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February 1st, 2019

Our February Update includes information on:

1. Save the Date for CME: Medical Care of Vulnerable and Underserved Populations
2. Training offered by CSU for Palliative Care
3. Facility Site Review (FSR) Provider Pearls: Audiometric and Vision Screenings
4. Our Quality Improvement Evaluation is Published
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6. UM Department Info: Criteria, How to Reach Us and Decision-Making Process
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1. Save the Date for CME: Medical Care of Vulnerable and Underserved

Zuckerberg San Francisco General
Division of General Internal Medicine
and Center for Vulnerable Populations
University of California, San Francisco
School of Medicine

The UCSF logo is displayed in white text on a dark blue square background.

Medical Care of Vulnerable and Underserved Populations

HOLIDAY INN GOLDEN GATEWAY • SAN FRANCISCO, CA

THURSDAY - SATURDAY
February 28-March 2, 2019

COURSE CHAIRS

Dean Schillinger, MD
Professor of Medicine and
Chief, Division of General Internal Medicine,
Zuckerberg San Francisco General
UCSF Center for Vulnerable Populations

Margaret Wheeler, MD
Professor of Medicine
Division of General Internal Medicine
Zuckerberg San Francisco General

The background of the entire page is a photograph of the Golden Gate Bridge in San Francisco, taken from a high vantage point. The bridge is silhouetted against a vibrant sunset sky with streaks of orange, red, and blue. The city lights are visible in the distance, and the foreground shows a dark hillside with some lights.

save the date

STEERING COMMITTEE

Gerri Collins-Bride, RN, MS, FAAN

Susan Fisher-Owens, MD, MPH

Shira Shavit, MD

Course Schedule

Schedule has been posted! [Click here to view](#)

After years of documenting disparities in health and health care based on race, ethnicity, gender, education, and socioeconomic status, the medical community has shifted its focus to pursuing health equity or “striving for the highest possible standard of health for all people while giving special attention to the needs of those at greatest risk of poor health, based on social conditions.” (Braveman, 2014) With publicly insured and uninsured patients making up about half of all outpatient visits in the US, and millions of previously uninsured patients continuing to access to health care through Medicaid expansions, becoming an expert in caring for the complicated medical and social needs of vulnerable and underserved patients is crucial to every healthcare provider.

World-class experts and front-line practitioners from the Zuckerberg San Francisco General and the UCSF Center for Vulnerable Populations will present approaches to mitigate the challenges in caring for vulnerable populations and enhance the profound joy clinicians can experience when engaging with patients in greatest need. Topics to be covered will include updates in a broad range of diseases that disproportionately affect vulnerable patients, such as HIV, depression, PTSD, obesity, hepatitis and substance use. In addition, we discuss how clinicians can address social factors that complicate the management of medical illness, such as homelessness, school suspension, a history of trauma or of incarceration and food insecurity, etc. Each day we will feature a nationally renowned figure in the field of the care of vulnerable populations who will deliver pearls and impart wisdom with respect to how to stay engaged, connected, and inspired in this work.

Registration Fees

Physicians \$800

Allied Health Professionals \$700

Residents/Fellows \$500

► [View more Course Details here](#)

2. *Training offered by CSU for Palliative Care*



Institute for Palliative Care

There is still time for providers to apply for this no-cost training program! The [Department of Health Care Services](#) (DHCS) has contracted with the *California State*

University Institute for Palliative Care to provide palliative care training to qualified Medi-Cal providers and their clinician staff. Providers can apply for training, at no charge, through the Institute [website](#) ON or BEFORE February 28, 2019.

Funding for this effort concludes March 29, 2019, so all provider applications for the training funds should be submitted by February 28, 2019.

The Institute's courses are geared toward physicians, physician assistants, nurse practitioners, registered nurses, and social workers interested in building their palliative care skills. Courses are developed by clinical experts in palliative care, and are engaging, interactive, and accessible 24/7. Each course provides continuing education credits or continuing medical education credits.

Qualified Medi-Cal clinical providers interested in applying for these courses may click [here](#) for additional details, and use the "PAL2019" code.

Enrollment will be funded on a first-come, first-served basis. DHCS will continue to accept applications until all funding has been committed. Providers will be given priority based on geographic and clinical diversity. **DHCS will limit funding to no more than four individuals per organization**, to support geographic diversity for training.

Please reach out to the Institute's Relationship Manager, Brandon McDonald, with further questions at (760) 750-7288 or bmcdonald@csusm.edu.

[Learn more about SB 1004](#)

3. Facility Site Review (FSR) Provider Pearls: Audiometric and Vision Screenings



“Provider Pearls” are monthly articles to help you prepare for the California Department of Health Care Services (DHCS) FSR review processes. If a clinic manager, office manager, nurse manager, or operations person, can take the time to independently self-monitor clinic practices with the aid of SFHP checklists and DHCS guidelines at least annually, we can all

work together to strive toward improved quality standards in office practice operations.

Audiometric and Vision Screenings

This month the Providers Pearls topic is audiometric and vision screenings for pediatric members. Age-appropriate visual and audiometric screenings at each health assessment visit, with referral to

optometrist/ophthalmologist, as appropriate, are part of the DHCS Medical Record Review (MRR) audit. All primary care provider offices follow both the DHCS MRR guidelines and the DHCS Child Health & Disability Prevention (CHDP) guidelines (DHCS 4493, July 2012, page 3 of 16) for appropriate members. CHDP states:



Medical Equipment - All personnel are appropriately trained in the proper utilization of all medical equipment they are expected to operate in their scope of work. For any medical equipment kept on site, there are personnel on site who are qualified and/or trained to use equipment properly. (For example, audiometric testing, vision screening, obtaining BMI percentile, if there is an emergency “Crash” cart/kit on site, personnel on site are qualified and properly trained in the correct use of the equipment). Reviewers may interview site personnel regarding the appropriate use

All clinic staff that conduct audiometric and vision screenings for CHDP children must attend an official CHDP training and be certified every 4 years. If the staff member has not conducted any screenings one year after certification, they will need to attend and be certified again.

All providers new to the CHDP program must be oriented to the program. These orientations are offered on a one-on-one and as-needed basis. If any CHDP clinic has new providers performing CHDP physicals, then contact CHDP Billing Clerk; Tina Panziera, at 1(415) 575-5712 to schedule an orientation.

For any questions about the Facility Site Review or Medical Record Review processes or tools, please contact Jackie at jhagg@sfhp.org or by her direct line at 1 (415) 615-5637.

References:

[CHDP website](#), Vision, Hearing and Development Assessment screening training sessions; CHDP Billing Clerk: Tina Panziera at 1(415) 575-5712.

CHDP, Stockton, CA, CHDP Vision Training, Gwen Callaway at 1(209) 468-8918 or gcallaway@sjcphs.org.

4. Our Quality Improvement Evaluation is Published

SFHP recently finished its 2018 Quality Improvement Evaluation as well as its 2019 Quality Improvement Plan. The QI Plan describes efforts to improve in Access to Care and Quality of Service, Clinical Quality and Patient Safety, Care Coordination and Services, and Utilization Management. SFHP identifies annual goals and associated activities that contribute to those goals. At the end of the year, we evaluate the QI plan and activities to determine the effectiveness of our QI approach and determine improvement activities for the subsequent year.

In 2018, SFHP and its provider network met many of its goals and identified several

Medicaid 75th percentile. To address member satisfaction, SFHP improved in “Getting Care Quickly” in the Consumer Assessment Healthcare Providers & Systems for Health Plans (HP-CAHPS). SFHP also demonstrated improvement in member utilization of behavioral health services.

In collaboration with our Quality Improvement Committee, SFHP has identified goals in its 2019 Quality Improvement Plan. One example includes increasing the number of members who have completed their Hepatitis C treatment regimen. We hope to reach this goal through provider outreach incentivizing adoption of Hepatitis C identification and treatment, provider grant opportunities for at-risk members and inclusion of Hepatitis C incentive measure in the Practice Improvement Program (PIP), and participation in city-wide “End Hep C” efforts.

SFHP has identified 17 goals for the 2019 Quality Improvement Plan. If you would like more information on the 2018 Quality Improvement Evaluation and the 2019 Quality Improvement Plan please visit our [website](#) or contact SFHP at [Quality Improvement](#).

5. Pharmacy Update: Additive Toxicity, Quarterly Formulary and Prior Authorization Changes

Additive Toxicity

A Medi-Cal Prospective DUR Update titled: “Additive Toxicity Alert Now Focused Only On CNS Depressants” was published on the DHCS website. The [bulletin](#) outlines the FDA communication regarding the risk of combined use of opioid medications with benzodiazepines or other drugs that depress the central nervous system. The bulletin further outlines changes to the additive toxicity prospective DUR alert in fee-for-service Medi-Cal.

Quarterly Formulary and Prior Authorization (PA) Criteria Changes

Changes to the SFHP formulary and prior authorization criteria have been approved

The complete list of approved formulary and prior authorization criteria changes are available on SFHP website on the [SFHP Formulary page](#) and the [Pharmacy and Therapeutics Committee page](#), respectively. All changes are effective February 20, 2018. For formulary or criteria questions please visit our website or call SFHP pharmacy department at 1(415) 547-7818 ext. 7085, option 3.

6. UM Department Info: Criteria, How to Reach Us and Decision-Making Process

Free copies of Medical Necessity Criteria and/or Benefit Exclusion:

To request free copies of the information used to make utilization decisions, please call San Francisco Health Plan at 1(415) 547-7818 ext. 7080 or 1(800) 288-5555 to obtain a copy of the Medical Necessity Criteria or Benefit Exclusion.

Utilization Management (UM) staff availability:

SFHP's Utilization Management (UM) staff is available to providers and members during regular business hours (Monday through Friday, 8:30am - 5:00pm) to discuss UM issues, including denial decisions, by calling 1(415) 547-7818 ext. 7080 or toll-free 1(800) 288-5555. UM staff can also be reached by [email](#) or fax 1(415) 357-1292 for outpatient or 1(415) 547-7822 for inpatient. TTD/TTY services 1(888) 883-7347 for the hearing impaired and language services are available. After normal business hours, UM staff can receive secure voicemail, fax, and email. Messages received are returned the next business day or if received after midnight Monday through Friday, the same business day.

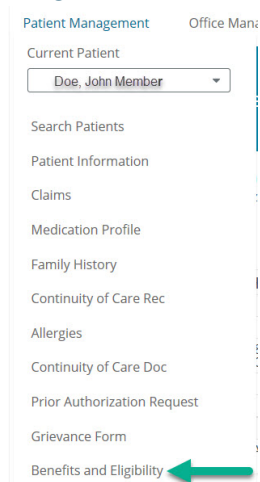
Utilization Management (UM) decision-making reminders:

Utilization Management (UM) decision-making is based only on appropriateness of care and service and existence of coverage. The UM process does not contain financial incentives, direct or indirect, to influence utilization management decisions. The nurses, medical directors, other professional providers, and independent

Directors and nurses are salaried employees of San Francisco Health Plan (SFHP), and contracted external physicians and other professional consultants are compensated on an hourly or per-case-reviewed basis, regardless of the coverage determination. SFHP does not specifically reward or provide financial incentives to individuals performing utilization review services for issuing denials of coverage. There are no financial incentives for UM staff or independent medical consultants to encourage utilization review decisions that result in under-utilization.

7. SFHP ProviderLink: Member Eligibility Updates

SFHP ProviderLink now shows Medicare and Health Homes Eligibility! Select "Patient Management" from the home screen and navigate to "Benefits and



Eligibility".

You will be taken to the Benefits and Eligibility details page.

The area highlighted in green shows information confirming eligibility. The Health Homes program assignment will be listed at the top right corner below PCP information

The Benefit Plan Information section clarifies that this member is enrolled for Health Homes. Medicare plan name and eligibility effective date is listed under the "Other Insurance" section.

[here.](#)

For more information regarding our provider portal please call Provider Relations at 1(415) 547-7818 ext. 7084.

For more information regarding our Health Homes program please visit our website [here.](#)

Gender		SAN FRANCISCO CA 941342202	MULTISPECIALTY - In Network
Member ID		Map Directions	Health Home
Medicaid ID			Health Home Provider
Phone			

BENEFIT PLAN INFORMATION			
Carrier :	San Francisco Health Plan	Status :	Active Plan
Product :	MEDI-CAL (MC)	Relationship :	
Network :	Nems With Sfhp	Start Date :	1 Sep 2018
Group :	MEDI-CAL (MC) (QMXPQ0852)	End Date :	
Division :	QMXPQ0852	Enrollment Origination Date :	
Benefit Plan :	MEDI-CAL (MC)	Group Benefit Effective :	1 Jan 1900
		Health Home :	Enrolled

OTHER INSURANCE					
Insurance Line	Group Number	Insurance Name	Address	Effective Dates	Payor Responsibility
BP0001		MEDICARE PLAN AB		1 Sep 2018 - 31 Dec 2100	Secondary

[View Eligibility History](#)

8. Provider Satisfaction Survey Coming in February and March



SFHP has engaged SPH Analytics to perform our annual Provider Satisfaction Survey. If you are randomly selected to participate, you will receive the survey either by email or traditional mail from SPH Analytics.

Please complete and submit the survey at your earliest convenience. Thank you for your continued support and participation!

Please do not hesitate to contact Provider Relations at **1(415) 547-7818 ext. 7084**, Provider.Relations@sfhp.org or Chief Medical Officer **Jim Glauber, MD, MPH**, at jglauber@sfhp.org.

*To access updates from previous months or subscribe to SFHP's Monthly Provider Update, please visit our [Provider Update archive page](#).

Register for SFHP ProviderLink [here](#).

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