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# **October 1st, 2019**

Our October Update includes information on:

- 1. Healthy Kids HMO members are becoming Medi-Cal members TODAY
- 2. Pharmacy Update: Medication Adherence, Concomitant Anticholinergic, and Antipsychotic Use
- 3. Facility Site Review Provider Pearls
- 4. Expanded Chiropractic Benefit!
- 5. CHCF: SB 1004 Resource Center
- 6. Access Surveys: Provider Appointment Availability Survey and Daytime Survey

## 1. Healthy Kids HMO members are becoming Medi-Cal members TODAY

County Children's Health Initiative Program (CCHIP) will transition to Medi-Cal Managed Care. **Members will get a new SFHP ID. If you have any doubt about a member's coverage, please don't hesitate to call our Customer Service Team**.

The Healthy Kids HMO Program will close to new enrollment effective September 20, 2019 and end on January 1, 2020.

Important information about the County Children's Health Initiative Program (CCHIP) transition to Medi-Cal Managed Care:

- 1. Approximately 2,300 children enrolled in Healthy Kids HMO Program will move to Medi-Cal Managed Care and receive full health insurance benefits, including:
  - a. Medical visits
  - b. Prescription drugs
  - c. Vision services
  - d. Mental health services
  - e. Other behavioral health services
- 2. CCHIP members enrolled in Healthy Kids HMO Program prior to October 1, 2019 will remain with San Francisco Health Plan (SFHP).
- 3. New ID Cards:
  - a. Within 30 days of October 1, 2019, members will get:
    - i. Medi-Cal Beneficiary Identification Card (BIC) in the mail.
    - ii. A new health plan card from San Francisco Health Plan, showing the new line of business.
  - b. Members should be advised to bring both cards when they visit their doctor.
  - c. If members do not receive their BIC or health plan card, call 1-833-91C-CHIP (1-833-912-2447).
- 4. The Medi-Cal Dental program will provide dental benefits.
- 5. Please find attached the following notices regarding the CCHIP program transition:

c. DHCS Dental Notice

## 2. Pharmacy Update: Medication Adherence, Concomitant Anticholinergic, and Antipsychotic Use

#### Improving Medication Adherence

Prescribers have a key role in supporting our member's care and treatment. Most prescriptions for chronic condition medications can be written for a 90 day supply and oral contraceptives are covered for a 12 month supply. Prescribers can contact their local pharmacies for available adherence options that could help their members. Some pharmacies offer text alerts for refill reminders or can repackage medications into custom blister pack calendars organized by week, day, and even multiple times per day (breakfast, lunch, and dinner).

#### Concomitant Anticholinergic and Antipsychotic Use

Anti-cholinergic medications, including Benztropine and Trihexyphenidyl, are often prescribed to prevent or treat antipsychotic-induced extrapyramidal symptoms (EPS). <u>This bulletin</u> recommends against prophylactic use of anticholinergic medications, and recommends that continued therapy should be re-evaluated in patients with controlled symptoms every three months. The long term use of concomitant anticholinergics and antipsychotics can result in adverse effects including cognitive impairment and worsening of tardive dyskinesia, especially with persons 65 years of age or older.

# 3. Facility Site Review Provider Pearls

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As new California Department of Health Care Services (DHCS) 2019 Facility

Site Review (FSR) Guidelines begin to disseminate throughout the network, SFHP is taking every opportunity to help providers and their staff prepare for these changes well before the July 1, 2020 effective date.

This month's Provider Pearl is about Pediatric Dental Health. Dental caries is the most common chronic condition among children in the US (Source). In 2019, 166 SFHP Pediatric Medical Records were reviewed using the 2012 DHCS Medical Record Review (MRR) tool; and 87% of patients had a dental assessment. The 2019 DHCS FSR Guidelines will require Primary Care Providers to document additional services or information regarding dental health or document patient or guardian declination of services.

Dental assessment in the new MRR tool will be assessed in three (3) parts

- a) Fluoride Varnish
- b) Fluoride Supplementation
- c) Dental Home

In addition to healthy dental habits such as brushing, flossing regularly, and eating a healthy diet, fluoride varnish treatments can help prevent tooth decay (<u>Source</u>). Primary Care Providers may apply fluoride varnish to all children every 3-6 months from teeth emergence through age 5.

Fluoride supplements may be prescribed for those at a high risk for tooth decay and have low access to fluoridated drinking water at home. Providers are also

about their access to fluoridated tap water at home.

Lastly, The American Academy of Pediatric Dentistry (AAPD) encourages both parents and health care providers to help every child to establish a dental home by 12 months of age (<u>Source</u>).

#### Additional Resources

1. <u>CHDP Dental Training: Fluoride Varnish</u>. This tool includes a training, a practicum for applying fluoride varnish, how to purchase varnish, and key information on how to bill for the service.

2. <u>InsureKidsNow.gov</u>. This tool allows you and your office staff to generate a list of dental providers in your area, including those open to new patients and accepting Denti-Cal Medi-Cal Dental Program.

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 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.

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

## 4. Expanded Chiropractic Benefit!

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		Medi-Cal members in any Medical Group		
		<ul> <li>Medi-Cal members 18 years of age (no referral needed)</li> </ul>		
		<ul> <li>Medi-Cal members who do not have Medicare part B Coverage</li> </ul>		

• 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 <u>online.</u>

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 <u>Provider Relations</u>.

# 5. CHCF: SB 1004 Resource Center

Senate Bill 1004 (SB 1004) is the California law that requires Medi-Cal managed care plans to provide access to palliative care. Explore CHCF's collection of tools and resources aimed at helping organizations implement, sustain, and improve SB 1004 programs.

For more information click here.

6. Access Surveys: Provider Appointment Availability Survey and

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 Regulations or the Appointment Availability Survey please reach out to SFHP's Provider Relations Department at 1(415) 547-7818 ext. 7084 or through email at provider.relations@sfhp.org.

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

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