, 5036-9, 60489-2,626-2, 6557-3, 6558-1, 6559-9, 68954-7, 78012-2



References

National Committee for Quality Assurance. https://www.ncqa.org

Centers for Disease Control and Prevention. Group A Streptococcal (GAS) Disease. (2016, September 16). Retrieved from https://www.cdc.gov/groupastrep/diseases-hcp/strep-throat.html

Centers for Disease Control and Prevention. The AMR Challenge. (2018, September 25). Retrieved from https://www.cdc.gov/drugresistance/intl-activities/amr-challenge.html

Shuiman ST et al. Infectious Diseases Society of America. Clinical Practice Guideline for the Diagnosis and Management of Group A Streptococcal Pharyngitis (2014, May 15). Retrieved from https://academic.oup.com/cid/article/55/10/e86/321183#recommendations



Vaccinate Your Patients Against the Flu

As flu season approaches, L.A. Care strongly encourages providers to schedule flu shot appointments for all patients six months of age and older.

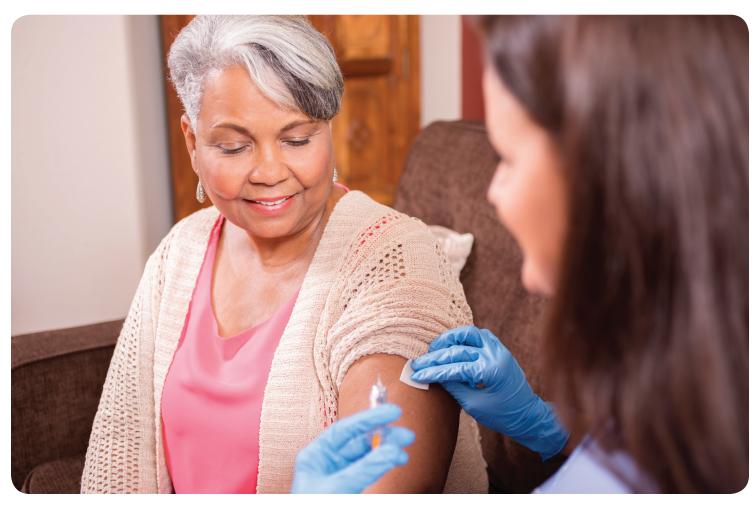
Here are tips for your practice:

- Use the phone, text, mail, and/or email to remind your patients to get the flu shot.
- Emphasize the vaccine is needed every year, is provided at no cost to L.A. Care members, and is one of the best ways to protect children, seniors, and high-risk individuals.

L.A. Care promotes the importance of annual flu vaccination to members through reminder phone calls and postcards. As such, providers should anticipate an influx of members needing the flu vaccine. This time is also an opportunity to provide the pneumococcal vaccine to patients 65 years and older.

- Schedule vaccinations as soon as the vaccine is available and continue offering as late as January and beyond for as long as the vaccine is available.
- Utilize scheduled visits as an opportunity to vaccinate.
- Remember that providers are the most trusted source of vaccine information and advice.

For more information about this year's flu vaccination, please visit the Los Angeles County Department of Public Health at http://publichealth.lacounty.gov/ip/influenza_providers.htm



Order Your Health Education Materials Today!



Need materials to support your HEDIS activities and improve your rates? You can find educational materials for physicians and patients using the "Health Education, Cultural and Linguistics Service" online ordering system for topics such as cervical cancer screenings, diabetes, and low back pain. We also have posters for the office and algorithm pocket cards for easy access!

Your requested materials will be delivered right to your doorstep at no cost to you! Visit lacare.org and search for Health Education Tools. Once on the Health Education Tools section, click "Order free health education and cultural and linguistic services material" to begin ordering your material!

Please email healtheducationmaterials@lacare.org if you have any questions regarding these resources.

Nurse Advice Line

L.A. Care offers its members a Nurse Advice Line (NAL) service 24 hours a day, 7 days a week. A team of registered nurses is available to answer any health-related questions. L.A. Care members can access this service by phone or chat live with a nurse using their L.A. Care Connect online member account.

As a complement to your service, please encourage your patients to call the NAL for free health advice. If your patient is an L.A. Care member or a Medi-Cal member with one of our Plan Partners, they can call the NAL at the numbers listed below:



Anthem Blue Cross 1.800.224.0336

1.800.609.4166 TTY 1.800.368.4424 TTY 1.800.735.2929

1.888.576.6225 **TTY 711**

Blue Shield of CA Promise Health Plan Kaiser Permanente L.A. Care Health Plan 1.800.249.3619

The NAL phone number is also located on the back of the patient's health plan member ID card.

Additionally, the NAL phone numbers can be found on the L.A. Care websites: lacare.org, lacarecovered.org, and calmediconnectla.org.

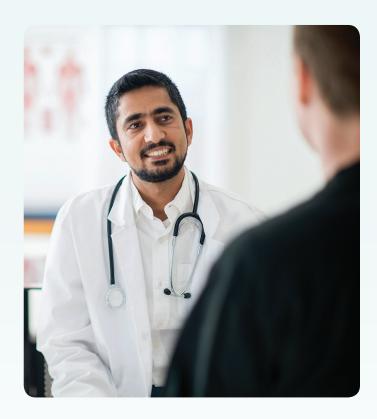
Preventing Medical Fraud and Identity Theft

You can help your patients protect their health and avoid health care fraud or abuse. If your patient reports their member ID has been lost or stolen, here are some ways to assist them:

- Check medical records to make sure they match the patient's condition. Give them a copy of their records if needed.
- Run a CURES report on the patient to check for controlled substances that you may not have prescribed. Go to https://oag.ca.gov/cures
- **3.** Recommend that patients place a fraud alert with one of the three (3) credit bureaus.
 - a. Equifax Call 1.888.766.0008
 - **b.** Experian Call 1.888.397.3742
 - c. TransUnion Call 1.800.680.7289

The fraud alert service is free and will help protect your patients from future abuse. When calling, the patient should ask for a copy of their credit report and check it closely.





- **4.** Advise your patients to file a complaint with the Federal Trade Commission (FTC). They can do this online by completing the form at **identitytheft.gov**. The patient will be given an FTC Identity Theft Affidavit which they should print out and save. Patients can also call 1.877.438.4338
- **5.** Advise your patients to file a report with their local police department.
- **6.** To learn more about how to protect your patients and yourself from identity theft, and what actions victims of identity theft should take, please visit **identitytheft.gov**.



Member's Rights and Responsibilities Members of L.A. Care have the right to...

Respectful and courteous treatment.

- Members have the right to be treated with respect and courtesy by their health plan's providers and staff.
- Members have the right to be free from consequences of any kind when making decisions about their care.

Privacy and confidentiality.

- Members have the right to have a private relationship with their provider and to have their medical record kept confidential.
- Members also have the right to receive a copy of and request corrections to their medical record.
- If the member is a minor, they have the right to certain services that do not need their parents' approval.

Choice and involvement in their care.

- Members have the right to receive information about their health plan, its services, its doctors and other providers.
- Members also have the right to get appointments within a reasonable amount of time.
- Members have the right to talk with their doctor about all treatment options for their condition, regardless of the cost, and participate in making decisions about their care.
- Members have the right to say "no" to treatment, and the right to a second opinion.
- Members have the right to decide how they want to be cared for in case of a life-threatening illness or injury.

Receive timely customer service.

 Members have the right to wait no more than 10 minutes to speak to a customer service representative during L.A. Care's normal business hours.

Voice their concerns.

- Members have the right to complain about L.A. Care, the health plans and providers we work with, or the care they get without fear of losing their benefits.
- L.A. Care will help members with the process. If members don't agree with a decision, members have the right to appeal, which is to ask for a review of the decision.
- Members have the right to disenroll from their health plan whenever they want.
- Medi-Cal members have the right to request a State Fair Hearing.

Service outside of their health plan's provider network.

- Members have the right to receive emergency or urgent services, as well as family planning and sexually transmitted disease services outside of their health plan's network.
- Members have the right to receive emergency treatment as follows:
 - Medi-Cal and CalMediConnect members: Emergency care services are covered at all times anywhere in the United States, Mexico and Canada. For Medicarecovered services, emergency is NOT covered outside of the United States and its territories. For Medicarecovered emergency care provided outside of the United States and its territories that are not covered by Medi-Cal, the member may receive a bill from the provider.
 - PASC-SEIU members: Emergency care services are covered 24 hours a day, 7 days a week, anywhere.

Service and information in their language.

Members have the right to request an interpreter at no charge. Members have the right to get all member information in their language or in another format (such as audio or large print).

Know their rights.

- Members have the right to receive information about their rights and responsibilities.
- Members have the right to make recommendations about these rights and responsibilities.



Members of L.A. Care have the responsibility to...

Act courteously and respectfully.

- Members are responsible for treating their doctor, all providers and staff with courtesy and respect.
- Members are responsible for being on time for their visits or calling the doctor's office at least 24 hours before the visit to cancel or reschedule.

Give up-to-date, accurate and complete information.

- Members are responsible for giving correct information to all providers and to L.A. Care.
- Members are responsible for getting regular checkups and telling the doctor about health problems before they become serious.

Follow their doctor's advice and take part in their care.

 Members are responsible for talking over their health care needs with their doctor, developing and following the treatment plans they and their doctor agree on.

Use the Emergency Room only in an emergency.

 Members are responsible for using the emergency room in cases of an emergency or as directed by their doctor.

Report wrongdoing.

- Members are responsible for reporting health care fraud or wrongdoing to L.A. Care.
- Members can do this without giving their name by calling the L.A. Care Compliance Helpline toll free at 1.800.400.4889, going to www.lacare.ethicspoint.com, or calling the California Department of Health Care Services (DHCS) Medi-Cal Fraud and Abuse Hotline toll-free at 1.800.822.6222.

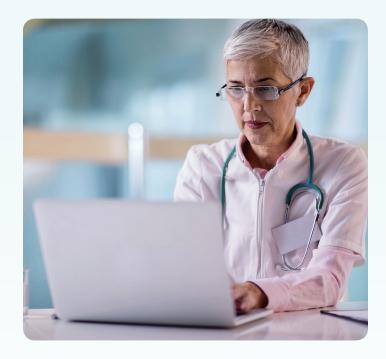
Valuable Information at Your Fingertips:

Available on L.A. Care's Website



L.A. Care's website has information about many different topics that might be helpful to you. It provides a useful way to get information about L.A. Care and its processes. Please visit our website at lacare.org and click on "For Providers" for the following information:

- Quality Improvement Program, including goals, processes and outcomes related to care and services
- · Policy encouraging practitioners to freely communicate with patients about their treatment, including medication treatment options, regardless of benefit coverage limitations
- Requirement that practitioners, providers and facilities cooperate with quality improvement activities; provide access to their medical records, to the extent permitted by state and federal law; maintain confidentiality of member information and records, to the extent permitted by state and federal law; maintain confidentiality of member information and records; and allow L.A. Care to use performance data for activities such as quality improvement activities and public reporting to consumers
- · Policy on notification of specialist termination
- Access standards
- Case management services and how to refer patients
- Disease Management Program information and how to refer patients
- Health education services and how to refer patients
- Coordination of Medicare and Medicaid benefit
- Care services to members with special needs
- Clinical Practice Guidelines, including ADHD and depression
- Preventive Health Guidelines



- Medical record documentation standards; policies regarding confidentiality of medical records; policies for an organized medical recordkeeping system; standards for the availability of medical records at the practice site and performance goals
- Utilization Management Medical Necessity Criteria, including how to obtain or view a copy
- Policy prohibiting financial incentives for Utilization Management decision makers
- Instructions on how to contact staff if you have questions about Utilization Management processes and the toll-free number to call

- Instructions for triaging inbound calls specific to Utilization Management cases/issues
- Availability of, and the process for, contacting a peer reviewer to discuss Utilization Management decisions
- Policy on denial notices
- Policy regarding the appeals notification process
- Pharmaceutical management procedures and lists of pharmaceuticals included in the benefit plan and Formulary updates
- Policy regarding your rights during the credentialing/recredentialing process, including how to review information and correct erroneous information submitted to support your credentialing application, as well as how to obtain information about the status of your application and how to exercise these rights
- Member's Rights and Responsibilities
- Web-based provider and hospital directory



If you would like hard copies of any of the information available on the website, please contact our Provider Solution Center at 1.866.LA.CARE6 (1.866.522.2736).

Progress Notes is a publication of L.A. Care Health Plan for our Medi-Cal and Cal MediConnect 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).

IMPORTANT CONTACT NUMBERS

L.A. Care Compliance Helpline: 1.800.400.4889

24 hours a day, 7 days a week

Provider Solution Center: 1.866.LA.CARE6, 1.866.522.2736

(Eligibility & Claims questions only)

Medical Management: phone 1.877.431.2273 fax **213.438.5777** for authorization requests

LTSS Department: 1.855.427.1223 for Long-Term Services and Supports

HCC Outreach Specialist, Betty Garcia: 213.694.1250 x4935 fax 213.438.4874 for Annual Wellness Exam (AWE) forms

Health Education: 1.855.856.6943 for forms and programs

Nurse Advice Line: L.A. Care — 1.800.249.3619 Kaiser — **1.888.576.6225**, Care1st — **1.800.609.4166**

Anthem Blue Cross — **1.800.224.0336**

Beacon Health Options: 1.877.344.2858 (TTY 1.800.735.2929) for behavioral health services 24 hours a day, 7 days a week

L.A. Care Covered™: 1.855.270.2327 (Providers: Option "2")



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

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Progress Notes

A NEWSLETTER FOR OUR PHYSICIAN PARTNERS

Progress Notes

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Get the latest from the PULSE

Sign up today for the PULSE, L.A. Care's newsletter created by L.A. Care's Provider Network Management and Marketing departments and emailed exclusively to network providers. Get important updates on incentives, initiatives, HIT and relevant L.A. Care news. Progress Notes is also available electronically. Visit lacare.org under the "For Providers" section to select the "Newsletter Sign Up" link today!



Vaccinate Your Patients Against Flu

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