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April 1st, 2020

Our April Update includes information on:

1. SFHP COVID-19 Provider Information page
2. FSR Provider Pearls: Advance Health Care Directive
3. Customer Service Training for Management and Office Staff
4. Medical Records Review Periodic Audits and EPSDT
5. Pharmacy Updates: SF Reproductive Justice Summit and Birth Control Prescribing
6. Diabetes Prevention Program

1. SFHP COVID-19 Provider Information page

Please bookmark and check this page for all current news from SFHP.

SFHP's COVID-19 page:

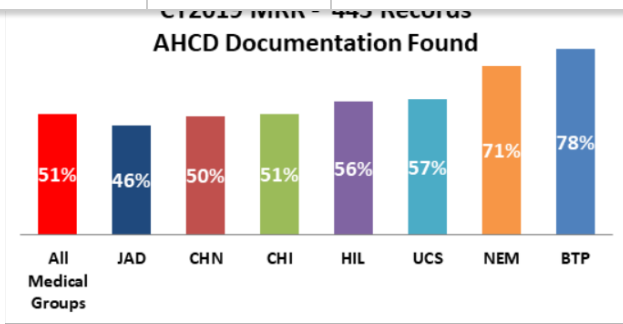
<https://www.sfhp.org/providers/health-alerts/#coronavirusproviders>

2. FSR Provider Pearls: Advance Health Care Directive



Advance Health Care Directive (AHCD) Information

This month's Providers' Pearl is about the California Department of Health Care Services (DHCS) Medical Record Review Standard, Documentation Criteria for Advance Health Care Directive (AHCD) information. Adult medical records are to include documentation of whether a member who is eighteen years of age or older or an emancipated minor has been offered information or has executed an Advance Health Care Directive (California Probate Code, Sections 4701; 42 CFR 422.128; 42 CFR 489.100, APL 05010; Emancipation of Minors Law, Div.11, Part 6, Chap.1, §7002). AHCD documentation should include evidence that it has been reviewed with the member at least every 5 years or according to the member's circumstance. DHCS will also accept the Physician Orders for Life-Sustaining Treatment (POLST) form and Five Wishes if appropriately completed and signed by necessary parties (Assembly Bill No.3000 Chapter 266).

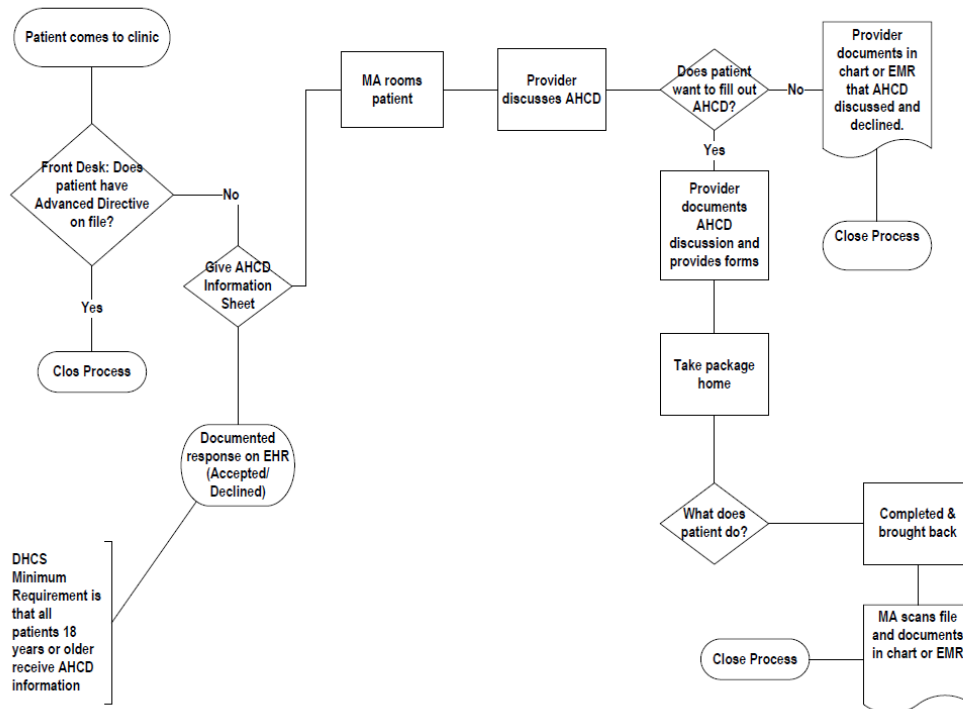


Primary care providers recognize the importance of advance care planning (ACP); however, barriers such as lack of time, training, and cultural beliefs can interfere with compliance. In 2019, 443 SFHP members' medical records reviewed from all participating medical groups found a 51% total compliance in evidence of AHCD documentation. To overcome barriers, two studies[1] produced evidence for recommending the following steps to address this gap:

1. Use information tools
2. Include other primary care staff such as registration or medical assistant personnel in the process
3. Use a systematized documentation approach in an Electronic Medical Record (EMR) with an alert

In the SFHP website, [MRR Documentation Resources_AHCD](#), the FSR Team has provided you some AHCD resources to assist with the first and second suggestions. You will find patient hand-outs that can be given to members by front-desk or registration personnel that can be part of a standardized process. We have provided you with this form (patient hand-out) in the following languages: English, Chinese, Russian, Spanish, and Tagalog. The form helps the member to become familiar with the concept of advanced care planning and cues up the next steps in a process that you have chosen for your clinic. You can also find in the SFHP MRR Resources online library an example simple policy, *Advance Health Care Directive Information Is Offered*, which includes an Advanced Health Care Directive Work Flow diagram. This work flow has been used successfully by other clinics.

Advanced Health Care Directive Work Flow



Last, work with your information technology professionals to ensure your EMR system is programmed according to your work flow and

National Healthcare Decisions Day is April 16!

Resources: <https://polst.org/other-resources/>

“**Provider Pearls**” are monthly articles written to help you prepare for the California Department of Health Care Services (DHCS) FSR review processes.

For any questions about the Facility Site Review or Medical Record Review processes or tools, please use our fsr@sfhp.org email. A facility site review team member will respond and/or reach out to you to help you with your inquiry.

[i] Glaudemans, J. J., de Jong, A. E., Onwuteaka Philipsen, B. D., Wind, J., & Willems, D. L. (2019). How do Dutch primary care providers overcome barriers to advance care planning with older people? A qualitative study. *Family practice*, 36(2), 219-224.; Donnelly, M. L. (2019). Increasing Advance directive utilization in Hardwick, VT.

3. Customer Service Training for Management and Office Staff

San Francisco Health Plan's goals include providing high quality care and exemplary service, and we want to help you be successful in meeting and exceeding patients' expectations. SFHP is hosting a trainer from Sullivan Luallin Group to provide two customer service workshops for front office and management staff working in SFHP's network:

- “Managing for Service Excellence” for managers and supervisors
 - Tuesday June 9, 2020 9 AM – 1 PM
- “YOU Make the Difference!” for medical office staff
 - Tuesday June 9, 2020 2 PM – 4 PM

While each is designed for a different audience – managers or office staff – they share a common objective of having participants learn simple service protocols to ensure consistent, outstanding service in every department and site.

Ready for your staff to join us? Have them sign up early! Find more information and registrations for these free workshops through the following [flyer](#). Please note that we have cancelled the April 7th training and will continue to hold the June 9th training.

3. Medical Records Review Periodic Audits and EPSDT

The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services are considered medically necessary when it is necessary to correct or ameliorate defects and physical and mental illnesses and conditions that are discovered by a screening service. Pediatric Primary Care Providers (PCPs) practice preventive services in accordance with current American Academy of Pediatrics (AAP) Bright Futures and US Preventive Task Force (USPSTF) recommendations. [Medi-Cal managed care health plans \(MCPs\) are required to ensure that EPSDT members have timely access to all medically necessary EPSDT services](#) no later than 60 calendar days following a preventative screening or other visit that identifies a need for follow-up.

Medical Record Reviews (MRRs) are conducted to review medical records for format, legal protocols, and documented evidence of the provision of preventive care and coordination and continuity of care services. The medical record provides legal proof that the patient received care. The MRR is one monitoring activity by SFHP to evaluate provider compliance with the EPSDT requirements. A MRR occurs every three years from a sample of medical records that are reviewed by nurse evaluators. The evaluator looks for documented evidence of appropriate interventions if any physical or mental illnesses or conditions are identified from pediatric examination.

The Facility Site Review (FSR) team has included information in the FSR section of the sfhp.org website that may help you prepare for the EPSDT requirements that will be evaluated during a medical record review.

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- [Getting Started: Implementing a Screening Process »](#)
- [AAP – Getting Started: Implementing a Screening Process »](#)
- [AAP – Behavioral and Emotional Screening Implementation »](#)
- [Pediatric Chart Review Guide »](#)
- [EPSDT and BHT Coverage for Medi-Cal Members Under 21 »](#)

Links:

DHCS APL 19-010 EPSDT: <https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2019/APL19-010.pdf>

DHCS APL 19-014 BHT: <https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2019/APL19-014.pdf>

AAP Bright Futures: <https://brightfutures.aap.org/Pages/default.aspx>

Recommendations for Preventive Pediatric Health Care: https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf

For any questions about the Facility Site Review or Medical Record Review processes or tools, please use our fsr@sfhp.org email. A facility site review team member will respond and/or reach out to you to help you with your inquiry.

4. Pharmacy Updates: SF Reproductive Justice Summit and Birth Control Prescribing

San Francisco Reproductive Justice Summit Postponed to Fall 2020

The summit has been postponed to a date TBD due to COVID-19 related health concerns. Organizers still plan to hold the event at Southeast Community Facility at CCSF, 1800 Oakdale Avenue, San Francisco. Registration is currently closed but for more information click [here](#).

Prescribe for a 12-month supply of birth control

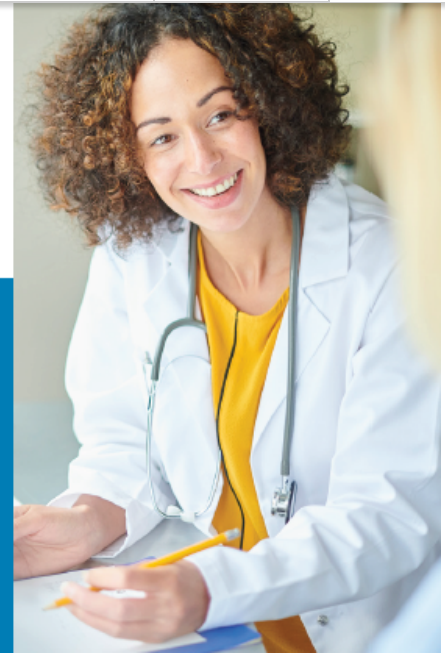
Dispensing a 12-month supply of birth control can improve adherence and reduce unintended outcomes (ie: pregnancies, abortions).

California Senate Bill 999 requires all health insurance plans to cover up to a 1 year supply of self-administered, hormonal contraceptives such as birth control pills, patches, and vaginal rings. To ensure your patients can receive a 12-month supply at one time, provide a prescription with adequate quantity or refills that equal a 1 year supply. Patients will need to request for the full 12-month supply at their pharmacy.

This is a great option for patients to minimize pharmacy visits during the COVID-19 shelter-in-place order.

5. Diabetes Prevention Program

Refer Your Patients at Risk for Type 2 Diabetes to SFHP's Diabetes Prevention Program



The Diabetes Prevention Program from San Francisco Health Plan and the YMCA is a proven lifestyle modification program that has been shown to prevent or delay type 2 diabetes in high-risk patients. The program helps participants reach a healthier weight and achieve an active lifestyle to reduce diabetes risk. The program is supported by the Centers for Disease Control and Prevention (CDC) and uses a CDC-approved curriculum.

Click [here](#) for the full flyer.

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.

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