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September 3rd, 2019

Our September Update includes information on:

1. Pharmacy Update: Influenza Season 2019-2020
2. Facility Site Review Provider Pearls
3. Expanded Chiropractic Benefit!
4. Maternal Mental Health: Beacon Health Options Provider Network
5. CCHCA Contact Information Update
6. Notice of Healthy Kids HMO Program Closure
7. SFHP has Partnered with Pondera Solutions
8. Access Surveys: Provider Appointment Availability Survey and Daytime Survey
9. Formulary and Prior Authorization (PA) Criteria Searchable Tool!

1. Pharmacy Update: Influenza Season 2019-2020

recommends that people get vaccinated by the end of October, but vaccination should continue to be offered throughout the entire flu season.

Flu vaccines for the influenza season 2019-2020 are now available at local pharmacies. Adults 19 years and older can receive many vaccines, including the flu vaccine, at their pharmacy covered under SFHP Medi-Cal Outpatient Pharmacy Benefit. A complete list of SFHP covered vaccines can be found [here](#).

Children 18 years and younger are eligible for vaccinations through California Vaccines for Children (VFC) Program. Contact VFC at 1(877) 243-8832 for more information.

2. Facility Site Review Provider Pearls



There are three Provider Pearls this month! As new California Department of Health Care Services (DHCS) 2019 Facility Site Review (FSR) Guidelines begin to disseminate throughout the network, we will take every opportunity to help providers and their staff prepare for these changes well before the July 1, 2020 effective date.

1. Emergency Medication/Anaphylactice Reaction Management

In the new Site Review Survey (SRS) Guidelines, staff must be prepared in the

5 Steps To Accurate Blood Pressure Measurement
SAN FRANCISCO HEALTH PLAN
Here for you

PREPARE • POSITION • MEASURE • DOCUMENT

STEP 1 Master your training and retraining checklists

STEP 2 Follow manufacturer's instructions for validated blood pressure devices that are periodically checked for proper functioning

STEP 3 Choose appropriately sized cuffs

STEP 4 Practice habits for every patient, every time:

- No talking, texting, watching phone
- Bladder is empty
- Back/feet supported
- Cuff on bare arm
- Arm supported at heart level
- Separate repeated measurements by at least one to two minutes
- Legs are uncrossed

STEP 5 Follow protocol for documentation of the procedure:

- Systemic/Diastolic
- Arm used
- Cuff size
- Position
- Other factors

Illustration notes: Back should be supported, Cuff should be placed on bare arm, No talking, texting, watching phone, Be sure arm is supported at heart level, Legs should be uncrossed, Make sure bladder is empty, Foot should be supported.

- [Anaphylactic Reaction](#)
- [Asthma Exacerbation](#)
- [Chest Pain](#)
- [Hypoglycemia](#)

DHCS requires the following conditions:

- Ensure all clinic staff have the ability to provide immediate care to patients on site until the patient is stable or Emergency Medical Service (EMS) has taken over care/treatment
- Ensure emergency medication and equipment is checked at least monthly
- Update the emergency medication dosage chart per new 2019 DHCS FSR Guidelines
- Ensure there is an emergency phone number list that is dated and updated annually

Review this FSR resource tool, [DHCS Medical Emergency Response Guidelines for PCP Clinic – 2019](#), which includes an overview of the DHCS 2019 Medical Emergency Guidelines, a medical emergency monthly supply log, a Medication Dosage Chart, an Emergency Contact List, an example of a log to track staff drills for responding to medical emergencies, and an example of an onsite procedure for providing immediate emergency medical care. Please use any or all of the information in this tool to help you update your clinic workflow to align with the new Guidelines. You may find the new Dosage Chart especially useful as it includes the medications for the newly added medical emergencies (asthma exacerbation, chest pain, and hypoglycemia) per DHCS FSR specifications.

2. USPSTF Draft Recommendation: Screening for Illicit Drug Use, Including Nonmedical Use of Prescription Drugs

For the adult population, USPSTF recommends screening for illicit drug use in adults age 18 years or older. In the DHCS FSR medical record review (MRR), the nurse evaluator will assess illicit drug screening through the completion of DHCS's Staying Healthy Assessment (SHA) to fulfill the Initial Health Education Behavioral Assessment (IHEBA) requirement. This is an important criteria for the FSR nurse to evaluate given the USPSTF statistics which reports that approximately 7.5 million persons age 12 years or older either abuse or have a dependence on illicit drugs. In the SHA, the relevant screening question for the patient is, "Do you use any drugs or medicines to help you sleep, relax, calm down, feel better, or lose weight?". This screening question may assist the provider with an opportunity to offer or refer the patient

3. [Blood Pressure Measurement Toolkit](#)

At San Francisco Health Plan (SFHP) our mission is to provide exemplary service and support to our members, participants, purchasers, physicians, and other health care providers, and each other. Relying on a national initiative, Target: BP™, developed by the American Heart Association (AHA) and the American Medical Association (AMA), SFHP is offering a Blood Pressure Measurement Toolkit focused on one of the critical areas, Accurate Blood Pressure Measurement.

This practical, evidence-based toolkit has been prepared to guide clinical practices with a simplified concept for improving blood pressure measurement with a 5-step toolkit. You may access the toolkit from the sfhp.org website by following the path, Provider Resources → Improving Quality → Blood Pressure Toolkit, or directly [here](#).

Each step of the process improvement plan is provided, including a poster that you can print to post in staff areas. When in the website, take a moment to listen to an introductory video by our Medical Director, Jim Glauber, MD, and then download the Toolkit and Poster to begin your own blood pressure measurement improvement process! We are excited to share this toolkit and if you have any feedback, please send to [Jackie Hägg](#).



If you have any questions, your FSR team is here to help. Please find contact information below.

“**Provider Pearls**” are monthly articles written 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

quality standards in office practice operations.

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.

3. Expanded Chiropractic Benefit!

As of September 1, 2019, the SFHP chiropractic benefit has expanded to cover:

- Medi-Cal members in any Medical Group
- Medi-Cal members 18 years of age (no referral needed)
- Medi-Cal members who do not have Medicare part B Coverage
- Spinal manipulation services for diagnoses of back and neck pain only

This expanded chiropractic benefit is accessed by members directly through American Specialty Health (ASH Plans of California). Eligible members have access to ASH Plans of California's network of participating providers here in San Francisco and the immediate surrounding counties. Participating chiropractors can be found by calling ASH Plans of California at 1(800) 678-9133 or 1(877) 710-2746 TDD/TTY or using the provider directory [online](#).

San Francisco Health Plan is also available to answer questions about the Medi-Cal chiropractic benefits by contacting SFHP's Provider Relations Department at **1(415) 547-7818 ext. 7084** or emailing [Provider Relations](#).

4. Maternal Mental Health: Beacon Health Options Provider Network

Maternal depression is the most common complication of pregnancy: one in five, or 20%, of California

conditions, including women of color and low-income women. Untreated and undetected perinatal mental health conditions can lead to long-term poor emotional, physical and social health outcomes for both the mother and child (1-2).

Early connection to services is critical and perinatal mental health conditions are treatable with the appropriate support. Beacon Health Options manages the mild to moderate behavioral health benefit for SFHP. There are 45 mental health providers in the Beacon Health Options network who specialize in treating perinatal mental health conditions with a diverse language capacity, including: English, Spanish, Cantonese, Mandarin, Armenian, Laotian, Thai, Farsi, Hindi, Urdu, Portuguese, Arabic, Russian, Vietnamese, Japanese, Ilocano, Tagalog, Hebrew, Russian, Punjabi and Hungarian.

You can refer your perinatal patients directly to the Beacon Health Options Care Management Program using the [Care Management Referral Form](#). The Beacon Care Management team will offer telephonic care coordination and navigation support to members seeking connection to mental health services. Members and providers can also call Beacon's toll-free access line directly to get connected to services: 1(855) 371-8117.

Beacon also provides PCPs clinical decision-making support with a licensed psychiatrist. PCP Decision Support is a telephone call between a Beacon psychiatrist and a member's PCP to assist with diagnostic clarification or prescribing psychiatric medication when treating an SFHP member. This resource can be accessed by completing the [PCP Referral Form](#) and selecting the "PCP Decision Support" option. Please contact Beacon at: 1(855) 371- 8117 or provider.inquiry@beaconhealthoptions.com for additional information or questions.

References:

1. [Innovation in Maternal Depression and Anxiety: Medicaid Initiatives in California and Nationwide \(2018\)](#).

https://www.medicaidinnovation.org/_images/content/2018-IMI-Medicaid-Maternal-Depression-Anxiety-Report.pdf

5. CCHCA Contact Information Update

Effective August 1, 2019 the management services organization for SFHP members assigned to Chinese Community Health Care Association (CCHCA) has changed to NEMS MSO for professional claims and all UM decisions.

Contact information will change as follows:

Professional Claims:

Phone: 1(415) 352-5186 (option 2)

Fax: 1-866-930-2290

Mail: ATTN: CCHCA Claims Department

PO Box 2118

San Leandro, CA 94577

Utilization Management/Prior Authorization:

Phone: 1(415) 352-5186 (option 1)

Fax: 1(415) 398-2895

The contact information for Facility & DME claims will remain as follows:

Phone: 1(415) 955-8812

Fax: 1(415) 955-8812

Mail: ATTN CCHP Claims Department

445 Grant Ave, Suite 700

San Francisco, CA 94108

As a result of the Governor's 2019-20 Budget, the San Francisco Health Plan's Healthy Kids HMO program will close effective January 1, 2020.

- The Governor's Budget requires the Department of Health Care Services (DHCS) transition the County Children's Health Initiative Program (CCHIP) to Medi-Cal Managed Care.
- Approximately 2,300 SFHP members will transition from the Healthy Kids HMO program to Medi-Cal Managed Care on October 1, 2019. They will receive full health benefits, including:
 - Medical visits
 - Prescription drugs
 - Vision services
 - Mental health services
 - Other behavioral health services
- CCHIP members enrolled in Healthy Kids HMO Program prior to October 1, 2019 will remain with San Francisco Health Plan.
- The Medi-Cal Dental program will provide dental benefits.
- Please find attached the following notices regarding the CCHIP program transition:
 - [DHCS Member FAQs](#)
 - [DHCS 60 Day Notice](#)
- Thirteen (13) HK HMO members are not eligible for the transition. These members will remain in the HK HMO program through December 31, 2019.

If you have any questions about this change please contact SFHP Provider Relations at: provider.relations@sfhp.org or 1(415) 547-7818 ext. 7084.

7. SFHP has Partnered with Pondera Solutions

In an effort to enhance the level of service and protection to San Francisco Health Plan providers and members, SFHP partnered with the software vendor Pondera Solutions. Pondera uses advanced analytics, predictive algorithms, and machine learning to analyze multiple data sources to combat fraud, waste, and abuse. In conjunction with their dedicated special investigations unit, Pondera combines

travel patterns.

Analysis of SFHP's data began on August 1st; the goal is to facilitate detection of potential fraud, waste, and abuse and maintain compliance with State and Federal regulatory and statutory requirements. SFHP will begin identifying significant opportunities for configuration fixes, provider education, adjustments for underpayments and recovery of overpayments.

If you have any questions about SFHP's Anti-Fraud Program, please contact Crystal Garcia, Compliance Program Supervisor, at 1(415) 615-5619 or cgarcia@sfhp.org. Reports of fraud, waste, or abuse may be submitted confidentially and anonymously by calling 1(800) 461-9330 or online to: convercent.com/report.

8. Access Surveys: Provider Appointment Availability Survey and Daytime Survey

Under the Department of Managed Health Care (DMHC) Timely Access Regulations, health plans are required to demonstrate that urgent and routine appointments are offered within specified time frames. To meet these requirements, SFHP administers the 2019 Appointment Availability Survey from September 3rd until December 31st 2019. The survey, delivered by fax (from 973-996-4562) or email (from SutherlandPaasTeam@sutherlandglobal.com), will ask provider offices to identify individual provider's next available appointment (date/time) for various types of nonemergency care. Fax and emailed surveys that are not responded to in five business days will be followed by a phone survey. Please inform your frontline staff who answer the phone that they may be receiving this call if an email or fax survey is not responded to and that nonparticipation will be deemed noncompliant with the Timely Access Regulations, per state requirements.

Please refer to this [informative flyer](#) that can be shared with your team as well as an [access one-pager](#) that clarifies the timely access regulations. Providers can also find more information about survey process and requirements on the DMHC website located [here](#). For any questions about the Timely Access




9. Formulary and Prior Authorization (PA) Criteria Searchable Tool!

Effective April 2019, San Francisco Health Plan updated its formulary Search tool for providers on our website to directly link to the PA criteria for any drug that requires prior authorization. SFHP formularies are available in searchable and printable formats and can be accessed [here](#). For any drug with specific criteria for use, those criteria are now linked under the “Clinical Criteria” symbol pictured below:

Search Results

[Start Over](#)

Selection

SFHP MediCal

If you have questions about prescription drug coverage, please call:

- Member Services Voice: 1-800-288-5555 ☎
- Member Services TTY: 1-888-883-7347 ☎, local callers please use 1-415-547-7830 ☎.

SFHP uses general criteria for medications without specific criteria, and for restrictions such as age and quantity limits. **For general criteria for these medications and restrictions, please [click here](#).**

Drug Search: sofosbuvir 400 mg-velpatasvir 100 mg tablet
2 drug(s) found

To view other medications in a therapeutic class, click any class hyperlink in your search results.

Results	Brand Name	Therapeutic Class	Dose/Strength	Status	Notes & Restrictions
	sofosbuvir 400 mg-velpatasvir 100 mg tablet	ANTI-INFECTIVE AGENTS <i>hcv polymerase inhibitor antivirals</i>	TABLET 400-100 mg	PA	Clinical Criteria
	sofosbuvir 400 mg-velpatasvir 100 mg tablet	ANTI-INFECTIVE AGENTS <i>hcv replication complex inhibitors</i>	TABLET 400-100 mg	PA	Clinical Criteria

Definition of Status

Icon	Status	Definition
PA	Prior Authorization	

Brand Name: sofosbuvir 400 mg-velpatasvir 100 mg tablet
Generic Name:
Dosage/Strength: tablet 400-100 mg
Status: Formulary Specialty Drug, Prior Authorization required

Details: To view the SFHP clinical criteria used to evaluate a request for this medication click [HERE](#)

Hepatitis C (51).pdf - Adobe Acrobat Reader DC

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HEPATITIS C

Standard/Therapeutic Class: Antiviral/Hepatitis C Virus- NS5A Replication Complex Inhibitor; NS3/4A Serine Protease Inhibitor; Nucleoside Analog; NS5B Polymerase Inhibitor; NS5B Polymerase and NS5A Inhibitor Combination; NS5A and NS3/4A Inhibitor Combination; NS5B Polymerase and NS5A Inhibitor Combination; NS5A, NS3/4A, Nucleoside NS5B Inhibitor Combination; Hepatitis C Treatment Agents

Formulary Status:

Formulary: ribavirin 200mg capsules and tablets

Formulary, PA required:

- Zepeser® (elbasvir/grazoprevir)
- Iedipasvir/sofosbuvir (Harvoni®)
- Mavyret® (glecaprevir/pasoprevir)
- Vosevi™ (sofosbuvir/velpatasvir/voxilaprevir)
- sofosbuvir/velpatasvir (Epclusa®)
- peginterferon Alfa-2a (Pegasys®, Pegasis Prodisol®)
- ribavirin 400 mg tab
- ribavirin 500 mg tab
- ribavirin 200-400 mg tab/800-400 mg tab (Ribasol®)

Non-formulary:

- Daklinza® (daclatasvir)
- Sovaldis® (sofosbuvir)
- Technivie® (ombitasvir/paritaprevir/ritonavir)
- Viremia Pak® (ombitasvir/paritaprevir/ritonavir and dasabuvir)

Coverage Duration: Full course of therapy (8, 12, 16, or 24 weeks depending on therapy)

NOTE: DHCS Hepatitis C Treatment Policy states that therapy will not be restarted in cases where it was discontinued due to non-compliance. SFHP will review such requests on a case-by-case basis


Diagnosis Considered for Coverage:

- Hepatitis C Viral Infection (HCV)

Off-label uses: medically accepted indications are defined using the following sources: American Hospital Formulary Service/Drug Information (AHFS-DR), Toxic Health Analysis/Micromedex DrugDEX (DrugDEX), National Comprehensive Cancer Network (NCCN) Drugs and Biologics Compendium, Wolters Kluwer Lexi-Comp, and Elsevier/Standard Clinical Pharmacology and/or positive results from two peer-reviewed published studies

Prescribers Restriction:

General criteria for other non-formulary medications without specific criteria, and for restrictions such as



Drug Formulary

You may search the **SFHP Medi-Cal** Drug Formulary in several ways:

- You can use the alphabetical list to search by the first letter of your medication.
- You can search by typing part of the generic (chemical) or brand (trade) names.
- You can search by selecting the therapeutic class of the medication you are looking for.

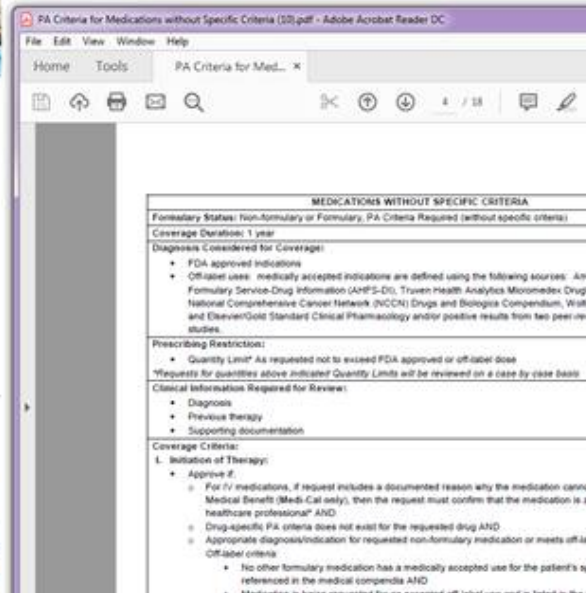
If you have questions about **SFHP Medi-Cal** prescription drug coverage, please call:

- Member Services Voice: 1-800-288-5555 ☎
- Member Services TTY: 1-888-883-7347 ☎, local callers please use 1-415-547-7830 ☎

SFHP uses general criteria for medications without specific criteria, and for restrictions such as age and quantity limits. **For general criteria for these medications and restrictions, please click here.**

[Start Over](#)

The medication name you have entered, *apriso*, is not listed on the drug list.



PA Criteria for Medications without Specific Criteria (10).pdf - Adobe Acrobat Reader DC

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Diagnosis Considered for Coverage:

- FDA approved indications
- Off-label uses: medically accepted indications are defined using the following sources: Amer Formulary Service-Drug Information (AHFS-Dr), Truven Health Analytics Micromedex DrugDI National Comprehensive Cancer Network (NCCN) Drugs and Biologics Compendium, Waller and Elsevier/Gold Standard Clinical Pharmacology and/or positive results from two peer review studies.

Prescribing Restriction:

- Quantity Limit* As requested not to exceed FDA approved or off-label dose

*Requests for quantities above indicated Quantity Limits will be reviewed on a case by case basis

Clinical Information Required for Review:

- Diagnosis
- Previous therapy
- Supporting documentation

Coverage Criteria:

I. Initiation of Therapy:

- Approve if:
 - For IV medications, if request includes a documented reason why the medication cannot Medical Benefit (Medi-Cal only), then the request must confirm that the medication is an healthcare professional* AND
 - Drug-specific PA criteria does not exist for the requested drug AND
 - Appropriate diagnosis/indication for requested non-formulary medication or meets off-label criteria
 - No other formulary medication has a medically accepted use for the patient's spe referenced in the medical compendia AND
 - Medication is being requested for an accepted off-label use and is listed in the ut

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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