

Progress Notes

SPRING 2018 • VOLUME 13 • ISSUE 2

My Health In Motion™ - Online Health and Wellness Tools Available for Patients

L.A. Care's *My Health In Motion*™ is an online one-stop shop for health and wellness information and resources for your patients. The website offers personalized wellness tools to L.A. Care members, including:

- Meal plans and healthy recipes
- Workout tips and hundreds of educational videos
- One-on-one health coaching with a health educator and/or registered dietitian. They can give your patients personalized help with nutrition or managing health conditions like diabetes or asthma. They'll listen to your patient's specific needs and tailor a plan that fits your lifestyle.
- Interactive workshops and easy to use tools for weight management, tobacco cessation, stress management, depression, and many more topics

To access *My Health In Motion*™, please direct your L.A. Care patients to:

- Go to lacare.org and click "Member Sign-In."
- Log in to the L.A. Care Connect member portal.
- Click the "*My Health In Motion*" tab.

If you have questions, please contact the **L.A. Care Health Education** staff at **1.855.856.6943**.



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**ELEVATING
HEALTHCARE**
IN LOS ANGELES COUNTY
SINCE 1997

Plant-Based Diet Shown to Reduce Heart Failure Risk

More evidence on the health benefits of a plant-based diet comes from a prospective study examining the eating patterns of 18,000 Americans. An analysis of data from the National Institutes of Health-funded study known as REGARDS (Reasons for Geographic and Racial Differences in Stroke) revealed that those who ate five or more portions of fruits and vegetables daily showed a 28% lower risk of developing heart failure.



Individuals who fared best generally followed the American Heart Association (AHA) guidelines. An AHA spokesman who presented the findings suggested physicians assess their patients' diets and encourage patients to follow a plant-focused diet.

“We would love it as physicians if we could prescribe a specific diet that would mitigate heart failure,” said Kayla Lara, M.D., at a press briefing at the AHA’s annual scientific sessions.

AHA guidelines recommend a diet consisting of mostly fruits and vegetables, whole grains, nuts and legumes, and non-tropical vegetable oils. Low-fat dairy products and skinless poultry and fish may also be included. The guidelines recommend limiting consumption of saturated fat, trans fat, sodium, red meat, sweets and sugar-sweetened beverages.

The health benefits of plant-based diets have been widely recognized. They include decreasing cardiovascular risk factors such as obesity, hypertension, hyper-lipidemia and inflammation, as well as lowering risk for cancer and type 2 diabetes.

Plant-based diets can vary and health benefits stem from those rich in healthier plant foods such as fruits, vegetables and whole grains. Plant-based diets consisting of sweetened beverages, refined grains, potatoes and sweets such as candies and pastries – can have the opposite effect. A study published in the *Journal of the American College of Cardiology*, for example, found the less healthy plant-based diet to be associated with higher coronary heart disease risk.

Updated Hypertension Clinical Practice Guidelines Released: *Nearly Half of Americans May Have High Blood Pressure*

The American Heart Association and the American College of Cardiology have released a new set of guidelines for the diagnosis and treatment of high blood pressure. Physicians are urged to be aggressive in diagnosing and treating their patients for hypertension. The clinical practice guidelines state that patients who have, or are at risk of developing a cardiovascular disease should have a blood pressure reading lower than 130/80 mmHg.

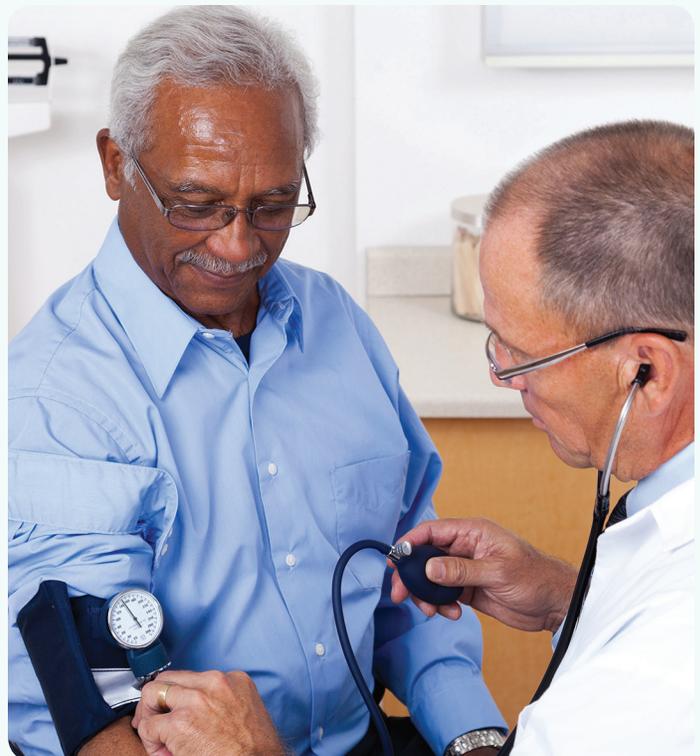


Based on these guidelines, the number of American adults receiving a diagnosis of hypertension is projected to reach 46 percent, compared with 32 percent under the previous definition. Of those, about one in five will need medication, according to Paul Whelton, M.D., Chair of the Guideline Writing Committee.

Among the populations expected to see increases in hypertension are Black and Hispanic men (17 percent increase) and Asian men (16 percent increase.) Rates among men ages 20 to 44 will nearly triple, and double for women that age.

The guidelines are based on hundreds of studies and clinical trials, including the 2015 SPRINT Trial, which showed that individuals with lowered blood pressure have a lower risk of heart failure and death. They supplant previous recommendations released in 2003.

Hypertension is second only to smoking as a preventable cause of heart disease and stroke deaths. Patients should



be encouraged to adopt healthy lifestyle changes including regular physical activity, a heart-healthy diet, decreased alcohol consumption, weight loss and smoking cessation, if applicable.

In a related development, the American Academy of Pediatrics recently issued guidelines recommending that physicians routinely screen children for hypertension during well-child exams. An estimated 3.5% of children and adolescents have high blood pressure, but the diagnosis is missed in about three out of every four cases in primary care settings.



Vital Signs

Have you heard about the NEW Substance Abuse Service Helpline (SASH)?

Are your L.A. Care patients in need of substance use treatment services? If alcohol or drug use is negatively impacting their health, relationships, work, school or home life, the County of Los Angeles offers free treatment to MediCal, My Health LA, AB 109 and Drug Court participants who reside in L.A. County. Available substance use treatment services include:

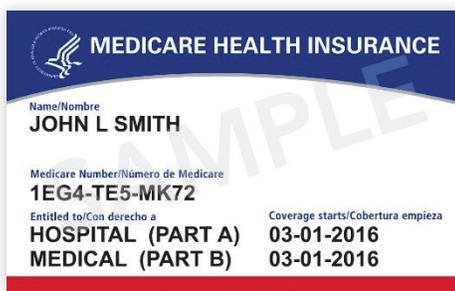
- Outpatient Services
- Intensive Outpatient Treatment
- Detox and Withdrawal Management
- Medication-Assisted Treatment and Opioid Program
- Residential Services
- Recovery Support Services

For referral and screening for L.A. Care members interested in substance use treatment services, please call the Substance Abuse Service Helpline (SASH) at **1.844.804.7500**. The provider directory is also accessible online at sapccis.ph.lacounty.gov/sbat/.

If you have any questions or need care coordination support, please contact L.A. Care's **Behavioral Health Dept. Officer of the Day** for assistance at **1.844.858.9940**.



New Medicare Card Distribution in California



CMS has announced that they will distribute the new Medicare cards to California beneficiaries from April to June 2018. L.A. Care will begin updating its systems with the new MBI number from CMS and the State during the same timeframe.

Providers are encouraged to tell their patients to contact the **Social Security Administration (SSA) Office** to provide their current address. To update an address, beneficiaries can contact the **SSA** toll free at **1.800.772.1213**, or visit a local **SSA** office.

L.A. Care Provider Resources

The L.A. Care new **Medicare ID Card Team** will be available to answer and triage questions from our providers or vendors about the distribution of the new Medicare ID Cards and MBI numbers. If you need more information or have questions, please contact Dan Salo at SSNRI@lacare.org or **213.694.1250, ext. 5754**.

Provider Ombudsman CMS Resource

The Provider Ombudsman for the new Medicare card serves as a CMS resource for the provider community. The Ombudsman will ensure that CMS hears and understands any implementation problems experienced by clinicians, hospitals, suppliers, and other providers. To reach the Ombudsman, please contact: NMCPProviderQuestions@cms.hhs.gov.

Diabetes Prevention Program: How Providers Can Get Involved

There is a new member benefit for Cal Medi-Connect (CMC), Medi-Cal and L.A. Care Covered™ members. It is the Diabetes Prevention Program (DPP), a year-long lifestyle change program designed to prevent or delay the onset of type 2 diabetes through intensive nutrition and physical activity behavior modification. The program must comply with Center for Disease Control (CDC) DPP guidelines and be delivered by a CDC-recognized provider.

L.A. Care providers are crucial to the identification and referral to the DPP program. Members are eligible for the program if they are 18 years or older and:

- Are overweight (body mass index ≥ 24 ; ≥ 23 if Asian)
- Have no previous diagnosis of type 1 or type 2 diabetes (excludes gestational diabetes)
- Have a blood test result in the prediabetes range within the past year:
 - Hemoglobin A1C: 5.7%–6.4%
 - Fasting plasma glucose: 100–125 mg/dL or
 - Two-hour plasma glucose (after a 75 gm glucose load): 140–199 mg/dL or
 - Be previously diagnosed with gestational diabetes.



To refer L.A. Care members to the **Diabetes Prevention Program**, please complete the online Health Education Referral form at lacare.org/providers/provider-resources/health-education-tools.

Select “pre-diabetes” and indicate “**Diabetes Prevention Program**” in the comments section. Questions? Contact Rachel Lander-Canseco, MS, RD, CHC at **213.694.1250 ext. 6473** or via email at Rlander@lacare.org.



Member's Rights and Responsibilities

Members have a 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 Medicare-covered services, emergency is NOT covered outside of the United States and its territories. For Medicare-covered 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 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**.

Top Performing Providers in L.A. Care's Physician P4P Program

Congratulations to the physicians and community clinics listed below for providing exceptional care to L.A. Care's Medi-Cal members, and for outstanding performance in the 2016 Physician Pay-for-Performance (P4P) Program. The following providers were the top performers in their practice category in the following three categories*: Pediatric Health, Women's Health and Comprehensive Diabetes Care during measurement year 2016.**

These providers and their staff are receiving a token of recognition from L.A. Care in addition to their incentive payments. We celebrate their accomplishment!



Solo & Small Group Physicians***

Category	Physician Name
Pediatric Services	Dr. Jorge Jaramillo
	Dr. Mi-Jeong Lee
	Dr. Richard Menendez
Women's Health	Dr. Harold Peart
	Dr. Martha Rodriguez
	Dr. Julio Vasquez
Comprehensive Diabetes Care	Dr. Sergio Gomez
	Dr. Martha Rodriguez
	Dr. Teresita Tan

Community Clinics***

Category	Clinic Name
Pediatric Services	Eisner Pediatric and Family Medical Center
	El Proyecto Del Barrio
	Universal Community Health
Women's Health	AltaMed Health Services
	Comprehensive Community Health Centers
	Northeast Community Clinic
Comprehensive Diabetes Care	Asian Pacific Healthcare Venture
	Chinatown Services Center
	Garfield Health Center

*Pediatric measures include Appropriate Testing for Children with Pharyngitis, Childhood Immunization Status – Combo 3, Immunizations for Adolescents – Combo 1 and Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life. Women's Health measures include Breast Cancer Screening, Cervical Cancer Screening, Chlamydia Screening, Timeliness of Prenatal Care and Postpartum Care. Comprehensive Diabetes Care measures include Eye Exam, HbA1c Screening, HbA1c Control (< 8.0%) and Medical Attention for Nephropathy.

**Providers had to have at least 30 eligible members per measure and at least 3 scored measures within a category to be included for recognition. Performance is based on administrative data received by L.A. Care.

***Providers are shown in alphabetical order by last name.

Stay Updated on Pharmacy and Formulary at L.A. Care

The L.A. Care Formulary is a preferred list of covered drugs. It applies to outpatient and self-administered drugs and does not apply to medications used in the inpatient setting or medical offices. L.A. Care Health Plan has an active Pharmacy Quality Oversight Committee comprised of physicians and pharmacists who review and approve the drugs that are included on the Formulary, which is updated monthly. Revisions are based on safety, clinical efficacy, and cost-effectiveness. Updates to the Formulary are available online at lacare.org.



How to Use the Formulary

Medicines on the Formulary are listed in alphabetical order and by class or category. Both brand name and generic medications are covered by L.A. Care. However, FDA approved generics should be used when available. Generics are generally more cost-effective than brand named drugs. A prescriber may request a brand name product in lieu of an approved generic, if the prescriber determines that there is a documented medical need for the brand equivalent. This type of request for coverage may be made by completing a Medication Request Form.

Some Formulary medicines require prior authorization. These drugs are listed throughout the Formulary, and on a separate list within it called the “Prior Authorization Drug List”. You can determine if a drug requires a Prior

Authorization by referring to the Formulary on the L.A. Care website at lacare.org. Some drugs require “Step Therapy” which involves one or more “prerequisite” first step drugs being tried first. Some drugs have “Quantity Limits” which means that coverage is limited to specific quantities per prescription and/or time period.

Any drug not found in the Formulary listing published by L.A. Care Health Plan shall be considered a non-Formulary drug. A prescriber may request an exception to coverage for a non-Formulary drug if the prescriber determines that there is a documented medical need. This type of request for coverage may be made by completing a Medication Request form.

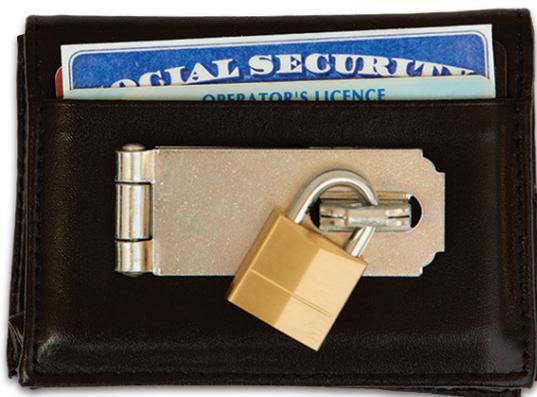
Preventing Medical Fraud and Identity Theft

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

1. Check medical records to make sure they match the patient's condition. Give them a copy of the records if needed.
2. Run a CURES report on the patient to check for controlled substances that you may not have prescribed. Go to 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.

Nurse Advice Line

L.A. Care Health Plan 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 Nurse Advice Line at the numbers listed below:

Anthem Blue Cross
1.800.224.0336
TTY 1.800.368.4424

Care1st Health Plan
1.800.609.4166
TTY 1.800.735.2929

Kaiser Permanente
1.888.576.6225

L.A. Care Health Plan
1.800.249.3619
TTY 711

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.

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)

Provider Relations: 213.694.1250 x4719

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")

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L.A. Care
HEALTH PLAN®

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Progress Notes

A NEWSLETTER FOR OUR PHYSICIAN PARTNERS

Progress Notes

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News Alert



Top Performing Providers in P4P Program

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