

Progress Notes

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L.A. Care Kicks Off Recuperative Care Pilot With National Health Foundation

L.A. Care Health Plan has kicked off a new pilot, leasing 16 beds at the National Health Foundation’s (NHF) new Pico-Union Recuperative Care facility. Recuperative care programs provide immediate housing, on-site medical supervision, case management and supportive social services for patients experiencing homelessness who are transitioning out of an acute-care hospital. With the increase of homelessness in Los Angeles County, recuperative beds fill a gap on the journey to permanent housing for vulnerable individuals who need a safe place to heal after a hospitalization.

“It is our hope that by offering these beds to a limited number of L.A. Care members, we will be able to illustrate the positive impact on health outcomes. If we can show a cost-savings through decreased readmissions, maybe the state will consider offering funding for these beds,” said John Baackes, L.A. Care CEO.

The Los Angeles Homeless Services Authority released a report recently showing L.A. County has large gaps in nearly every housing intervention, including recuperative care. “Our partnership with L.A. Care is truly one-of-a-kind. As the first health plan to lease our recuperative care beds, they represent a progressive organization that understands and appreciates the connection between housing and health,” said Kelly Bruno, NHF President and CEO.



“We are so happy for the support and for validating recuperative care in the continuum. Ultimately, it’s a win-win for all; recuperative care will save taxpayer dollars, and patients are more likely to find permanent housing.”

This new pilot is a continuation of a partnership between L.A. Care and NHF that goes back more than a decade. Earlier this year, L.A. Care awarded NHF a \$150,000 grant to help develop the Pico-Union facility. In 2007, L.A. Care awarded a \$500,000 grant to the foundation for another recuperative care infrastructure project in downtown Los Angeles.

Inside:

Mental Health Parity and What It Means for Providers	2	CDC Provides In-Season Estimates of Flu Illnesses, Medical Visits, and Hospitalizations	6
Get to Know L.A. Care’s Registered Dietitians	4	Accessing Interpreting Services Is As Easy As “A, B, C”	7



**ELEVATING
HEALTHCARE**
IN LOS ANGELES COUNTY
SINCE 1997

Mental Health Parity and What It Means for Providers



The Mental Health Parity and Addiction Equity Act of 2008 requires that mental health and substance use disorder coverage are comparable to medical coverage. The Affordable Care Act further expanded Mental Health Parity requirements by ensuring plans offered through the Health Insurance Marketplace, such as L.A. Care Covered, provide many behavioral health treatments and services.

L.A. Care meets all these requirements, which include:

- Co-pays, coinsurance, and out-of-pocket maximums
- Limitations on services utilization, such as limits on the number of inpatient days or outpatient visits that are covered
- Coverage for out-of-network providers
- Criteria for medical necessity determinations

For more information on the Mental Health Parity and Addiction Equity Act, please visit www.dmh.ca.gov.



Top Performing Providers in L.A. Care's Physician P4P Program



Congratulations to the physicians and community clinics listed below for providing quality care to L.A. Care's Medi-Cal members, and for outstanding performance in the 2017 Physician Pay-for-Performance (P4P) Program. Providers were selected based on the following categories*: Overall Top Performer, Overall Most Improved, Pediatric Services, Adult Services and Women's Health during measurement year 2017.**

These providers and their staff are being recognized by L.A. Care for their commitment to elevating care in L.A. County in addition to their incentive payments. We celebrate their outstanding accomplishment!

Solo & Small Group Physicians***	
Category	Physician Name
Top Performer	Dr. Noel Torres
Most Improved	Dr. Oluyemisi Afuape
	Dr. Susana Santiago-Soriano
Pediatric Services	Dr. Bothyna Sedrak
	Dr. Francis Yu
	Dr. Laila Hanna
Adult Services	Dr. Rodolfo Protacio
	Dr. Martha Rodriguez
	Dr. Saro Khajehgian
Women's Health	Dr. Julius Kpaduwa
	Dr. Julio Vasquez

Community Clinics***	
Category	Clinic Name
Top Performer	Asian Pacific Health Care Venture
Most Improved	The Achievable Foundation
	Asian Pacific Health Care Venture
Pediatric Services	El Proyecto Del Barrio
	Universal Community Health Center
	All for Health, Health for All
Adult Services	Asian Pacific Health Care Venture
	QueensCare Health Centers
	AltaMed Health Services
Women's Health	Clínica Monseñor Oscar A. Romero
	Northeast Valley Health Corporation

***Pediatric services** include *Appropriate Testing for Children with Pharyngitis, Childhood Immunization Status – Combo 3, Immunizations for Adolescents – Combo 1, Children and Adolescent Access to a PCP, and Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life.*

Adult services include *HbA1c Screening, HbA1c Control (< 8.0%), Eye Exam and Medical Attention for Nephropathy, Annual Monitoring for Patients on Persistent Medications – Diuretics and Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis.* **Women's Health** measures include *Breast Cancer Screening, Cervical Cancer Screening, Chlamydia Screening, Timeliness of Prenatal Care and Postpartum Care.*

**Providers had to have at least 30 eligible members per measure and at least 3 scored measures within a category to be included for recognition. Performance is based on administrative data received by L.A. Care.

***Providers are shown in alphabetical order by last name



Vital Signs

Get to Know L.A. Care's Registered Dietitians

L.A. Care has a team of experienced, qualified registered dietitians ready to help your patients lower their risk of disease and manage any current conditions through improved eating habits and lifestyle changes. Your patients can meet with one of our staff over the phone – all they need is a referral from you, their trusted provider.

Our dietitians offer Medical Nutrition Therapy (MNT) to help treat health conditions such as diabetes, gastrointestinal disorders, obesity, kidney disease, hypertension and hyperlipidemias. The dietitian team also facilitates L.A. Care's American Diabetes Association Recognized Diabetes Self-Management Education Program (DSME).



Meet L.A. Care' RD Staff:

(1-r) Eu Nee Tan, MS, RD is L.A. Care's child nutrition expert and is passionate about preventing and treating pediatric obesity. Natalie Jacildo, MPH, RD has extensive experience in renal nutrition and helps coordinate our diabetes education program. She is passionate about helping members with diabetes manage their diet, physical activity and medications in order to prevent complications. Janine Souffront, RDN, CDE is the team supervisor and coordinates nutrition-related services.



To refer a member for nutrition services or DSME, just fill out and fax the *Health Education Referral Form* found under provider resources on our website:

<http://www.lacare.org/sites/default/files/hecls-referral-form-1217.pdf>

If you have questions about the services offered, please call the **Health Education Unit** at: **1.855.856.6943** or email the team at healtheducation@lacare.org.



The L.A. Care Formulary Has You Covered!

The Formulary is an approved list of covered drugs for L.A. Care members. It is reviewed and updated monthly for safety and effectiveness. The Formulary and updates are available online at lacare.org.

How to Use the Formulary

- Formulary drugs are listed by their generic name and brand name as follows: Generic name (BRAND NAME)
- If only the brand name drug is on the market, only that will show: BRAND NAME
- Drugs can be searched on the online formulary by generic or brand name, or therapeutic category. Using the “Ctrl + F” function or the index makes it easy.

Generic and Brand Name Medications

- Generic and brand name drugs are covered.
- Generic drugs are safe and cost-effective.
- Brand drugs are used when a generic drug is not available.

Non-Formulary Medications

Drugs not listed on the formulary are not covered (non-formulary).

Benefit Coverage and Limitations

Quantity Limits (QL): Some drugs have quantity limits for safety or cost reasons.

Step Therapy (ST): Requires trying one or more drugs first (Step Process).

Medication Request Process

The Medication Request Process requires a Prior Authorization (PA) request from your doctor.

The following drugs need a PA:

- Non-formulary drugs
- Formulary drugs needing safety or cost reviews.
- Formulary drugs that exceed quantity limits (QL).
- Step therapy (ST) drugs that do not go through the normal Step Process.
- Brand drug when the generic is available.

Approval may be given for a documented medical need, otherwise the request will be denied.

General Benefit Exclusions (Not Covered)

- Drugs for cosmetic purposes
- Infertility drugs
- Experimental drugs
- Foreign drugs

The ‘Medication Request Process’ is not available for excluded drugs, but denied requests can be appealed.



CDC Provides In-Season Estimates of Flu Illnesses, Medical Visits, and Hospitalizations



According to data released by the Center for Disease Control (CDC), during the 2018-2019 season between 6 and 7 million people have been sick with flu. Between 69,000 and 84,000 people have been hospitalized as a result. This is the first time these estimates—which cover the period from October 1, 2018 through January 5, 2019—are being provided during the flu season.

Calculations are based on adjusted rates of laboratory-confirmed, influenza-associated hospitalizations collected through a surveillance network that covers approximately 8.5% of the U.S. population, or about 27 million people. Based on this methodology, the CDC estimates that:

- 6.2 to 7.3 million people have been sick with flu,
- 2.9 to 3.5 million people have been to the doctor because of flu, and
- 69,300 to 83,500 people have been hospitalized because of flu

The CDC's weekly reports when and where influenza activity is occurring, which influenza viruses are circulating and the impact influenza is having on hospitalizations and deaths in the United States. The results are based on data collected from eight different surveillance systems. Each year seasonal flu places a significant burden on the health of people in the United States. These new in-season estimates fill out the picture of the burden of flu in the United States.

The CDC continues to recommend flu vaccination as the best way to reduce the risk of flu and its potentially serious complications, including death in children. People who are very sick or who are at high risk of serious flu complications and get flu symptoms should see a health care provider early in their illness for possible treatment with a flu antiviral drug.

In addition to vaccination and appropriate use of antiviral drugs, the CDC recommends everyday preventive actions to help stop the spread of germs. If individuals are sick with flu-like illness, CDC recommends that they stay home for at least 24 hours after their fever is gone except to get medical care or for other necessities. Basic precautions like covering the nose and mouth with a tissue when you cough or sneeze and washing your hands often with soap and water are key. Avoid touching your eyes, nose and mouth as germs spread this way. Clean and disinfect surfaces and objects that may be contaminated with germs.

Source: cdc.gov



Accessing Interpreting Services Is As Easy As “A, B, C”

Did you know that L.A. Care offers no-cost Interpreting services, including American Sign Language, to all its members, 24 hours a day, 7 days a week?

Here’s how to access this no-cost service:

- Ask for members’ preferred language and document it in their medical record.
- Be sure to document member’s request (or refusal) of interpreting services.
- Call **1.855.322.4034** to request interpreting services in the member’s preferred language.



Have the L.A. Care Member ID and physician’s NPI ready.

We appreciate your support in discouraging patients from using family members as interpreters, except in emergency situations.

Improving Opioid Safety

On January 1, 2019 L.A. Care implemented a new pharmacy opioid safety procedures to help keep our members opioid safe. These include:

- Limits on high dose opioids
- Limits on opioids and benzodiazepines (benzos) used together
- Limits on use of multiple long-lasting opioids used together
- Limits on how soon controlled medications can be refilled.
- *For CMC members: 7-day limit on first time opioid prescriptions*



Members' Rights and Responsibilities

Members have a right to...

Respectful and courteous treatment.

- Members have the right to be treated with respect and courtesy by their health plan's providers and staff.
- Members have the right to be free from consequences of any kind when making decisions about their care.

Privacy and confidentiality.

- Members have the right to have a private relationship with their provider and to have their medical record kept confidential.
- Members also have the right to receive a copy of and request corrections to their medical record.
- If the member is a minor, they have the right to certain services that do not need their parents' approval.

Choice and involvement in their care.

- Members have the right to receive information about their health plan, its services, its doctors and other providers.
- Members also have the right to get appointments within a reasonable amount of time.
- Members have the right to talk with their doctor about all treatment options for their condition, regardless of the cost, and participate in making decisions about their care.
- Members have the right to say "no" to treatment, and the right to a second opinion.
- Members have the right to decide how they want to be cared for in case of a life-threatening illness or injury.

Receive timely customer service.

- Members have the right to wait no more than 10 minutes to speak to a customer service representative during L.A. Care's normal business hours.

Voice their concerns.

- Members have the right to complain about L.A. Care, the health plans and providers we work with, or the care they get without fear of losing their benefits.
- L.A. Care will help members with the process. If members don't agree with a decision, members have the right to appeal, which is to ask for a review of the decision.
- Members have the right to disenroll from their health plan whenever they want.
- Medi-Cal members have the right to request a State Fair Hearing.

Service outside of their health plan's provider network.

- Members have the right to receive emergency or urgent services, as well as family planning and sexually transmitted disease services outside of their health plan's network.
- Members have the right to receive emergency treatment as follows:
 - **Medi-Cal and CalMediConnect members:** Emergency care services are covered at all times anywhere in the United States, Mexico and Canada. For Medicare-covered services, emergency is NOT covered outside of the United States and its territories. For Medicare-covered emergency care provided outside of the United States and its territories that are not covered by Medi-Cal, the member may receive a bill from the provider.
 - **PASC-SEIU members:** Emergency care services are covered 24 hours a day, 7 days a week, anywhere.

Service and information in their language.

Members have the right to request an interpreter at no charge. Members have the right to get all member information in their language or in another format (such as audio or large print).

Know their rights.

- Members have the right to receive information about their rights and responsibilities.
- Members have the right to make recommendations about these rights and responsibilities



Members of L.A. Care, have the responsibility to...

Act courteously and respectfully.

- Members are responsible for treating their doctor, all providers and staff with courtesy and respect.
- Members are responsible for being on time for their visits or calling the doctor's office at least 24 hours before the visit to cancel or reschedule.

Give up-to-date, accurate and complete information.

- Members are responsible for giving correct information to all providers and to L.A. Care.
- Members are responsible for getting regular checkups and telling the doctor about health problems before they become serious.

Follow their doctor's advice and take part in their care.

- Members are responsible for talking over their health care needs with their doctor, developing and following the treatment plans they and their doctor agree on.

Use the Emergency Room only in an emergency.

- Members are responsible for using the emergency room in cases of an emergency or as directed by their doctor.

Report wrongdoing.

- Members are responsible for reporting health care fraud or wrongdoing to L.A. Care.
- Members can do this without giving their name by calling the L.A. Care Compliance Helpline toll free at **1.800.400.4889**, going to **lacare.ethicspoint.com**, or calling the California Department of Health Care Services (DHCS) Medi-Cal Fraud and Abuse Hotline toll-free at **1.800.822.6222**.

Preventing Medical Fraud and Identity Theft

You can help your patients protect their health and avoid health care fraud or abuse. If your patient reports their member ID has been lost or stolen, here are some ways to assist them:

1. Check medical records to make sure they match the patient's condition. Give them a copy of the records if needed.
2. Run a CURES report on the patient to check for controlled substances that you may not have prescribed. Go to <https://oag.ca.gov/cures>
3. Recommend that patients place a fraud alert with one of the three (3) credit bureaus.
 - a. **Equifax – Call 1.888.766.0008**
 - b. **Experian – Call 1.888.397.3742**
 - c. **TransUnion – Call 1.800.680.7289**

The fraud alert service is free and will help protect your patients from future abuse. When calling, the patient should ask for a copy of their credit report and check it closely.



4. Advise your patients to file a complaint with the Federal Trade Commission (FTC). They can do this online by completing the form at [identitytheft.gov](https://www.ftc.gov/identitytheft). The patient will be given an FTC Identity Theft Affidavit which they should print out and save. Patients can also call **1.877.438.4338**.
5. Advise your patients to file a report with their local police department.
6. To learn more about how to protect your patients and yourself from identity theft, and what actions victims of identity theft should take, please visit [identitytheft.gov](https://www.ftc.gov/identitytheft).

Nurse Advice Line

L.A. Care offers its members a **Nurse Advice Line** (NAL) service 24 hours a day, 7 days a week. A team of registered nurses is available to answer any health-related questions. L.A. Care members can access this service by phone or chat live with a nurse using their L.A. Care *Connect* online member account.



As a complement to your service, please encourage your patients to call the NAL for free health advice. If your patient is an L.A. Care member or a Medi-Cal member with one of our Plan Partners, they can call the NAL at the numbers listed below:

Anthem Blue Cross
1.800.224.0336
TTY 1.800.368.4424

Blue Shield of California (BSC)
Promise Health Plan
1.800.609.4166
TTY 1.800.735.2929

Kaiser Permanente
1.888.576.6225

L.A. Care Health Plan
1.800.249.3619
TTY 711

The NAL phone number is also located on the back of the patient's health plan member ID card. Additionally, the NAL phone numbers can be found on the L.A. Care websites: **lacare.org**, **lacarecovered.org**, and **calmediconnectla.org**.

Progress Notes is a publication of L.A. Care Health Plan for our Medi-Cal and Cal MediConnect provider networks.

If you have any questions or comments about topics in this issue, please write to us at **editor@lacare.org** or call us at **866.LA.CARE6 (866.522.2736)**.



IMPORTANT CONTACT NUMBERS

L.A. Care Compliance Helpline: 1.800.400.4889
24 hours a day, 7 days a week

Provider Solution Center: 1.866.LA.CARE6, 1.866.522.2736
(Eligibility & Claims questions only)

Medical Management: phone 1.877.431.2273
fax **213.438.5777** for authorization requests

LTSS Department: 1.855.427.1223 for Long-Term Services and Supports

HCC Outreach Specialist, Betty Garcia: 213.694.1250 x4935
fax **213.438.4874** for Annual Wellness Exam (AWE) forms

Health Education: 1.855.856.6943 for forms and programs

Nurse Advice Line: L.A. Care – 1.800.249.3619
Kaiser – **1.888.576.6225**, Care1st – **1.800.609.4166**
Anthem Blue Cross – **1.800.224.0336**

Beacon Health Options: 1.877.344.2858
(TTY **1.800.735.2929**) for behavioral health services
24 hours a day, 7 days a week

L.A. Care Covered™: 1.855.270.2327 (Providers: Option "2")

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L.A. Care
HEALTH PLAN®

L.A. Care Health Plan
1055 West 7th Street, 10th Floor
Los Angeles, CA 90017
lacare.org

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Los Angeles, CA 90017
lacare.org
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Progress Notes

A NEWSLETTER FOR OUR PHYSICIAN PARTNERS

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In this issue

- 02** Mental Health Parity and What It Means for Providers
- 04** Get to Know L.A. Care's Registered Dietitians
- 05** The L.A. Care Formulary Has You Covered!
- 07** Improving Opioid Safety



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News Alert



Top Performing Providers

SEE PAGE 3