

Progress Notes

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ACA Health Insurance Fight Continues

Ten years ago, then-President Barack Obama signed the Affordable Care Act (ACA) into law. It was called landmark legislation as it was the most significant health coverage overhaul since Medicare and Medicaid were launched in 1965. But, at this point, it might even be called miracle legislation after more than 70 attempts to repeal the law failed. One of those attempts came within one vote of dismantling the historic law. Now, Republicans are taking their fight to end the ACA to the U.S. Supreme Court in the fall.

The question is: why on earth would anyone want to end the ACA? After all, 20 million people gained health care coverage under the ACA. Eliminating it, especially without any replacement on the table, would be heartless.

While the ACA is not perfect, the pros far outweigh the cons.

- The law has **provided** protection for more than 130 million Americans with pre-existing conditions.
- The Medicaid expansion provision allowed 17 million Americans to gain coverage.
- Lifetime maximum benefits were eliminated in health plan policies. At the time the ACA was signed into law, **91 million** Americans had employer-sponsored plans that imposed lifetime limits.
- More than two million young adults were allowed to stay on their parents' insurance until age 26.



If the Supreme Court throws out the law, we lose all these benefits and even more. Nearly 12 million seniors will have to pay more for prescription drugs because the Medicare 'donut hole' will reopen. Nine million people will lose the subsidy they receive to help them pay for their insurance coverage. Insurance companies will be able to charge women more just for being a woman, with estimates that it could be 50 percent more. Support for rural hospitals will end.

The Urban Institute says that without the ACA, the number of uninsured will increase by 65 percent, or nearly 19.9 million, nearly four million in California. Demands for uncompensated care – the care received by the uninsured in emergency rooms or community clinics – will jump by \$50.2 billion, an increase of 82 percent compared to what is being paid out with the ACA in place.

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

American Diabetes Association (ADA) Releases 2020 Standards of Medical Care in Diabetes



ADA recently released the 2020 Standards of Medical Care in Diabetes which include some significant changes this year.

- Section 5 “*Facilitating Behavior Change and Well-Being to Improve Health Outcomes*” was revamped and renamed. It now includes supporting evidence and recommendations on anxiety, depression, disordered eating and serious mental illness. It has information on screening for social determinants of health and changes in life circumstances. The nutrition therapy section includes the evidence presented in the “*Nutrition Therapy for Adults With Diabetes or Prediabetes: A Consensus Report*”.
- The sections on “Diabetes Technology” and “Glycemic Targets” now reflect the newest in technology and how to use this information.

Some of the most notable changes, however, are in Section 9, “Pharmacologic Approaches to Glycemic Treatment”. A discussion was added on the multiple approaches to insulin treatment and the path to injectable therapy intensification was greatly simplified. New evidence and

recommendations were added on the use of combination therapy early on for T2DM to extend the time to treatment failure based on the VERIFY trial.

The medication algorithm has been revised to include the latest trial findings on GLP-1 receptor agonists and SGLT2 inhibitors and their cardio protective properties. It suggests taking into consideration, very early on in treatment, if the patient is high-risk for/ or has established: ASCVD, HF or CKD before choosing pharmacologic therapy. There are specific paths for patients where ASCVD predominates and for those where HF or CKD predominate that **are independent of whether or not the A1c is at target.**

For more information, you can access the standards at: care.diabetesjournals.org, search for Volume 43, Supplement 1. The abridged version and Living Standards Updates are also available.

What Is the L.A. Care Community Link?

Where can I find housing, food pantries or low-cost childcare? Are these questions you hear often from your patients? To help you serve your patients and our members better, L.A. Care Health Plan offers the L.A. Care Community Link, a built-in search engine accessible through the [lacare.org](https://www.lacare.org) website. This resource is free and available to everyone. All you have to do is:

1. **Select – “For Providers”**
2. **Under Provider Resources / Select – “Tools and Toolkits”**
3. **Select – Community Link** / Enter your zip code (the member’s zip code) OR
 - “Go to L.A. Care Community Link,” (communitylink.lacare.org)

The Community Link is available in nearly 100 languages. You can either share the link with your patient, or assist them with their search for resources. L.A. Care wants to ensure that all our members have access to community supports:

- **Food, Housing, Goods, Transit, Health, Money, Care, Education, Work and Legal** – these are the categories to search from, by simply using their zip code.
- Each category includes subcategories where the member can find appropriate resources more closely targeted to their needs.

The agencies that the members might get referred to are not contracted directly with L.A. Care. Each respective agency will have their own intake and/or eligibility process, but they are aware that members are finding them via the L.A. Care Community Link. Start using it now. You’re only one click away!





Vital Signs

Support for You and Your Patients During COVID-19

L.A. Care understands that everyone is being affected by the coronavirus outbreak, especially our frontline providers. We have a variety of resources to help support you during this time.

- L.A. Care has committed nearly \$70 million in accelerated claims payments, Pay-for-Performance incentive and grant payments to support our provider network.
- We have a dedicated Provider Health Advisories webpage on our website at lacare.org with the latest COVID-19 public health guidance.
- Tune into our new Internet Radio station to hear the latest on COVID-19 information and guidance. It is available 24 hours a day. Listen in at lacare.org/internet-radio.
- Available resources for your patients include access to **L.A. Care Community Link**, our online search tool that connects your patients to free and low-cost social needs support like food and housing assistance. You can learn about these resources and more on our website at lacare.org.



IHA and SHA: Getting the Job Done!

The Initial Health Assessment (IHA) is one of the most important services providers can offer members. It's an opportunity to get to know new patients and ensure they are up to date on their care. A comprehensive IHA must be completed within 120 days of enrollment for new members and requires the completion of:

- a full health history
- needed preventive services
- a physical and mental health status exam
- diagnoses and plan of care
- **AND** an Individual Health Education Behavioral Assessment (IHEBA); the Staying Healthy Assessment (SHA) is the IHEBA recommended by the Department of Health Care Services (DHCS).



L.A. Care requests that providers check the Provider Portal for a monthly list of assigned members due for an IHA. Providers should document member outreach attempts and any member refusal to complete either an IHA or the SHA.

lacare.org/providers/provider-central/la-care-provider-central



Vital Signs



Make Lead Screening a Priority

A recent State auditor's report found that roughly half of the three million children enrolled in Medi-Cal did not receive any of the required lead screening tests. Children should receive a screening blood test at 12 months and 24 months of age. Children between the ages of 36 to 72 months must also have a screening blood test if a lead toxicity screening has not been previously conducted.

Due to its impact on children's health, the State is providing an incentive under the Value-Based Payment Program (VBPP). The VBPP provides a \$25 dollar add-on payment.

If the patient receiving the service is considered at risk, the at-risk add-on amount will be \$37.50.

To help support the State's efforts, L.A. Care will be conducting educational campaigns throughout the year. These campaigns will include reports that identify children who are missing the screening as part of the Provider Opportunity Reports and health education materials for members. We urge you to speak to patients about the importance of lead screening. A recommendation from a provider is the most influential factor in determining whether a parent has their child screened for lead.



For more information, visit our [Provider Resources](#) page on our website or email us at quality@lacare.org

Talk. Test. Treat.

Prevent the increase of reported cases of chlamydia in L.A. County with a simple strategy:

TALK.

Talk with your patients openly and honestly about their sexual history and make these discussions a part of their routine care.

Try these tips:

- Make sure your space is private and comfortable.
- Normalize sexual health questions and STD/HIV testing - Let your patients know that you ask everyone these questions.
- Avoid assumptions – Asking is the only way to know!

TEST.

Chlamydia screening is easy and painless with a simple urine test. Screen in conjunction with other office visits or routine lab tests.

The U.S. Preventive Services Task Force recommends the following for chlamydia testing:

- Test all sexually active women age 24 years and younger.
- Test older women who are at increased risk for infection.
- There is insufficient evidence on the benefits and harms of screening for chlamydia in men – however, consider the screening of sexually active young men in clinical settings with a high prevalence of chlamydia (e.g., adolescent and STD clinics) or in populations with a high burden of infection.

TREAT.

Follow CDC's STD Treatment Guidelines to ensure appropriate treatment and care. Delaying treatment can cause serious medical conditions like pelvic inflammatory disease.

Sources: Los Angeles County Department of Public Health 2017 Annual HIV/STD Surveillance Report; U.S. Preventive Services Task Force Screening for Chlamydia and Gonorrhea.



Reminder: L.A. Care Providers Delivering Women's Health Services

L.A. Care does not require a prior authorization for obstetrical or gynecological services provided by participating providers. Members have direct access to the following services:

- **Women's Health Services**

- Members can go directly to any network provider for women's health care such as breast or pelvic exams.

- **Basic Prenatal Care**

- Members can go directly to any network provider for basic prenatal care.

- **Family Planning Services**

- Members have access to counseling, pregnancy tests and procedures for the termination of pregnancy (abortion).

- **Treatment for Sexually Transmitted Diseases**

- Members can access testing, counseling, treatment and prevention services.

For more information, please send an email to: HealthEd_Info_Mailbox@lacare.org.



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

Kaiser Permanente:
1.888.576.6225

Blue Shield Promise Health Plan:
1.800.609.4166 TTY 1.800.735.2929

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](https://www.lacare.org) and [lacarecovered.org](https://www.lacarecovered.org) or [calmediconnectla.org](https://www.calmediconnectla.org).

ACA Health Insurance Fight Continues

Continued from cover page.

A Gallup poll found that the majority of Americans do support the Affordable Care Act, but also found some perceived challenges. Yes, the ACA is not perfect, but it is far superior to what we had before and making improvements to the law would be far preferable to any alternative that has been proposed.

Americans say health care is a top priority in this election year, and the current coronavirus outbreak has likely strengthened that point of view. As such, everyone should take a hard look at what the candidates are proposing. The Affordable Care Act was indeed landmark legislation – a major breakthrough in health care. It would be a shame to tear it apart.



Stay Updated on Pharmacy and Formulary at L.A. Care



The L.A. Care Formulary is a preferred list of covered drugs. It applies to outpatient and self-administered drugs and does not apply to medications used in the inpatient setting or medical offices. L.A. Care Health Plan has an active Pharmacy Quality Oversight Committee comprised of physicians and pharmacists who review and approve the drugs that are included on the Formulary, which is updated monthly. Revisions are based on safety, clinical efficacy, and cost-effectiveness. Updates to the Formulary are available online at [lacare.org](https://www.lacare.org).

How to Use the Formulary

Medicines on the Formulary are listed in alphabetical order and by class or category. Both brand name and generic medications are covered by L.A. Care. However, FDA approved generics should be used when available. Generics are generally more cost-effective than brand named drugs. A prescriber may request a brand name product in lieu of an approved generic, if the prescriber determines that there is a documented medical need for the brand equivalent. This type of request for coverage may be made by completing a Medication Request Form.

Some Formulary medicines require prior authorization. These drugs are listed throughout the Formulary, and on a separate list within it called the “Prior Authorization Drug List”. You can determine if a drug requires a Prior

Authorization by referring to the Formulary on the L.A. Care website at [lacare.org](https://www.lacare.org).

Some drugs require “Step Therapy” which involves one or more “prerequisite” first step drugs being tried first. Some drugs have “Quantity Limits” which means that coverage is limited to specific quantities per prescription and/or time period.

Any drug not found in the Formulary listing published by L.A. Care Health Plan shall be considered a non-Formulary drug. A prescriber may request an exception to coverage for a non-Formulary drug if the prescriber determines that there is a documented medical need. This type of request for coverage may be made by completing a Medication Request form.

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 **1.866.LA.CARE6 (1.866.522.2736)**.



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")



L.A. Care
HEALTH PLAN®

L.A. Care Health Plan

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Progress Notes

A NEWSLETTER FOR OUR PHYSICIAN PARTNERS

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News Alert



Women's Health Services

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