



PROVIDER UPDATE

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CalOptima Ending Faxed Monthly Provider Updates

CalOptima is ending its faxed Provider Alerts and monthly Provider Update and transitioning to emailed alerts and updates. The final faxed Provider Update will be in March 2022.

CalOptima will continue to share important health care news, regulatory updates and meeting announcements through the improved email Provider Update. In addition to an updated design, the new format also allows for direct access to links, websites and other files.

To continue receiving the monthly updates, providers need to send an administrative email address, per site location, to providerservicesinbox@caloptima.org. Providers can contact their Provider Relations representative or call **714-246-8600** with any questions.

CalOptima Board of Directors Extends Third Supplemental COVID-19 Payment

On February 3, the CalOptima Board of Directors approved extending the third temporary 5% supplemental payment increase for certain medically necessary services through June 30, 2022.

The short-term supplemental payments, totaling up to \$8.3 million, were initiated due to the COVID-19 pandemic to assist providers in administering and promoting COVID-19 vaccinations, strengthening access to care, and offering COVID-19-related testing and treatment.

The payments apply to compliant, directly contracted Medi-Cal providers. They cover services provided to CalOptima Community Network and CalOptima Direct members, including Behavior Health provider services for all CalOptima members. The payments do not apply for services provided to members in CalOptima's Program for All-Inclusive Care for the Elderly (PACE), OneCare and OneCare Connect. The last supplemental payments began September 1, 2021, and expired on December 31, 2021, so this extension is retroactive to January 1, 2022.

Excluded from the supplemental payment increase are:

- Pharmacy and pharmacy benefit management services, and other contracted administrative service providers for which CalOptima covers the cost of claims
- Nonpharmacy administered drugs
- Long-term care facilities
- Durable Medical Equipment, orthotics and prosthetics, and other medical devices
- Crossover claims
- Other supplemental or directed payments, such as Proposition 56
- Claims paid by Letter of Agreement (LOA)

For more information, contact CalOptima's Provider Relations department at 714-246-8600 or email providerservicesinbox@caloptima.org.

CalOptima Welcomes Dr. Richard Pitts as New CMO

CalOptima welcomes Richard Pitts, D.O., Ph.D. as Chief Medical Officer. As CMO, Dr. Pitts oversees CalOptima's health care delivery system, including development and implementation of strategies, programs, policies and procedures. He is responsible for leading key CalOptima departments, including Clinical Operations, Utilization Management, Case Management, Long-Term Support Services, Pharmacy Management, Enterprise Analytics and PACE.

Dr. Pitts is a physician and health care executive with a distinguished career spanning clinical practice and occupational health, as well as medical group and hospital leadership for organizations, such as Prospect Medical Systems, St. Joseph Heritage Healthcare and Arrowhead Regional Medical Center. Dr. Pitts holds a bachelor's degree in Chemistry from Chapman University, a Doctor of Osteopathic Medicine from Des Moines University and a Ph.D. in Management & Decision Sciences from Walden University.

Magellan, DHCS Supply Resources for Providers Following Transition to Medi-Cal Rx

CalOptima reminds providers of the resources available following the transition of Medi-Cal pharmacy benefits to the Medi-Cal Rx fee-for-service delivery system on January 1, 2022.

All benefits billed on a pharmacy claim have been transitioned to Medi-Cal Rx, which is also reviewing all Prior Authorizations (PAs). Certain common medications may require a PA, and providers can find the Medi-Cal Rx Contract Drug List at the following website: <https://medi-calrx.dhcs.ca.gov/home/cdl/>.

Providers who have questions about the Medi-Cal Rx Contract Drug List or PAs under the new system can contact CalOptima's Pharmacy department calling 714-246-8600 and selecting Option 4.

For additional questions, the California Department of Health Care Services (DHCS) has added a Frequently Asked Questions section to its Medi-Cal Rx website at <https://medi-calrx.dhcs.ca.gov/home/faq/>. DHCS also periodically releases news and updates via its Medi-Cal Rx Subscription Service (MCRxSS), which providers are encouraged to subscribe to by visiting <https://mcrxsspages.dhcs.ca.gov/Medi-CalRxDHCSagov-Subscription-Sign-Up>.

Prescribing providers can also use the Medi-Cal Rx Secured Provider Portal, which grants access to various applications, education materials, training courses and other resources. Another highly recommended option is using CoverMyMeds (CMM) to initiate and submit PAs. Those providers who use CMM to submit, view and manage PAs are not required to register for the Medi-Cal Rx Secured Provider Portal.

Virtual office hours are held daily at noon on Zoom, where providers can report issues with the Medi-Cal Rx Secured Provider Portal. To attend on Zoom, use the following link: <https://bit.ly/33aEROm>. The Meeting ID number is 949 6443 4351 and the password is 655990.

Providers can also call in to the meeting using the following phone numbers: 1-699-900-6833 or 1-346-248-7799.

To contact the Medi-Cal Rx Customer Service Center, available 24 hours a day, 365 days a year, call 1-800-977-2273 or email MediCalRxEducationOutreach@magellanhealth.com.

DHCS Shares High Blood Pressure Quality Improvement Postcard

As the COVID-19 pandemic has disrupted both daily life and routine medical care, DHCS is sharing a series of Quality Improvement (QI) postcards with relevant information about health care concerns.

In February, DHCS released the Controlling High Blood Pressure QI Postcard. Hypertension affects almost half of all adults in the United States, making high blood pressure a priority. The postcard contains information for providers to address hypertension by enhancing processes, using community partnerships and educating members.

To view the Controlling High Blood Pressure postcard, please visit https://www.chgsd.com/docs/default-source/providers/covid-postcards/dhcs-blood-pressure-qi-postcard.pdf?sfvrsn=6cb25bdd_0.

OneCare Connect Transition Set for End of 2022

OneCare Connect, CalOptima's Cal MediConnect Plan, is set to sunset on December 31, 2022. At that time, OneCare Connect members will be transitioned to OneCare, CalOptima's Dual Eligible Special Needs Plan. A contract amendment is forthcoming to providers currently contracted for OneCare Connect to join OneCare, effective January 1, 2023.

OneCare Connect, which combines Medi-Cal and Medicare benefits into a single health plan, launched as a pilot program on July 15, 2015, and was initially scheduled to end on December 31, 2017. However, it received multiple extensions from DHCS, with the latest extension scheduled to expire at the end of 2022.

CalOptima received authorization from both DHCS and the Centers for Medicare & Medicaid Services (CMS) to transition members enrolled in OneCare Connect to OneCare by January 1, 2023. As part of that migration, CalOptima has engaged with all health networks currently serving OneCare Connect members to plan for their continued or expanded participation in OneCare moving forward. In December 2021, CalOptima had 14,933 members enrolled in OneCare Connect.

Work is ongoing to align the OneCare and OneCare Connect programs for a seamless transition, and CalOptima will continue to collaborate with health providers leading up to the change. Enrollment into OneCare Connect will be suspended on December 1, 2022.

Providers with questions regarding the transition from OneCare Connect can contact Provider Relations at 714-246-8600 or providerservicesinbox@caloptima.org.

Encounter Data Validation Survey Request Coming Soon

DHCS has contracted with Health Services Advisory Group (HSAG), an external quality review organization, to conduct an encounter data validation study. The study involves the evaluation of encounter data compared with medical record documentation for services rendered between January 1 and December 31, 2020.

To prepare for the HSAG review, CalOptima has contracted with J&H to retrieve medical records from providers. Providers should start receiving requests from J&H soon. The request will have a tracking data sheet, which includes the member's information and date of service. In addition to submitting the medical records for the date identified, providers are required to submit a second date of service. The second date of service needs to be the closest one to the date identified on the tracking sheet (if available). This second date can be before or after the identified date. Please complete the form and return it to J&H. CalOptima is required to submit that form along with the medical record to HSAG. We appreciate providers' collaboration on documenting quality of care.

DHCS Extends Pregnancy and Postpartum Coverage

DHCS has distributed a Postpartum Extension Deliverables List, which expands the timeline of coverage for pregnancy-related and postpartum care services.

Effective April 1, 2022, the postpartum care period for individuals receiving these services will extend an additional 10 months, following the current 60-day postpartum period, for a total of 12 months of coverage. This coverage will include all medically necessary services. Additionally, coverage will be extended to full-scope benefits during both the pregnancy and postpartum periods, regardless of citizenship status or income changes. This is in response to the American Rescue Plan Act (ARPA) and will fully replace the current Provisional Postpartum Care Extension (PPCE), which will expire on March 31, 2022.

To read the full DHCS announcement, please visit the newsroom section of the agency's website at https://files.medical.ca.gov/pubsdoco/newsroom/newsroom_31351.aspx.

DHCS Informs about New Managed Care Program Annual Report

On January 31, 2022, DHCS informed managed care plans (MCPs) of the new Managed Care Program Annual Report (MCPAR). Pursuant to [42 CFR §438.66\(e\)](#), DHCS is required to submit the MCPAR to CMS for each managed care program it administers, regardless of the authority under which the program operates. The report will capture information in the categories listed below and will allow CMS to generate and analyze state-specific and nationwide data on managed care programs and requirements. The categories are:

1. Program enrollment and service area expansions
2. Financial performance
3. Encounter data reporting
4. Grievances, appeals and state fair hearings
5. Availability, accessibility and network adequacy
6. Delegated entities
7. Quality and performance measures
8. Sanctions and corrective action plans
9. Beneficiary support system (BSS)
10. Program integrity

APLs: Substance Use Screenings, COVID-19 Vaccine Administration, Social Determinants of Health

- On October 14, 2021, DHCS released [All-Plan Letter \(APL\) 21-014: Alcohol and Drug Screening, Assessment, Brief Interventions and Referral to Treatment](#), which clarifies primary care requirement to provide Alcohol and Drug Screening, Assessment, Brief Interventions and Referral to Treatment (SABIRT) to members ages 11 years and older, including pregnant women. This APL supersedes [APL 18-014](#).
- On December 22, 2021, DHCS released [Revised All-Plan Letter \(APL\) 20-022: COVID-19 Vaccine Administration](#), giving guidance regarding COVID-19 vaccine coverage and administration in the Medi-Cal program.
- On February 7, 2022, DHCS released [Revised All-Plan Letter \(APL\) 21-009: Collecting Social Determinants of Health Data](#), providing guidance on using the DHCS Priority Social Determinants of Health (SDOH) Codes to collect reliable SDOH data.

CalOptima Reminds OneCare Connect Providers of Hierarchical Condition Categories

As a reminder to OneCare Connect providers, hierarchical condition categories (HCCs) are accepted on face-to-face encounters, including in-person visits, as well as audio and video telecommunication platforms.

Clinical staff may call the member ahead of the telehealth visit to obtain self-reported vitals, update medication lists (CPT Category 2 Code 1111F – Discharge Medication Reconciled with the Current Medication List in Outpatient Medical Record Documented) and screen for chronic disease status.

If the member has hypertension and a home blood pressure monitoring device and scale, the member or caregiver can communicate the blood pressure reading and weight to the provider to analyze, address and document in the member’s encounter note.

During the member’s Annual Wellness Visit (AWV), obtain and document their self-reported vitals measured by their home monitoring device.

Document member counseling, education, member acknowledgment, coordination of care and follow-up on work-up conditions throughout the member’s continuum of care.

Also, please respond to CalOptima Community Network OneCare Connect attestation return notifications in a timely manner. Amendments can only be made if missing information was left out, or from follow-up notes based on diagnostic tests ordered and related to test results received within 90 days from the encounter date of service.

For the February spotlight, and as part of American Heart Awareness Month, the following is a table of ICD-10-CM codes related to hypertension and heart disease.

Hypertensive heart disease with heart failure (HF) Use additional code to identify type of HF (I50-150.9)	I11.0
Hypertensive CKD with stage 5 CKD or end stage renal disease (ESRD) Use additional code to identify the stage of CKD (N18.5, N18.6)	I12.0
Hypertensive CKD with stage 1 through stage 4 CKD, or unspecified CKD (N18.1-N18.4, N18.9)	I12.9
Hypertensive heart and CKD with HF and stage 1 through stage 4 CKD, or unspecified CKD	I13.0
Hypertensive heart and CKD without HF, with stage 1 through stage 4 CKD, or unspecified CKD Use additional code to identify stage of the CKD (N18.1-N18.4, N18.9)	I13.10
Hypertensive heart and CKD without HF, with stage 5 CKD, or ESRD Use additional code to identify the stage of CKD (N18.5-N18.6)	I13.11
Hypertensive heart and CKD with HF, with stage 5 CKD, or ESRD Use additional code to identify type of HF (I50-I50.9) Use additional code to identify the stage of CKD (N18.5-N18.6)	I13.2

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Hypertension and Heart Disease ICD-10-CM (cont.)

Unstable angina pectoris	I20.0
Other forms of angina pectoris (e.g., stable)	I20.8
Angina pectoris, unspecified (e.g., ischemic chest pain)	I20.9
Use additional code to identify: Exposure to environmental tobacco smoke	Z77.22
History of tobacco dependence	Z87.891
Occupational exposure to environmental tobacco smoke	Z57.31
Tobacco Dependence	F17
Tobacco Use	Z72.0
ST elevation (STEMI) myocardial infarction of coronary artery site (Acute MI)	I21.0
Non-ischemic (Acute or Chronic) myocardial injury (non-traumatic)	I5A
Document and code first the underlying cause, if known and applicable	
Subsequent STEMI and NSTEMI MI of coronary site	I22
MI specified as acute or with a stated duration of 4 weeks (28 days) or less from onset can be reported (Document the event timeline)	
Use additional code, if applicable, to identify patient's smoking status	
Old MI	I25.2
Atherosclerosis heart disease of native coronary without angina pectoris	I25.10
Atherosclerosis of coronary artery bypass graft(s) (CABG), unspecified, with unstable angina pectoris	I25.700
- with other forms of angina pectoris (e.g., stable)	I25.708
Atherosclerosis of native coronary artery of transplanted heart with angina pectoris	I25.709
Atherosclerosis heart disease of native coronary artery with unstable angina pectoris	I25.110
- with other forms of angina pectoris (e.g., stable)	I25.118
- unspecified angina pectoris (e.g., ischemic chest pain)	I25.119
Primary pulmonary hypertension	I27.0
Secondary pulmonary arterial hypertension	I27.21
Code also associated conditions if applicable, or adverse effects of drugs or toxins	

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Hypertension and Heart Disease ICD-10-CM (cont.)

Dilated cardiomyopathy	I42.0
Other hypertrophic (e.g., nonobstructive) cardiomyopathy	I42.2
Alcoholic cardiomyopathy	I42.6
Document and code also presence of alcoholism (F10-F10.99)	
Other cardiomyopathies (Document type)	I42.8
Paroxysmal atrial fibrillation	I48.0
Longstanding persistent atrial fibrillation (lasting longer than a year)	I48.11
Other persistent atrial fibrillation (e.g., chronic)	I48.19
Chronic atrial fibrillation	I48.20
Permanent atrial fibrillation	I48.21
Atypical atrial flutter	I48.4
Acute systolic (congestive) HF	I50.21
Chronic systolic (congestive) HF	I50.22
Acute on chronic systolic (congestive) HF	I50.23
Acute diastolic (congestive) HF	I50.31
Chronic diastolic (congestive) HF	I50.32
Acute on chronic diastolic (congestive) HF	I50.33
Chronic combined systolic (congestive) and diastolic (congestive) HF	I50.42
Acute on chronic combined systolic (congestive) and diastolic (congestive) HF	I50.43

Policies and Procedures Monthly Update

The following list outlines changes made to CalOptima policies and procedures during **January 2022**. The full description of the policies below is available on CalOptima's website at www.caloptima.org.

Policy Number	Policy Title, Purpose, Revision, and Program	Policy Review and/or Revision Date
Medi-Cal		
AA.1208	Non-Monetary Member Incentives	12/01/21
DD.2012	Member Notification of Change in the Availability or Location of Covered Services	12/01/21
GG.1410	Appeal Process for Pharmacy Authorization	12/01/21
GG.1652	DHCS Notification of Change in the Availability or Location of Covered Services	12/01/21
Multiple Programs		
GG.1201Δ	Health Education Programs	12/01/21
GG.1539	Authorization for Out-of-Network and Out-of-Services	12/01/21
MA.2100	Telehealth and Other Technology-Enabled Services	01/01/22
MA.3101	Claims Processing	01/01/22
PACE		
PA.5042	Safe Environment for Participants in the PACE Center	01/01/22
PA.5044	Infection Control	01/01/22
PA.8001	Reporting of Events Involving Participant Health and Safety Occurring at the PACE Center	01/01/22

Health Education: Trainings and Meetings

March Webinars	
Accelerated Learning Education Program: Diabetes Management HbA1C Control Tuesday, March 1, 2022 12 p.m.	https://bit.ly/3rBB5a7
Denver Prevention Training Center Tuesday, March 1, 2021 11 a.m.	https://www.denverptc.org/class_information.html?id=1343
Accelerated Learning Education Program: Controlling High Blood Pressure Tuesday, March 15, 2022 12 p.m.	https://bit.ly/3uEe5sM
Obstructive Sleep Apnea: Impacts, Diagnosis and Treatments Thursday, March 17, 2022 2 p.m.	https://www.magellanhealthcare.com/event/obstructive-sleep-apnea-impacts-diagnosis-and-treatment/
From Hardship to Hope: Strategies to Foster Financial Wellness Wednesday, March 30, 2022 2 p.m.	https://www.magellanhealthcare.com/event/from-hardship-to-hope-strategies-to-foster-financial-wellness-ce-eligible/
Monthly Webinars	
The Resources for Integrated Care – Webinar Recordings	https://www.resourcesforintegratedcare.com/
Asthma Management Academy (AsMA)	https://www.cdph.ca.gov/Programs/CCDPHP/DEODC/EHIB/CPE/Pages/AsMA.aspx
Every Tuesday and Thursday	
Chlamydia Screening for Adolescent Patients E-learning Collaborative (CT eLC)	https://californiaptc.com/national-quality-improvement-center/chlamydia-screening-for-adolescent-patients-elearning-collaborative/?utm_source=eLearning+Collaborative+Announcement+-+CT+Screening&utm_campaign=eLC_Recruitment&utm_medium=email
Medi-Cal Learning Portal	https://learn.medi-cal.ca.gov/
Ongoing/On-Demand Webinars	
Training for Health Care Professionals – CDC	https://www.cdc.gov/coronavirus/2019-ncov/hcp/training.html
Screening, Brief Intervention, and Referral to Treatment (SBIRT) Training	https://healthknowledge.org/course/index.php?categoryid=50
Smoking Cessation Leadership Center	https://smokingcessationleadership.ucsf.edu/webinars

Health Education: Trainings and Meetings (cont.)

Ongoing/On-Demand Webinars (cont.)	
National Diabetes Education Program	https://www.cdc.gov/diabetes/professional-info/training.html?CDC_AA_refVal=https://www.cdc.gov/diabetes/ndep/training-tech-assistance/index.html
Free Continuing Education (CME) from MMWR and Medscape	https://login.medscape.com/login/sso/getlogin?urlCache=aHR0cDovL3d3dy5tZWZyY2FwZS5vcmcvdmld2FydGlibGUvODg4ODIx&ac=401
LifeScan Institute LLC Webinars	https://www.lifescandiabetesinstitute.com/
Medicare Learning Network	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/WebBasedTraining

Provider Code Updates

Based on the Medi-Cal bulletins and Newsflashes, CalOptima has updated the procedure codes for the subjects listed below:

- Medi-Cal Rx Transition: Changes to Medi-Cal Providers Website Implemented
- Rates Update for Certain Contraceptive Drugs
- Updates to Family PACT and Medi-Cal Programs Clinics Dispensing Policy for STIs
- Minor Consent Program: Mental Health Outpatient Care Eligibility
- CT Scan Bone Density Study for Osteoporosis Added as Medi-Cal Benefit
- Safety Net Clinic Billing Instructions for CalAIM Dental Initiatives
- New Electronic Claim Resubmission Helps Providers Avoid Paper CIFs/Appeals
- CCS Service Code Groupings Policy Update
- Removal of the Specialty Mental Health Services Manual Section
- Cardiovascular Codes Correction
- IDUA Full Gene Sequence Added as a Medi-Cal Benefit
- 2022 ICD-10-CM/PCS Codes Update
- Tax Status Updated for DME Codes
- Reminder: Pharmacy Claims Submitted to Medi-Cal Rx
- Pfizer-BioNTech COVID-19 Vaccine Updates for Third Dose, Booster Dose and Shortening of its Time Requirements
- Reimbursing of COVID-19 Vaccine and Monoclonal Antibody Administration for Medical Providers

For detailed information regarding these changes, please refer to: January General Medicine Bulletin 571 <https://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/gm202201.aspx>, January Durable Medical Equipment and Medical Supplies Bulletin 556 <https://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/dme202201.aspx>, and Medi-Cal Newsflashes https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_30931_19.aspx, https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_31132_52.aspx, https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_30717_46.aspx.

Important Meetings

Meeting	Date and Time
CalOptima Board of Directors	March 3, 2 p.m.
CalOptima Provider Advisory Committee	March 10, 8 a.m.

Unless otherwise specified, all meetings are held virtually at this time due to COVID-19. To select the virtual meeting you would like to attend, visit the CalOptima website at www.caloptima.org/en/About/BoardAndCommitteeMeetings.aspx.

Follow CalOptima on Social Media



CalOptima regularly posts on social media to engage members with health tips, community resources, event dates, program updates and other pertinent information.

Follow the agency on **Facebook**, **Instagram**, **Twitter** and **LinkedIn**.

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