



Provider Update

October 1, 2020

UPDATES INCLUDE:

- Access Survey: Provider Appointment Availability Survey
- Short Survey on Telehealth Training or Resource Needs
- Diabetes Prevention Program
- FSR Provider Pearl: Abuse Reporting Training
- Pharmacy Updates: Diabetes Treatment, Rx transition to Medi-Cal Rx (Fee-for-Service)
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- Medi-Cal EOC: No Referral Required for OB-GYN Services

Access Survey: Provider Appointment Availability 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 2020 Appointment Availability Survey from August 17th 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 non-emergency care. Fax and emailed surveys that are not responded to in five business days will be followed by a phone survey. Please inform your front-line staff who answer the phone that they may be receiving this call if an email or fax survey is not responded to and that non-participation will be deemed non-compliant with the Timely Access Regulations, per state requirements.

Please refer to the [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@sfhpa.org.

Short Survey on Telehealth Training or Resource Needs

We know there are many training opportunities for providers, medical groups, clinics and hospitals to navigate our new virtual care environment. Please tell us about any barriers you face and let us know if there are additional training and information needs you or your team might have.

[Take the Survey Here](#)



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.



Read the full flyer [here](#).

FSR Provider Pearl: Abuse Reporting Training



As new California Department of Health Care Services (DHCS) 2020 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.

This month's Provider Pearl is about abuse reporting training. Of the 44 facility site reviews conducted from 2019 to present, only 75% (33) of sites had documentation of child, elder, and domestic abuse reporting training completed by staff.

It is important for all site personnel to have specific knowledge of local reporting requirements, agencies, procedures, and know where to locate information on site and

how to use information.

1. Employee's name
2. Job titles
3. Training date(s)
4. Type of training (in-service, new staff orientation, external)
5. Contents of training sessions
6. Names/qualifications of trainers

Please find sample policies for child, elder, domestic violence reporting. Information regarding local reporting (San Francisco and San Mateo Counties) available in each sample policy. These policies, along with the evidence of staff training logs, and other FSR resources can be found on the [SFHP Website](#).

Resource 1: [Personnel Training: Child Abuse Reporting](#)

Resource 2: [Personnel Training: Elder Abuse Reporting](#)

Resource 3: [Personnel Training: Domestic Violence Reporting](#)

Resource 4: [Evidence of Staff Training: Personnel Training Log](#)

“**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 jhagg@sfhp.org or by her direct line at 1(415) 615-5637.

Pharmacy Updates: Diabetes Treatment, Rx transition to Medi-Cal Rx (Fee-for-Service)

Diabetes Treatment Updates

DHCS has released a [clinical review on the standards of care for treatment of type 2 diabetes](#). The ADA has recently updated their [diabetes treatment guidelines](#). The first line treatment recommendation by the ADA is still metformin, along with lifestyle modifications (i.e. diet, exercise, etc.). Updates to adjunctive recommendations include citing more updated evidence to support the benefit of SGLT2 inhibitors and GLP-1 agonists in patients with cardiovascular disease (CVD), heart failure, and increased risk of developing CVD.

SGLT2i: dapagliflozin, empagliflozin, and canagliflozin

GLP-1RA: semaglutide and dulaglutide

A retrospective cohort study for 2019-2020 evaluating the use of pharmacotherapy in type 2 diabetes in the Medi-Cal population found differences between the Fee for Service (FFS) and Managed Care Plan (MCP) beneficiaries. While the rate of metformin monotherapy prescribing was equivalent between FFS and Medi-Cal, about double of the proportion in the FFS population (10%) vs MCP (5%) used metformin + SGLT2i. Meanwhile, a slightly higher percentage of people used metformin with a GLP-1RA in the MCP population vs the FFS population.

Rx Transition to Medi-Cal Rx (Fee-For-Service)

Effective January 1, 2021, the pharmacy benefit for Medi-Cal members across the state including SFHP members is transitioning to fee-for-service from managed care. The new state-wide system used to administer pharmacy benefits is known as Medi-Cal Rx. SFHP will continue to manage medical and institutional care for Medi-Cal members, including medications administered in these settings.

Providers can now register to access the Medi-Cal Rx provider portal at the main Medi-Cal Rx website: <https://medi-calrx.dhcs.ca.gov/home/>. Click on the Provider Portal button to learn more and register.

UM Updates: Prior Authorization (PA) Requirement Changes

SFHP has updated some Prior Authorization (PA) requirements. The following changes will be effective 10/1/20:

Code Service Code Description

No PA ever required

L0120 NON-ADJUSTABLE FLEXIBLE CERVICAL COLLAR
L0174 SEMI-RIGID CERVICAL COLLAR

No PA required if service is done within the member's CHN or UCSF medical group

57454 BX/CURETT OF CERVIX W/SCOPE
57455 BIOPSY OF CERVIX W/SCOPE
57460 COLPOSCOPY WITH LEEP
57461 CONZ OF CERVIX W/SCOPE LEEP
E0720 TENS DEVICE 2 LEAD LOCALIZED STIM
E0730 TENS DEVICE 4/> LEADS MX NERVE STIM
A4595 ELEC STIM SUPPLIES 2 LEAD PER MONTH
64405 N BLOCK INJ OCCIPITAL
64418 N BLOCK INJ SUPRASCAPULAR
64425 N BLOCK INJ ILIO-ING/HYPOGI
64430 N BLOCK INJ PUDENDAL
64445 N BLOCK INJ SCIATIC SNG
64454 INJECTION AA&/STRD GENICULAR NRV BRANCHES W/IMG (knee)
64451 INJECTION AA&/STRD NERVES NRV TG SI JOINT W/IMG
64479 INJ FORAMEN EPIDURAL C/T
64480 INJ FORAMEN EPIDURAL ADD-ON
64483 INJ FORAMEN EPIDURAL L/S
64484 INJ FORAMEN EPIDURAL ADD-ON
20551 INJ TENDON ORIGIN/INSERTION
20552 INJ TRIGGER POINT 1/2 MUSCL
20553 INJECT TRIGGER POINTS => 3
20560 NEEDLE INSERTION W/O INJECTION 1 OR 2 MUSCLES
20561 NEEDLE INSERTION W/O INJECTION 3 OR MORE MUSCLES

PA requirement changes are reflected in the Code Lookup tool, updated at the beginning of each month. Please use the [Lookup tool](#) to answer any PA requirement questions.

Contact the Utilization Management, Prior Authorizations team, if you have additional questions: 1(415) 547-7818 x7080

DMHC Extends Telehealth Guidance

- APLs 20-009 and 20-013 will remain in effect for the duration of the COVID-19 state of emergency or until further notice from DMHC.
- Although providers might render services via telehealth from home, health plans are not to list provider's home address as their practice address in directories.
- All delegated entities must comply with APLs 20-009, 20-013, and 20-032.

More information on telehealth during COVID-19 can be found within this helpful FAQ:

[Delivery of Services via Telehealth During the COVID-19 State of Emergency Frequently Asked Questions](#)

Medi-Cal EOC: No Referral Required for OB-GYN Services

A prior authorization (pre-approval) is not required to receive OB-GYN services.

A member does not need a referral for the following types of service:

- PCP visits
- OB/GYN visits
- Urgent or emergency care visits
- Adult sensitive services, such as sexual assault care
- Family planning services
- HIV testing and counseling (only minors 12 years or older)

Please do not hesitate to contact Provider Relations at
1(415) 547-7818 ext. **7084** or Provider.Relations@sfhp.org

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to SFHP's Monthly Provider Update, please visit our [Provider Update archive page](#).
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