



progress notes

A Newsletter for Our Physician Partners

SUMMER 2014 | VOLUME 9 | ISSUE 2

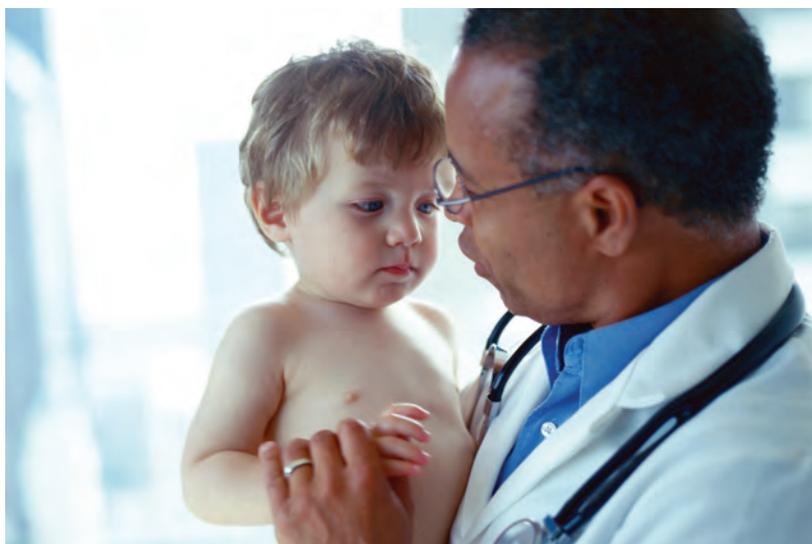


inside:

- 2 | Gertrude “Trudi” Carter, M.D., CMO
L.A. Care to Develop
Nation’s First Medi-Cal
“Blue Button”
- 4 | News in Brief
- 6 | Vital Signs
- 8 | L.A. Care Forms a
CCI Consumer Council
- 9 | More Than 2,500
HITEC-LA Eligible
Primary Care Providers
Achieve Meaningful Use
- 10 | FAQs about FWA
(Fraud, Waste,
and Abuse)

Social Determinants of Health: What Physicians Can Do

You can make a difference in the service and support for Los Angeles County’s vulnerable and low income communities. Social determinants of health reach beyond our traditional health care model and include sectors such as education, housing, transportation, and environment. As physicians assess and address their patients’ entire social environment as part of their treatment plan, they are increasingly recognizing the integral role social problems play in disease development and progression.



Poverty is the single biggest social

Providers can take an active role in improving the health of vulnerable and low income populations. The most essential task is to ensure the provision of basic human needs.

factor contributing to adverse health outcomes. Poverty has many dimensions, such as lack of basic

resources, social exclusion, and unemployment — all of which work together to reduce opportunity, limit choice, undermine hope, and threaten health. The World Health Organization defines health as a state of physical, psychological, and social wellbeing. By this definition, physicians are responsible not just for treating diseases but also taking care of patients’ social and psychological welfare, which includes addressing poverty.

Providers can take an active role in improving the health of vulnerable and low income populations. The most essential task is to ensure the provision of basic human needs:

shelter, clean air, safe drinking water, and adequate nutrition. Other approaches include reducing barriers to the adoption of healthier ways of living, improving the physical environment, and improving access to appropriate and effective health and social services. Physicians as clinicians, educators, research scientists, and advocates for policy change can contribute to all of these approaches through increased awareness, being advocates for community change, and becoming familiar with local community organizations.

Continued on page eleven.



Gertrude “Trudi” Carter, M.D.

Chief Medical Officer

L.A. Care Emphasizes Quality in 2014

“We have an unwavering commitment to the triple aim of providing quality outcomes, excellent member experience, and efficient use of resources for our members.”

- Gertrude “Trudi” Carter, M.D.,
Chief Medical Officer

For more than 17 years, L.A. Care Health Plan has been driven by its mission to provide high quality, affordable health care to the vulnerable populations in Los Angeles County.

L.A. Care serves more than 1.3 million members and continues to grow at a rapid pace. We have an unwavering commitment to the triple aim of providing quality outcomes, excellent member experience, and efficient use of resources for our members.

In 2014, much of our attention will be focused on interventions for these key areas:

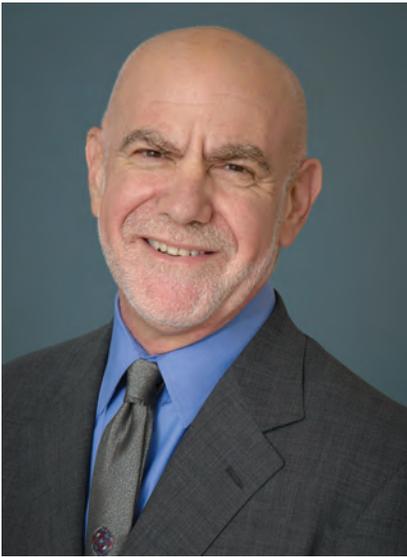
- Integration of physical and behavioral health
- Long Term Services and Supports
- Chronic care improvement, including diabetes and heart disease
- Preventive care, including breast cancer screening and flu shots
- Medication adherence

Engaging our members in development of the interventions is critical. We recently conducted a telephonic survey of our Medicare Advantage (HMO

SNP) members. The survey consisted of six questions on motivation and knowledge of prescribed medication. Of those surveyed, 17 percent of members forget to take their medicine, and 15 percent forget to refill their prescription, despite 74 percent responding that they are aware of the long-term benefits of taking their medications. Our goal is to increase adherence rates over the course of this year. We will use this member feedback to develop member education and process improvements to accomplish this goal.

Equally important to improving quality performance is engagement and support of providers. L.A. Care has several incentive programs in place. One of our major initiatives is to align the incentive programs to eliminate duplication and ineffective efforts to allow maximum funding for providers. The 2014 incentive programs align around data submission, shared provider outreach, member outreach, leveraging past efforts, and increasing communication.

Engaging our members and having active provider participation will allow us to make greater strides toward improving member care.



Howard A. Kahn, Chief Executive Officer L.A. Care Remains on Course

Earlier this year, I notified L.A. Care's Board of Governors that I will be stepping down from my position as Chief Executive Officer at the end of the year after 13 great years. I intentionally gave our Board of Governors significant lead time in order to ensure an orderly recruitment and smooth transition. Throughout this process, I am confident that L.A. Care will remain on course and fully committed to partnering with our physicians and other health care providers to deliver quality health care to all members.

Over the last four years, L.A. Care has experienced rapid growth and significant change. Our membership now stands at nearly 1.5 million members, our revenue is \$3.5 billion, and our workforce has grown to more than 1,200 employees. We are a very different entity from our beginnings 17 years ago, and our most recent evolution has been both exciting and challenging. That's why my agenda in the months ahead will be devoted to strengthening the organization's infrastructure and reinforcing our mission to provide quality health care for L.A. County's neediest communities and residents.

Among my priorities is developing efficiencies in L.A. Care's core operations, including completing implementation of our new Core System. This new technology platform offers major upgrades and allows us to manage our increasingly complex membership more effectively while providing high quality, affordable health care in partnership with our service providers.

I will also concentrate on ways to continually improve L.A. Care's quality ratings. This includes making any operational and oversight improvements needed to accomplish that goal. We are already making strides to improve customer service and to improve the performance of our medical groups and IPAs.

My attention will also focus on implementing California's Coordinated Care Initiative (CCI) and Cal MediConnect to ensure seniors and people with disabilities receive the coordinated health care coverage and services they need and deserve. The CCI includes transitioning most Dual Eligibles (Medi-Cal and Medicare beneficiaries) into a Medi-Cal health plan, and providing managed long-term supports and services (MLTSS) as a health plan benefit.

CCI also includes the Cal MediConnect program, which opened on April 1, 2014, with voluntary enrollment for Dual Eligible beneficiaries who actively choose our plan. We are also creating CCI Consumer Councils to help enlist new members in advising our programs and activities.

And, finally, a further priority will be assisting L.A. Care's Board of Governors with the recruitment process for a new CEO.

So, there you have it — my 2014 roadmap. Although more change is coming to L.A. Care, I plan to leave a sound and stable foundation from which L.A. Care and our physician network can continue partnering to provide quality health care to all of L.A. Care's members. Thank you for all the hard work you do, and for your commitment to L.A. Care.

"I am confident that L.A. Care will remain on course and fully committed to partnering with our physicians and other health care providers to deliver quality health care."

- Howard A. Kahn,
Chief Executive Officer

HealthyCity.org Has Arrived!

L.A. Care's Community Resources Directory has been replaced with a link to HealthyCity.org. The website offers multiple services including a searchable resource directory and an array of public datasets. HealthyCity.org makes identifying valuable services for your patients quick and easy.

Are you administering the Staying Healthy Assessment (SHA)?

All providers should now be administering the new Staying Healthy Assessment (SHA) forms as required by Medi-Cal Managed Care Division (MMCD) Policy Letter 13-001. Forms are available for order as well as download on the L.A. Care website. Please take a moment to view the required Los Angeles County Provider SHA Training posted on L.A. Care's website and send a confirmation email to Healtheducation@lacare.org. Questions about SHA implementation can also be directed to this email.

Look What's New in Provider Training! It's LACareUniversity.com

L.A. Care is happy to announce the launch of a learning management system (LMS) for our contracted provider network. This new learning portal will enable providers convenient access to easy-to-use, on-demand required training courses from L.A. Care.

With this new LMS portal, L.A. Care will be able to extend training to our entire provider network, including participating provider groups, hospitals, ancillary providers and vendors, who are required to complete training to participate in L.A. Care's provider network.

To access training courses, simply 'register' on the site; once users register, they will receive notification from L.A. Care that their registration has been approved, and they can begin using the system to complete all required training courses. To register and sign in, please go to: lacareuniversity.torchlms.com

California offers a new initiative through CalFresh to help the uninsured "Express Enroll" in Medi-Cal



California has a new initiative to help uninsured adults and children sign up for Medi-Cal. The state created a simplified process called "Express Lane Enrollment" for individuals on CalFresh to enroll in Medi-Cal. The CalFresh Program, previously known as "Food Stamps", is also federally known as the Supplemental Nutrition Assistance Program (SNAP). The program issues monthly electronic benefits that can be used to buy most foods which helps to improve the health and well-being of qualified households and individuals by providing them a means to meet their nutritional needs. Now selected (non-elderly) recipients of CalFresh may "Express Enroll" in Medi-Cal.

In February 2014, over 120,000 Los Angeles residents on CalFresh received a letter to let them know they qualify for Medi-Cal. Patients may have questions for their providers about the letter and what it means for them. Providers should encourage patients to respond by phone, mail, or web to the letter so that they can enroll in Medi-Cal.

For newly enrolled Medi-Cal members, Continuity of Care (COC) rules apply according to **California Health and Safety Code Section 1373.96**. For details about the COC policy, please contact Provider Relations at 1-213-694-1250 x4719.

L.A. Care looks forward to our continued collaboration with our provider partners to help low income and vulnerable communities get access to health insurance.

For more information, please visit:

- calfresh.ca.gov/
- dhcs.ca.gov/services/medi-cal/eligibility/Pages/ExpressLane.aspx
- dhcs.ca.gov/services/medi-cal/eligibility/Documents/Express_Lane/ExLn_NonCOHSpkg.pdf

Ensure Best Practices for Providing Quality Care to a Diverse Patient Population



Bilingual practitioners and staff serve an invaluable role in providing meaningful health care services to limited English proficient patients. It is important for health care practitioners to identify the language proficiency of bilingual staff prior to having them assist patients in a language other than English. L.A. Care offers resources to help ensure the best practices for providing quality care for our diverse patient population. To identify the bilingual capabilities of practitioners and staff physicians can download an Employee Language Self-Assessment tool located on our website in the “Provider Resources” section of lacare.org, entitled “Complete Toolkit - Better Communication, Better Care: A Provider Toolkit for Serving Diverse Populations”.

Other helpful tools for bilingual staff include bilingual dictionaries and medical glossaries. Here are some additional best practices for providing care to members from diverse communities:

- Capture members’ preferred language and record it in the member’s file.
- Documentation of request or refusal of interpreting services.
- Avoid using family members to provide interpreting services and never use minors, except in emergency situations.
- L.A. Care provides no cost in-person and telephonic interpreting services for L.A. Care members. To request interpreting services, please call Member Services at 1-888-839-9909.

More L.A Care-Affiliated Practices Earn NCQA PCMH Recognition



Three L.A. Care practices have joined the ranks of Patient-Centered Medical Home (PCMH) designated status. Granted by the National Committee for Quality Assurance (NCQA), PCMH designation is awarded to practices that

provide a model of healthcare delivery that provides enhanced access and continuity, identification and management of patient populations, planned and managed care, self-care support, community resources, and coordination of care .

Herald Christian Health Center, located in the city of San Gabriel, serves a predominantly low-income Chinese and Vietnamese population.

“Our clinic’s mission is holistic and comprehensive,” says Chief Operating Officer Carolin Eng, RN, MPH. “We address not just physical needs, but emotional and social needs as well.”

To enhance access to patient care, Herald Christian Health Center opens late some weeknights and has Saturday hours. They have also created a system that can accommodate walk-in patients. Electronic health records help track patients and ensure follow-up with those with high-risk conditions.

The Children’s Clinic, “Serving Children and Their Families,” offers comprehensive health care to underserved children, adolescents and adults in the greater Long Beach area via nine community locations.

“We had been meeting almost all the standards already, and support of an L.A. Care-funded consultant allowed us to document our accomplishments and submit our application,” said Chief Medical Officer Maria Chandler, MD, MBA. “The idea of a patient centered medical home is very worthwhile, and I believe providers who abide by the standards will find that they are practicing sound care that encompasses vital elements.”

One of the first community health centers in the United States, Watts Health Clinic offers clinical, preventive, behavioral and restorative services to an underprivileged and underserved population.

“PCMH Recognition is one of the few designations that speaks directly and specifically to primary care practices,” notes President and CEO William D. Hobson, Jr., MS. “Although not required, nor a source of additional reimbursement, this recognition validates our patient-centered approach and our coordinated care management systems.”

To prepare for PCMH Recognition, Watts Health Clinic formed teams focusing on human resources, clinic flow, information technology and policies and procedures. This not only aided the application process, but yielded additional ways to maximize efficiencies and benefit patients and clinicians.



It's NCQA Survey Time!

L.A. Care received its first NCQA accreditation in 2008. Our last accreditation in 2011 involved multiple product lines which included Medi-Cal, Healthy Families and Healthy Kids. Another three years has passed and its now survey time again with NCQA. For this 2014 survey, both Medi-Cal and L.A. Care Covered will be evaluated.

The first portion of the survey was offsite and based on the 2013 NCQA Standards and Guidelines. At the end of April, documentation for compliance was submitted through **NCQA's Interactive Survey System (ISS)** tool, which is the first web-based tool for Health Plan Accreditation. The evaluation of materials will be performed by a team of managed care experts and physicians.

The second portion of the survey will be an onsite file review taking place in mid-June. During these two days, NCQA surveyors will be reviewing the materials that couldn't be sent through the ISS tool such as medical case records, meeting minutes, and other confidential files.

L.A. Care's commitment to maintaining quality and accountability in a transparent way through NCQA accreditation is something we pride ourselves in. We are proud that you are part of this network and process.

Get Rewarded with L.A. Care's Physician P4P Program!



L.A. Care is pleased to announce the 2014 Physician Pay-for-Performance (P4P) Program. This program provides financial rewards for practices that provide high quality care for L.A. Care Medi-Cal and L.A. Care Covered™ members, and represents **an opportunity to receive significant revenue above**

capitation. Effective immediately, eligible physicians and community clinics may qualify to receive annual incentive payments for outstanding performance and year-over-year improvement on 17 HEDIS measures. (See HEDIS details in the "Provider Resources" section of lacare.org) There is no need to sign-up. All eligible L.A. Care physicians automatically participate in the Physician P4P Program. For more information, please contact Incentive_Ops@lacare.org.



Get Updated on Pharmacy & Formularies at lacare.org!

L.A. Care has a very active Pharmacy Therapeutics and Technology Committee (PT&T) which updates our formularies on a regular basis. As your partner in healthcare, L.A. Care wants you, our network physicians and pharmacists, to have access to all the necessary information regarding our pharmacy programs and approved formulary drugs. We also encourage your suggestions and comments for additions and changes.

Stay up to date with the pharmacy and formulary listings and procedures, as well as other management methods to which your prescribing decisions are subjected, by referring to L.A. Care's Formulary information in the "Provider" section of our website at lacare.org.

Monitoring Patients on Long-Term Medications (MPM) Enhances Patient Safety



With the use of long-term medications, close monitoring and follow-up is needed to assess each patient for safety and efficacy of treatment. Annual review of laboratory values and clinical intervention is required by medical standards for specific long-term medications to monitor for side effects and adjust therapy as needed to ensure patient safety; specific medications include, but are not limited to the following: **Angiotensin Converting Enzyme (ACE) Inhibitors, Angiotensin Receptor Blockers (ARBs), digoxin, diuretics, and anticonvulsants.**

Patients on **ACE inhibitors, ARBs, digoxin, diuretics or anticonvulsants** require specific annual blood tests to reduce risk of adverse events; specific blood tests include, but are not limited to: basic metabolic panel, serum potassium, serum creatinine (SCr), blood urea nitrogen (BUN), or drug serum levels.

The table below provides the annual laboratory test requirements for specific target drug categories. Please ensure your patients are receiving the required follow-up care and monitoring for their long-term medication use.

Annual Laboratory Tests Required per Target Therapeutic Classification

Therapeutic Classification	Common Uses to Treat or Prevent	Formulary Drugs	Annual Lab Tests
Angiotensin Converting Enzyme (ACE) Inhibitors	<ul style="list-style-type: none"> hypertension heart failure nondiabetic nephropathy diabetic nephropathy reduce risk or improve outcomes of MI/stroke 	benazepril, captopril, enalapril, fosinopril, lisinopril, moexipril, quinapril, ramipril,trandolapril	basic metabolic panel or serum potassium and SCr or serum potassium and BUN
Angiotensin Receptor Blockers (ARBs)	<ul style="list-style-type: none"> hypertension heart Failure diabetic nephropathy reduce risk or improve outcomes of MI/stroke 	azilsartan, candesartan, eprosartan, losartan, olmesartan, valsartan	basic metabolic panel or serum potassium and SCr or serum potassium and BUN
Digitalis Glycosides	<ul style="list-style-type: none"> atrial fibrillation heart Failure 	digoxin*	basic metabolic panel or serum potassium and SCr or serum potassium and BUN
Diuretics - Carbonic Anhydrase Inhibitors - Loop Diuretics - Potassium Sparing - Thiazide and related	<ul style="list-style-type: none"> glaucoma, edema hypertension, edema, renal disease, hepatic disease hypertension hypertension, edema 	acetazolamide, methazolamide bumetanide, furosemide spironolactone, triamterene chlorthalidone, hydrochlorothiazide, indapamide, metolazone,	basic metabolic panel or serum potassium and SCr or serum potassium and BUN
Anticonvulsants	<ul style="list-style-type: none"> seizures 	carbamazepine, divalproex sodium, phenobarbital, phenytoin, valproic acid,	serum level for each drug in use

This list is not all inclusive and does not include combination drugs that may also require annual blood tests

* A Digoxin serum level may also be recommended.

Helping Members Get the Care they Need at Home

In-Home Supportive Services (IHSS) pays for homecare services that enable eligible seniors and persons with disabilities (including children) to remain safely in their own homes. In 2014, IHSS became a Medi-Cal benefit and began transitioning into an L.A. Care benefit on April 1, 2014. L.A. Care members who receive IHSS can hire a homecare provider to assist them with **personal care services** such as bathing, grooming and dressing; **domestic services** such as cooking, house cleaning and laundry; **protective supervision** for individuals with mental impairment; **paramedical services** such as assistance with medications, bowel and bladder care, and catheter insertion; and **accompaniment to medical appointments**. IHSS serves approximately 181,000 individuals in L.A. County.

Authorization for IHSS and hours of service are determined by a Department of Public Social Services (DPSS) IHSS Case Worker who assesses the member's needs in their home. However, the member's physicians or other healthcare providers play an important role in helping them get the care they need through IHSS.

Physicians who recognize that a member may need IHSS, should first refer the member to the L.A. County IHSS Application Hotline at 1-888-944-4477. A county intake worker will begin the enrollment process and send the member a Health Care Certification Form (State of California form number SOC 873). This form must be completed by the member's physician or another licensed healthcare professional and returned to DPSS before IHSS services can be authorized. If the form is not completed within 45 days, the member's application will be terminated.

In addition to assisting with completion of the initial certification form, physicians may be contacted by either the member or the IHSS Case Worker and asked to



complete additional documentation if the member needs protective supervision or paramedical services. In cases where a member has been authorized services, but believes they need more hours, they may also ask their physician for a letter or note explaining the extent of any conditions that may warrant the need for additional services. By recognizing the need for IHSS, and assisting with required documents when requested, physicians can help members stay living safely in their homes for as long as possible.

For additional information on In-Home Supportive Services or other programs that can help members stay safely at home, please contact L.A. Care's LTSS Department at 1-855-427-1223 or via e-mail at LTSS@lacare.org. L.A. Care's LTSS team can also provide additional assistance or guidance to members who may need help with accessing or navigating the IHSS program.

More Than 2,500 HITEC-LA Eligible Primary Care Providers Achieve Meaningful Use

A project of L.A. Care, HITEC-LA helps small practices and clinics switch from paper files to electronic records that help improve patient care.



More than 2,500 of HITEC-LA members who are eligible primary care providers have reached meaningful use with certified electronic health record (EHR) systems. HITEC-LA's goal is to help 3,000 eligible primary care providers in L.A. County reach meaningful use.

“We're pleased to have achieved over 80% of our goal and helped so many providers lay their EHR foundation,” says Mary Franz, L.A. Care's Executive Director of HITEC-LA and Health Information Technology. “Now the work ahead is building on that foundation to enhance population management, coordination of care, and patient engagement to better serve patients anytime, anywhere.”

Providers that meaningfully use certified EHRs can expand the capabilities of their practices, leading to greater strides towards improving clinical quality, lowering costs, and enhancing patient experience.

“Our program is the driving force behind EHR adoption throughout L.A. County,” says Howard Kahn, L.A. Care Chief Executive Officer. “Providers who care for the county's vulnerable communities have limited resources to implement new technologies. L.A. Care, in partnership with the Federal Government, has helped them use electronic medical records that help better serve patients.”

L.A. Care's EHR Support Extends into 2015



A project of L.A. Care Health Plan, HITEC-LA has been awarded a one year no cost extension from the Office of the National Coordinator for Health Information Technology (ONC) to continue electronic health record (EHR) support through April 2015.

HITEC-LA helps small practices and clinics switch from paper files to EHRs that help improve patient care. “In addition to achieving program milestones, we managed our program effectively, allowing us to serve L.A. County practices for one more year without needing additional funding,” says L.A. Care Chief Executive Officer Howard Kahn. “We look forward to continuing our successful partnership with the ONC to help even more providers reach meaningful use to increase their clinical care quality.”

L.A. CARE LAUNCHES FIRST MEDI-CAL “BLUE BUTTON”

Members have online access to their prescription information for improved safety



Blue Button
Download
My Data

L.A. Care's Blue Button is now available to its Medi-Cal Managed Care beneficiaries. Blue Button is a web-based feature that allows patients to easily view and download their health information. L.A. Care's Blue Button enables members to access their own prescription information online. L.A. Care is the first in California and among the first in the nation to develop a Medicaid Blue Button.

“We are excited to bring such innovative technology as Blue Button to vulnerable L.A. County residents who can now more easily share their information with their doctors and other caregivers,” said Howard Kahn, L.A. Care Chief Executive Officer. “It empowers patients to take an active role in their own health care, increases effective communication and helps avoid prescription errors.”

The U.S. Department of Veterans Affairs initiated Blue Button in 2010. In 2012, the Office of the National Coordinator for Health Information Technology began encouraging its broader use. In November 2013, L.A. Care was awarded a grant from the UC Davis Institute for Population Health Improvement's California Health eQuality program to develop Blue Button functionality.

FAQs about FWA (Fraud, Waste and Abuse)

1 May I charge an L.A. Care Managed Care Medi-Cal member for services rendered?

Answer: No, not if the services are Medi-Cal Covered Services. The Plan must provide all Medi-Cal covered services at no cost to the member. However, the doctor or group can charge for services NOT covered by Medi-Cal. Example: Cosmetic surgery.

2 Am I required to report suspected fraud, waste or abuse to L.A. Care?

Answer: Yes. This is an L.A. Care contract requirement. It is also in the Provider Manual. You can access the Provider Manual located on our website in the “Provider Resources” section of lacare.org.

3 If so, how do I do that?

Answer: One way you can report FWA to L.A. Care is by using our 24/7 toll-free Compliance Helpline. Call **1-800-400-4889** OR report online at lacare.ethicspoint.com. For other ways to report, please see to Section 15, “Compliance” of the Provider Manual.

4 I think a patient might be misusing controlled substances. Is there some way I can find this out?

Answer: You might try CURES – a data base that tracks all controlled substances dispensed for patients. To learn more go to: oag.ca.gov/cures-pdmp

5 I need to send in my attestation form for the annual Provider Fraud, Waste and Abuse Awareness and General Compliance Training to L.A. Care. How do I do that?

Answer: Send all annual attestation forms to Patricia Luna, pluna@lacare.org or call her at 213-694-1250, ext. 4231 if you need help. If you have not sent in your attestation form yet, please do so immediately.

6 Where can I go for more information about FWA - including drug diversion?

Answer: Check out these links:

- oig.hhs.gov/compliance/provider-compliance-training/index.asp#materials
- deadiversion.usdoj.gov/new.html



Help When You Need It from L.A. Care's Nurse Advice Line

Reduce the wait time for your patients and help alleviate crowded emergency rooms by utilizing the nurse advice line.

The nurse advice line is a free service for members available 24 hours a day, 7 days a week, even on holidays. The nurse attempts to give similar advice a patient would receive from a physician by following patented algorithm-based, physician-developed clinical assessment tools. The Nurse Advice Line can help relieve your workload by providing self-care tips to your patients, potentially negating the need for them to see you in person. The Nurse Advice Line is staffed 24 hours a day to help answer questions.

L.A. Care and its sub-contracted plans all operate Nurse Advice Lines. Members can find the number to call on the back of their Member ID Cards. For reference, the numbers are as follows:

L.A. Care
1-800-249-3619

Kaiser
1-888-576-6225

Care1st
1-800-609-4166

Anthem Blue Cross
1-800-224-0336

Continued from page one.

Making a Difference about Social Determinants of Health: What Physicians Can Do

By being aware of socioeconomic factors such as insurance status, educational background, occupational history, housing conditions, and social isolation, physicians can make more comprehensive diagnoses and tailor therapies to their patients' needs.

Physicians can also assist in removing barriers to healthy lifestyles as advocates—for example, campaigning against the recent cut to the food stamp program and actively supporting legislation to maintain and improve the quality of air, drinking water, and food. An example is the physician-led public health efforts which have been instrumental in reducing the incidence of lead poisoning in vulnerable populations.

This can be daunting for providers who already have large patient populations with increasingly challenging medical conditions. Medical care alone cannot address the impact of poverty. However, physician acknowledgement of poverty's impact on patients' health is critical.

Specific steps physicians can take to make a difference include:

- Screening for and documenting poverty in patient health records
- Acknowledging and addressing financial concerns
- Providing extra outreach and assistance for vulnerable groups
- Addressing health literacy issues
- Supporting access to healthy food resources, including food programs, such as:

- **CalFresh (food stamps)**
calfresh.ca.gov
- **WIC (Women, Infants & Children),** cdph.ca.gov/programs/wicworks
- **EBT (Electronic Benefit Transfer),** ebt.ca.gov
- **Food Banks** lafoodbank.org/pantry-locator.aspx

- Training staff to be sensitive to the needs of low-income and ethnic minority patients
- Educating patients and staff on the link between socio-economic status and disease.
- Ensuring availability of interpreters (available 24/7 through L.A. Care's Member Services Department at 1-888-839-9909)
- Providing referrals for public assistance and housing through local and state government programs.
- Ensuring that patients with a medical need are utilizing the benefit of transportation services to and from their medical appointments - available to L.A. Care members through LogistiCare (English 1-866-529-2141, Spanish 1-866-529-2142)
- Referring uninsured patients to L.A. Care's Direct Response Unit (DRU) at 1-855-222-4239 for help in getting health care coverage.

To assist providers in locating appropriate social services for their patients, L.A. Care's website now links to **healthycity.org**, an interactive website offering multiple services including a searchable resource directory and a multitude of public datasets.



Accreditation of Medi-Cal, Healthy Kids and Healthy Families Program

PROGRESS notes is a publication of L.A. Care Health Plan for our Medi-Cal and Medicare Advantage (HMO SNP) 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:** (800) 400-4889
24 hours a day, 7 days a week.
- **Provider Services:** (866) LA-CARE6 (866) 522-2736
(Eligibility & Claims questions only).
- **Provider Relations:** (213) 694-1250 x4719.
- **Utilization Management:** phone (877) 431-2273, fax (213) 438-5777 for authorization requests.
- **LTSS Department:** (855) 427-1223 for Long Term Services and Supports.
- **HCC Outreach Specialist, Betty Garcia:** (213) 694-1250 x4935 phone, fax (213) 438-4874 fax for Annual Wellness Exam (AWE) Forms.
- **Health Education:** (855) 856-6943 for forms and programs.
- **Nurse Advice Line:** L.A. Care—(800) 249-3619, Kaiser—(888) 576-6255, Care1st—(800) 609-4166, Anthem Blue Cross—(800) 224-0336.
- **Beacon Health Strategies:** (877) 344-2862 (TTY/TDD 800-735-2929) for mental health care 24 hours a day, 7 days a week.
- **L.A. Care Covered:** (855) 270-2327 (Providers: Option "2")



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L.A. Care
HEALTH PLAN®
For a Healthy Life

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news alert

It's NCQA Survey Time!

SEE PAGE 6

PROGRESS notes

In this issue

- 1 | **Making a Difference about Social Determinants of Health: What Physicians Can Do**
- 5 | **Ensure Best Practices for Providing Quality Care to a Diverse Patient Population!**
- 6 | **Get Rewarded with L.A. Care's Physician P4P Program!**
- 8 | **Helping Members Get the Care They Need at Home**
- 9 | **L.A. Care Launches First Medi-Cal "Blue Button"**
- 10 | **Help When You Need It from L.A. Care's Nurse Advice Line**

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