

Provider Update

SAN FRANCISCO
HEALTH PLAN™



Here for you

February 1, 2016

Please see these important updates from San Francisco Health Plan

Our February Update is extraordinary full of important information, including:

- Priority on Access to Care
- Our Quality Improvement Plan and Evaluation is Published
- Referring SFHP Patients with Potential CCS Eligibility
- HEDIS Pursuit Season Has Begun
- Pharmacy Updates
- Free Smoking Cessation Materials
- Policy Changes to the Healthy San Francisco Program
- Black Infant Health Program Seeks Referrals
- SFHP Pain Management Program Updates
- Other Training: AHRQ Health Literacy Modules

Priority on Access to Care

Access to care is a major priority for San Francisco Health Plan. Ensuring timely access to patient care is a California Department of Health Services requirement of all Medi-Cal managed care plans and is essential for producing positive health outcomes, appropriate health-care utilization, and high levels of patient satisfaction.

SFHP's provider network is among the best California public Medi-Cal plans for clinical quality (1). However, survey data indicates patient experience is among the lowest in the same group, particularly in the areas of patient satisfaction with access (2). SFHP will be working to improve these scores through its Practice Improvement Program (PIP) and other provider focused quality initiatives.

Some of SFHP's recently implemented access improvement efforts include:

- Monitoring provider's compliance with Timely Access Standards (3)
- Increasing the emphasis on access in PIP, including the addition of CAHPS performance and expanding specialty access measure
- Working with Primary Care Providers to improve and expand the role of nurses

- Improving overall provider communication
- Collaborating with all providers to decrease no-shows and expand utilization
- Developing provider training programs specifically focused on improving patient access

SFHP is meeting with Clinic and Medical Group leadership to review survey and monitoring results and develop strategies for improvement. Additionally, SFHP is analyzing network adequacy, conducting a Provider Appointment Availability survey, and measuring providers' satisfaction with their patients' access to care.

SFHP is committed to working with providers to improve access across the network and looks forward to your increased partnership and collaboration with this very important initiative. If you have any questions or would like to submit ideas on how best to increase patients' access to care, please let us know at provider.relations@sfhp.org.

(1) As measured by the Healthcare Effectiveness Data and Information Set (HEDIS), National Committee for Quality Assurance (NCQA)

(2) As measured by the Consumer Assessment of Healthcare Providers and Systems (CAHPS), Agency for Healthcare Research and Quality.

(3) Department of Health Care Services, Timely Access Regulations

Our Quality Improvement Plan and Evaluation is Published

One way SFHP approaches Access to Care is through our Quality Improvement Plan and Evaluation. The Plan describes our efforts to improve areas such as access to services and quality of care by identifying opportunities for internal improvement and by collaborating with our providers. The Plan identifies our annual goals, and our activities that contribute to reaching those goals. Annually, we evaluate the plan to examine how we are doing as an organization, to reflect on our successes, and identify the areas needing improvement.

In 2015, SFHP met many of its goals and identified several areas for improvement. SFHP, through the work of our providers, had the third-highest HEDIS Aggregated Quality Factor Score of any of the 22 Medicaid plan in California (the top two were Kaiser). SFHP launched many new programs in 2015 including a Complex Medical Case Management (CMCM) program and new member incentives for priority clinical services such as hypertension control.

Based on the 2015 Evaluation, SFHP has identified 29 goals for 2016, in collaboration with our Quality Improvement Committee which contains SFHP physicians and members. An example of one of SFHP's goals for 2016 is to increase members' utilization of flu vaccines. We hope to reach this goal by making flu vaccines more accessible; now members can visit one of the many pharmacies in San Francisco to get a vaccine in addition to its availability at their provider's office. SFHP also aims

to increase utilization of mild to moderate behavioral health services (e.g. treatment for anxiety, depression, and attention deficit disorder) by expanding the current behavioral health network and by piloting alternative modes for accessing care.

SFHP has identified 29 goals for the 2016 Quality Improvement Plan. If you would like more information, the 2015 Quality Improvement Plan Evaluation and the 2016 Quality Improvement Plan please visit our website at www.sfhp.org/providers/qi-program-evaluations-results or contact SFHP at qualityimprovement@sfhp.org.

Referring SFHP Patients with Potential CCS Eligibility

Please be advised that pediatric and family providers do not need to wait for CCS eligibility before referring to specialists.

If you are not sure of CCS eligibility for a patient, please do send your authorization request to SFHP. SFHP will approve medically-necessary covered services while CCS determines eligibility for their program, and will pay for those services if CCS declines.

If you have any questions, contact Provider Relations through the information below.

HEDIS Pursuit Season Has Begun

SFHP's HEDIS pursuit season began in January! Thanks to the quality care you provide, SFHP is the **highest-ranked public Medi-Cal plan** based on aggregated 2015 HEDIS scores (and the third plan overall).

- For sites with more than 15 medical records in the HEDIS sample, we will call you in January or February to make an appointment for our HEDIS team to come to your office. Our HEDIS visits will be scheduled from February to the beginning of May of 2016.
- For smaller sites, with less than 15 medical records in the HEDIS sample, we will send you the list of members that require medical record documentation. Please send the medical record documentation within 10 business days of receipt of the list.

We look forward to another successful HEDIS season! Please contact Annie Humphreys at ahumphreys@sfhp.org or 1(415) 615-4291 with any questions.

Pharmacy Updates

Immunizations Under Pharmacy Benefit

- Please help spread the word to your patients that they can conveniently receive various immunizations at their pharmacy. We hope that this new benefit will be highly utilized for the current flu season.
- Adult immunizations (>18 years of age) are covered under the SFHP Medi-Cal Outpatient Pharmacy Benefit. Vaccines covered include: influenza, measles/mumps/rubella (MMR), meningococcal, pneumococcal, herpes zoster, Tdap/Td, Hib and varicella.
- Please note children 18 years of age or younger are eligible for vaccinations through California Vaccines for Children (VFC) Program. Contact VFC at 1(877) 243-8832 for more information.
- All pharmacies administering vaccinations are required to register with California Immunization Registry (CAIR). CAIR is a state wide consortium of regional registries that consolidate immunization records into a state wide database. We encourage providers to register for and access this system to see what vaccinations have been administered by participating providers and pharmacies.

Home Blood Pressure Monitors Are Now Covered Under Pharmacy Benefit

- SFHP now covers home blood pressure monitors through the pharmacy benefit for all SFHP Medi-Cal and Medicare/Medi-Cal (dual eligible) members. Please provide your patients with a written prescription for a blood pressure monitor to be filled at a network pharmacy.
- Monitors up to \$50 are covered and each member is eligible for 1 monitor every 5 years.

90-Day Supply Policy for Maintenance Brand Medications Used for Chronic Conditions

- SFHP's standard days of supply policy is 30 days for brand medications and 90 days for generic medications with some exceptions.
- In order to increase access and improve adherence to medications used for treatment of chronic conditions, effective November 1, 2015 select brand medications are allowed to be filled for a 90-day supply.
- Examples of medication classes covered under this policy include but are not limited to: antidiabetic agents, anticonvulsants, anticoagulants, antidepressants, antihyperlipidemics, antihypertensives, inhaled glucocorticoids and contraceptives. Specialty medications are limited to a 30-day supply.

Free Smoking Cessation Materials

While supplies last, the California Smokers' Helpline is offering a limited selection of materials, free of charge and shipping, to help your patients quit smoking in the New Year. Please [click the link here](#) for details.

Policy Changes to the Healthy San Francisco Program

The following changes apply to the Healthy San Francisco (HSF) program and took effect on **January 1, 2016**.

- The household income limit increased from 400% to 500% of the federal poverty level (FPL).
 - Participants can remain on HSF as long as their household income is at or below 500% FPL. They must also meet all other program rules.
- Individuals who are eligible to purchase health insurance through Covered California can enroll in Healthy San Francisco if they find Covered California unaffordable.
 - Participants who joined HSF as part of the Transition Period were **not** disenrolled on December 31, 2015. They can remain on HSF as long as they meet all other program rules.

Please note: Healthy San Francisco is not health insurance. Participants may be subject to the federal tax penalty for not having health insurance. The penalty for not having health insurance in 2016 is \$695 per person or 2.5% of yearly household earnings, whichever is greater.

If you have any questions, please call Healthy San Francisco Customer Service at 1(415) 615-4555, Monday through Friday, 8:30am to 5:30pm.

Black Infant Health Program Seeks Referrals

Higher infant mortality among children born to African-American women is a persistent disparity despite huge improvements over the last century.

The California Maternal, Child and Adolescent Health Division (MCAH) is requesting your help in recruiting eligible African-American women into the Black Infant Health Program: self-identified African-American women who are over 18 years old and up to 26 weeks gestation.

Please find more details on the program [here](#). To refer, contact the Community Outreach Liaison for San Francisco County:

<http://www.cdph.ca.gov/programs/bih/Pages/BlackInfantHealthCoordinatorDirectory.aspx>

SFHP Pain Management Program Updates

Acute Pain Management: Putting use of Opioids in Proper Perspective

SFHP is releasing an online learning module to all providers this March 2016. Developed by SF Safety Net Pain Management Workgroup and Quality Healthcare Concepts, this 1 hour, 1 CME experience teaches an evidence-based approach to using opioids to treat acute pain. Content includes risk assessment, alternative treatments, dose & duration guidelines, and video case vignettes to practice new strategies for conversations with acute pain patients.

Link to the training will be live on the SFHP Pain Management Program website by late February/early March 2016.

<http://www.sfhp.org/providers/pain-management/training-conference-materials/>

Substance Use Warmline: FREE resource for PROVIDERS ONLY

The Clinician Consultation Center is pleased to offer free and confidential peer-to-peer telephone consultation, the Substance Use Warmline, focusing on substance use evaluation and management for primary care clinicians. With special expertise in pharmacotherapy options for opioid use, our addiction medicine-certified physicians, clinical pharmacists, and nurses are available at 1(855) 300-3595, Monday through Friday, 10:00am to 6:00pm, EST. Voice mail is available 24-hours a day.

Learn more about the CCC at <http://nccc.ucsf.edu/>

AHRQ Health Literacy Modules (CE and MOC Credits Available)

Online training resources available addressing the challenges in caring for patients with low health literacy, as well as strategies to improve overall patient communication and care. OptumHealth Education is issuing continuing education credit for taking the AHRQ-developed Health Literacy Knowledge Self-Assessment. No fees are charged for the two CE activities:

1. [An Updated Overview of Health Literacy](#)
2. [Improving Health Literacy by Improving Communication Skills](#)

Contact moreinfo@optumhealtheducation.com with questions.

Should you have any other concerns or need assistance with Provider Relations or Health Services issues, please do not hesitate to contact Provider Relations at **1(415) 547-7818 ext.**

7084, Provider.Relations@sfhp.org or

Jim Glauber, MD, MPH, Chief Medical Officer, at jglauber@sfhp.org.

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