



January 4th, 2023

UPDATES INCLUDE:

- FSR Provider Pearl: MRR Pediatric Preventive Criteria: Suicide Risk Screening
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- Vaccine Storage Survey
- Balance Billing Reminder

FSR Provider Pearl: MRR Pediatric Preventive Criteria: Suicide Risk Screening



Suicide is the 2nd leading cause of death in the United States for those ages 10-14 and 25-34 ([CDC, 2022](#)). Pediatric primary care providers (PCP) play a vital role in identifying youth at suicide risk and providing appropriate care and support. Per the California Department of Health Care Services (DHCS), APL 22-017 and updated Facility Site Review and Medical Record standards and tools, suicide risk screening is a new criterion in the pediatric preventive section.

The 2022 American Academy of Pediatrics recommends the following ages be screened for suicide risk:

1. Youth ages 12+: Universal screening
2. Youth ages 8-11: Screen when clinically indicated
3. Youth under age 8: Screening not indicated. Assess for suicidal thoughts/behaviors if warning signs are present

Validated screening tools are important tools for providers and clinical staff to determine suicide risk. During the MRR process, the FSR nurse reviewer will look for evidence of completed screenings, such as completed validated screening tools, documentation of the screening tool and scores, and documentation of follow-up interventions for a positive screen, if indicated.

The following are examples of validated screening tools ([AAP, 2022](#)):

1. [Patient Health Questionnaire – 9 Adolescent Version \(PHQ-9A\)](#)
2. [Ask Suicide-Screening Questions \(ASQ\)](#)
3. [Suicide Behavior Questionnaire-Revised \(SBQ-R\)](#)
4. [Columbia Suicide Severity Rating Scale \(C-SSRS\) – Triage Version](#)
5. [Patient Safety Screener – 3 \(PSS-3\)](#)

If risk is identified using a validated screening tool, further assessment is required to help the provider determine follow-up or need for immediate intervention. Here are evidence-based assessment tools.

1. [Columbia Suicide Severity Rating Scale \(C-SSRS\)—Full Version](#)
2. [Ask Suicide-Screening Questions Brief Suicide Safety Assessment \(ASQ BSSA\)](#)
3. [Suicide Assessment Five-Step Evaluation and Triage \(SAFE-T\)](#)

“**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@sfhfp.org email. A facility site review team member will respond and/or reach out to you to help you with your inquiry.

Pharmacy Updates: Medi-cal Rx Reinstatements

Medi-Cal Rx: Reinstatement of Prior Authorization for Select Drug Classes (Phase II Wave 1)

Effective January 20, 2023, the Department of Healthcare Services (DHCS) is reinstating prior authorization (PA) requirements for select drug classes for Medi-Cal Rx claims, for new starts only. Specifically, DHCS is reinstating PA requirements for the following classes:

Androgens	Erythromycins	Penicillins
Anesthetic Local Topicals	Estrogens	Progesterone
Antiarthritics	Fat Soluble Vitamins	Streptomycins
Antifungals	Folic Acid Preparations	Sulfonamides
Antimalarials	General Antibacterials and Antiseptics	Systemic Contraceptives
Antiparasitics	Glucocorticoids	Tuberculosis Preparations
Antiparkinson	Iodine Therapy	Tetracyclines
Anti-Ulcer Preps/Gastrointestinal Preps	Multivitamins	Thyroid Preps
Antivirals	Muscle Relaxants	Topical Nasal and Otic Preparations
Biologicals	Non-Opioid Analgesics	Urinary Antibacterials
Cephalosporins	Ophthalmic Preparations	Vitamin K

Impacted drugs are now flagged (“P2W1”) on the Medi-Cal Rx Approved NDC list on the [Forms & Information page](#) under Covered Products Lists.

This reinstatement applies only to new starts; members who are currently (within the 15-month look-back) taking medications in the above classes can continue without a PA. Members 21 years and younger are also exempt from PA requirement for these classes. Preemptive PA requests for new starts on these classes will not be accepted prior to 1/20/23.

For additional details, see the [30-day notice](#) for this reinstatement and other bulletins on the Medi-Cal Rx [Bulletins & News page](#). For further information on the [Reinstatement Plan](#), please visit the DHCS Medi-Cal Rx Reinstatement tab on the [Education & Outreach page](#).

Medi-Cal Rx Reinstatement: Retirement of Transition Logic (Phase III)

Starting March 24, 2023, Medi-Cal Rx will initiate Phase III of reinstatement by initiating the transition policy lifts. During Phase III, transition policy lifts will be made in a phased approach by standard therapeutic drug class and only impact members 22 years and older. Enteral nutrition is also exempt from Phase III. Medi-Cal Rx will communicate the impacted drug classes for each transition lift 30 days prior to implementation via news bulletin. Medi-Cal Rx will **not** accept preemptive PA requests for Phase III prior to the completion of Phase II (estimated February 2023).

For more information, see the [90-day notice](#) for this reinstatement and other bulletins on the Medi-Cal Rx [Bulletins & News page](#). For further information on the [Reinstatement Plan](#), please visit the DHCS Medi-Cal Rx Reinstatement tab on the [Education & Outreach page](#).

Vaccine Storage Survey

Greetings Primary Care Providers,

San Francisco Health Plan’s Facility Site Review (FSR) team is assessing the network’s use of vaccine storage units.

Clinic Managers: If you haven’t already, please take a moment to complete this brief (~2-min) online [Forms Survey](#) regarding vaccine storage units at your clinic. You can also access the survey by phone or tablet using the QR code below.

If you have additional concerns, questions, or need more information about the Facility Site Review process, please reach out to us at FSR@sfhp.org.

Thank you for serving our members! We look forward to seeing you at your next FSR!

Sincerely,
SFHP FSR Team



Balance Billing Reminder

This is a reminder to all SFHP providers that balance billing Medi-Cal Members is prohibited by federal and state law. Medi-Cal members should not pay for physician visits and other medical care when they receive covered services from a provider in their provider network. This means Members cannot be charged for co-pays, co-insurance, or deductibles. This applies to both Medicare and Medi-Cal providers.

Please contact Provider Relations at 1(415) 547-7818 ext 7084 if you have any questions.

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