

CONTRACT DEFINITIONS

The following definitions are incorporated into provider Agreements. They were removed from the Agreement(s) for ease in updating or standardization of definitions throughout CenCal Health Agreements.

“Child Health and Disability Prevention Program” or ”CHDP” shall mean California’s version of the Federal Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program. The CHDP Program provides for the payment of well child visits, screening procedures, and immunizations for children (to age 21), which are also CenCal Health covered services. CenCal Health currently does not administer the CHDP Program. Therefore CHDP providers must separately bill the State CHDP Program for services covered by this Program. Non-CHDP providers and CHDP providers whose claims already have been denied by the State CHDP Program bill CenCal Health.

“CHDP Providers” shall mean providers of medical services who have applied to and have been approved by Santa Barbara or San Luis Obispo County’s Child Health and Disability Prevention (CHDP) Program and agree to provide CHDP services according to the CHDP Health Assessment Guidelines and the CHDP Program regulations in the Health and Safety Code, Section 124025 and following. Even if CenCal Health assumes administrative responsibility for the CHDP Program, Santa Barbara and San Luis Obispo County will retain the authority to recruit, certify, and re-certify CHDP Providers and to monitor their compliance.

“Credentialing Program” shall mean that portion of CenCal Health’s Quality Assessment and Improvement Program that provides for the review of credentials and other information, including a complete application, in order to evaluate the qualifications, affiliations, and competency of physicians or other practitioners contracting with CenCal Health. Practitioners must satisfactorily complete, or be eligible to complete, the credentialing process in order to contract with CenCal Health.

“Dental Services” is not a Covered Service, and shall mean professional services performed or provided by dentists including diagnosis and treatment of malposed human teeth, of disease or defects of the alveolar process, gums, jaws and associated structures; the use of drugs, anesthetics and physical evaluation; consultations; home, office and institutional calls. CenCal Health is responsible for dental surgery facility costs, as well as anesthesia services associated with dental surgery.

“Health Care Professional” means any person licensed or certified to provide health care services to Members, including but not limited to, a physician, dentist, nurse, optometrist, physical or occupational therapist, psychiatric social worker, clinical dietitian, clinical psychologist, chiropractor, pharmacist, or speech therapist.

“Identification Card” shall mean a card prepared by CenCal Health, which indicates the name of the program (SBHI, SLOHI, Healthy Families, Healthy Kids, IHSS, or AIM), the name and identification number of the Member or subscriber, the name of the Member's/subscriber’s PCP (unless a Medi-Cal Member belongs to Special Class in which case CenCal Health is named as Case Manager), and other identifying data. The Identification Card contains CenCal Health’s name and logo and is distinct from the State issued BIC. The Identification Card is not proof of current Member eligibility in the identified program.

“Medical Advisory Committee” or “MAC” shall mean a committee of physicians and non-physicians, appointed by CenCal Health’s Board of Directors and chaired by CenCal Health’s Medical Director, which is responsible to annually provide input into CenCal Health’s development of clinical strategies, such as clinical guidelines, disease management, health management systems, and the adoption of new medical technologies and clinical studies. Additionally they have oversight that includes but is not limited to the annual review of the Quality Assessment and Improvement Plan and Clinical Internal Quality Improvement Plans.

“Peer Review Committee” shall mean a committee appointed by the Board of Directors and comprised solely of physicians, whose responsibility is to provide guidance and peer input into CenCal Health’s practitioner peer review process. The Committee functions include review of member complaints and appeals involving clinical quality of care concerns, review of clinical performance reviews, and identify and address potentially specific serious quality of care concerns and develop correction action plans when necessary.

“Provider Advisory Board” shall mean a committee appointed by CenCal Health’s Board of Directors and composed of physicians and non-physicians whose responsibility is to provide input into CenCal Health’s quality improvement process. The Committee functions include provide guidance for enhancements to the provider grievance system and provider satisfaction with health plan processes, provide input regarding provider communications and education materials, make recommendations regarding provider non-clinical quality improvement activities, and review provider profiles related to: (i) service delivery; (ii) access; and (iii) compliance with corrective actions.

“Provider Credentials Committee” shall mean a committee appointed by the Board of Directors and comprised solely of contracted, credentialed network providers, whose responsibility is to provide guidance and peer input into CenCal Health’s provider credentialing process. The Committee functions include review and processing of requests of potential providers for initial participation in the network as well as for reappointment, approval of providers’ initial or subsequent credentials based on clinical competency and/or professional conduct, annual review of CenCal Health’s Credentialing Policy, and review of provider profiles related to clinical performance.

PS 5/17/06, updated STh 12/2007