

# PROVIDER BULLETIN

A QUARTERLY PUBLICATION  
FOR PROVIDERS

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A MESSAGE FROM OUR CEO

# Remaining Focused on Advancing Quality and Health Equity

**In 2023, CenCal Health's Board of Directors adopted a bold vision to be a trusted partner in advancing health equity so that our communities thrive and achieve optimal health together.**

As we celebrate our 40th year in Santa Barbara County and 15th in San Luis Obispo County, we are reminded of the importance of cultivating community partnerships and supporting the providers who serve our members. Together, we have seen great improvement each year in quality outcomes because of your commitment and dedication. Last year, the Department of Healthcare Services recognized CenCal Health and our provider partners as those in the highest tier for quality of care in the Medi-Cal Program.



As we look ahead, exceeding quality standards and advancing health equity will be key priorities. Through innovative local programs, like the Quality Care Incentive Program and Enhanced Care Management, local providers are supporting this vision of optimal health. With the expansion of community supports, including medically-tailored meals, recuperative care, and housing navigation for those experiencing homelessness, local providers are advancing health equity for all. Despite the growth and continued expansion of these important programs, CenCal Health remains focused on our customer service and improving our provider's experience working with our health plan. We are always open to hearing from you, should you be interested in joining one of our committees or have suggestions for improvement. We look forward to our continued partnership.

*Marina A. Owen*

Thank you, Marina Owen  
Chief Executive Officer of CenCal Health

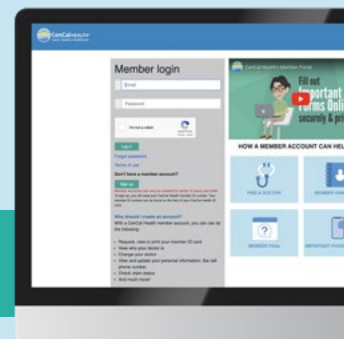


PROVIDER NEWS

## New private Member Accounts available to adult members

CenCal Health now offers all members (18+) a secure, Member Portal Account upon registration at [www.cencalhealth.org](http://www.cencalhealth.org). The Member Portal allows members to update their mailing address, phone number, and demographic information.

It also allows them to view important health appointment reminders, view their assigned PCP information or change their PCP, see authorization and billing history, complete important forms online, like annual Health Risk Assessment Surveys, and more!



**Help members register today!**

<https://memberportal.cencalhealth.org>

## Medi-Cal Redetermination has restarted

States were required to restart their Medi-Cal eligibility redetermination process beginning April 1, 2023. Sometime over the next 12 months, most of your patients will need to renew their coverage, to prove they still qualify. For those who joined Medi-Cal in the last three years, they will be unfamiliar with this process.

Help your patients keep CenCal Health

Medi-Cal beneficiaries began receiving Renewal Packets at the end of April 2023, with the first discontinuances beginning as early as July 2023 for those who do not provide the requested information to verify eligibility requirements. Completion of renewal packets is crucial to ensuring that Medi-Cal members maintain coverage. Below are resources which you can share with your patients.

### Important information to share with your Medi-Cal patients:

- We've put together an FAQ for providers to educate themselves and their members about the process. [cencalhealth.org/providers/redeterminationFAQ](https://cencalhealth.org/providers/redeterminationFAQ).
- Department of Health Care Services (DHCS) created a new Medi-Cal Renewal Website [www.KeepMediCalCoverage.org](http://www.KeepMediCalCoverage.org) for members to create an online account to verify their contact information is correct in order to receive their Renewal Packet. Please share this website as much as possible with your Medi-Cal members.
- Some beneficiaries will be auto-renewed and will receive a Letter of Approval however, the majority will receive a Renewal Packet by mail sometime over the next 12 months, which must be completed and returned to their local DSS office or on-line following the instructions at their client portals at: [www.mybenefitscalwin.org](http://www.mybenefitscalwin.org) (SLOC) or <https://benefitscal.com> (SBC). It's important to note that if a member's address and phone number information is not up to date, this packet will not be able to be delivered, and members risk discontinuance for lack of returned information.
- DHCS also created a Renewal Toolkit for health plans to share with our providers and community partners. DHCS wants these to be used in their current formats so that standard messaging is out to beneficiaries across California. Providers may access these posters, text scripts, flyers, call scripts and social media/website content for use in your offices and correspondence with Medi-Cal members at: [www.dhcs.ca.gov/toolkits/Pages/Medi-Cal-Continuous-Coverage-Unwinding.aspx](http://www.dhcs.ca.gov/toolkits/Pages/Medi-Cal-Continuous-Coverage-Unwinding.aspx)



Members can find DSS' phone numbers & addresses at [cencalhealth.org/keep](https://cencalhealth.org/keep) or [cencalhealth.org/mantenga](https://cencalhealth.org/mantenga)

## NEW 2023 Provider Manual released!

Find answers for most questions here

CenCal Health has revised our Provider Manual, which includes information on provider responsibilities, claims information, member eligibility, guidelines for medical authorizations, and more! Please view our electronic guide online at [cencalhealth.org/providers/forms-manuals-policies/provider-manual/](https://cencalhealth.org/providers/forms-manuals-policies/provider-manual/) today!

If you have any questions about this publication, please contact the Provider Relations Department at [psrgroup@cencalhealth.org](mailto:psrgroup@cencalhealth.org).

### Reminder:

## Appeals on Behalf of Members Require Written Consent

**CenCal Health supports a “no wrong door” process for submission of grievances and appeals.**

Providers may submit appeals on behalf of a member, however regulations require that the written consent of the member be obtained by the Provider prior to submission of an appeal on the member's behalf. CenCal Health wishes to remind all providers that such written consent must accompany an appeal on behalf of a member in order for the appeal to be accepted.

You can print a CenCal Health member Consent Form for your office at [cencalhealth.org/providers/file-grievance/](https://cencalhealth.org/providers/file-grievance/). Please contact CenCal Health Provider Relations Department at (805) 562-1676 with any questions.



# COVID-19 reminders: No member cost for testing, treatment

**CenCal Health is dedicated to keeping our providers up to date with the most current information for the screening, testing, and treatment of COVID-19.**

As a reminder, there is no cost to a CenCal Health member for medically needed screening, testing, and treatment for COVID-19. The following National Institutes of Health (NIH) COVID-19 Treatment Guidelines provide clinicians with evidence-based recommendations on the management of COVID-19 treatment options. You can locate the NIH COVID-19 Treatment Guidelines online at [www.covid19treatmentguidelines.nih.gov/management/clinical-management-of-adults/](http://www.covid19treatmentguidelines.nih.gov/management/clinical-management-of-adults/)

## NIH COVID-19 Treatment Guidelines

Medication	Pharmacy Benefit (Billed by a pharmacy)	Medical Benefit (Billed on a medical claim)	
	Medi-Cal Rx	Medi-Cal FFS	CenCal Health Benefit
Paxlovid (nirmatrelvir/ritonavir)	Yes	No	No
Lagevrio (molnupiravir)	Yes	No	No
Veklury (remdesivir)	Yes	Yes	Yes

For more information, including Medi-Cal RX Treatment Resources and test to treat sites, please visit [cencalhealth.org/providers/covid-19-resources/](http://cencalhealth.org/providers/covid-19-resources/) or contact our Provider Services department at (805) 562-1676.

## CenCal Health CalAIM Whole-Person Care July Webinar

CalAIM is a long-term initiative created by the California Department of Health Care Services (DHCS) to transform and strengthen Medi-Cal. The mission of CalAIM is to offer Californians a more equitable, coordinated, and person-centered approach to maximize their health and life trajectory.

With CalAIM, the holistic health needs of members are prioritized through prevention and whole-person care. Whole-person care means members with complex needs have access to novel services that extend beyond traditional healthcare settings. These services aim to provide comprehensive care and achieve better health outcomes for members whose wellness is impacted by complex social factors, including homelessness, behavioral health, care needs for older adults, transitioning from incarceration, and more.

Join CenCal Health on July 26th as we share CalAIM's primary goals, learn how to identify members who might benefit from Enhanced Care Management (ECM) with our populations of focus now and in the future, as well as how to refer eligible members for Community Support (CS) housing services, medically tailored meals services, and more!

To RSVP for this virtual learning experience go to Provider Training & Resources online at [cencalhealth.org/providers/provider-training-resources/](http://cencalhealth.org/providers/provider-training-resources/)



# Do you have patients that could benefit from Community Health Worker services?

CenCal Health covers Community Health Worker (CHW) services as preventive services, on the written recommendation of a physician or other licensed practitioner of the healing arts within their scope of practice.

CHW services are preventive health services delivered by a CHW to prevent disease, disability, and other health conditions or their progression; to prolong life; and to promote physical and mental health. CHWs may include individuals known by a variety of job titles, such as promotores, community health representatives, navigators, and other non-licensed public health workers, including violence prevention professionals.

Importantly, CHW services provide a mechanism for the delivery of equitable and culturally competent care for CenCal Health members which align with CenCal Health's Population Health Management program.

Services may be provided to a parent or legal guardian of a CenCal Health member under the age of 21 for the direct benefit of the member, in accordance with a recommendation from a licensed provider.

To learn more about this service please reference Section 17 of the Provider Manual online at [cencalhealth.org/providers/forms-manuals-policies/provider-manual/](http://cencalhealth.org/providers/forms-manuals-policies/provider-manual/). For more information on becoming a CHW contracted provider, please contact the Provider Relations department at [psrgroup@cencalhealth.org](mailto:psrgroup@cencalhealth.org).



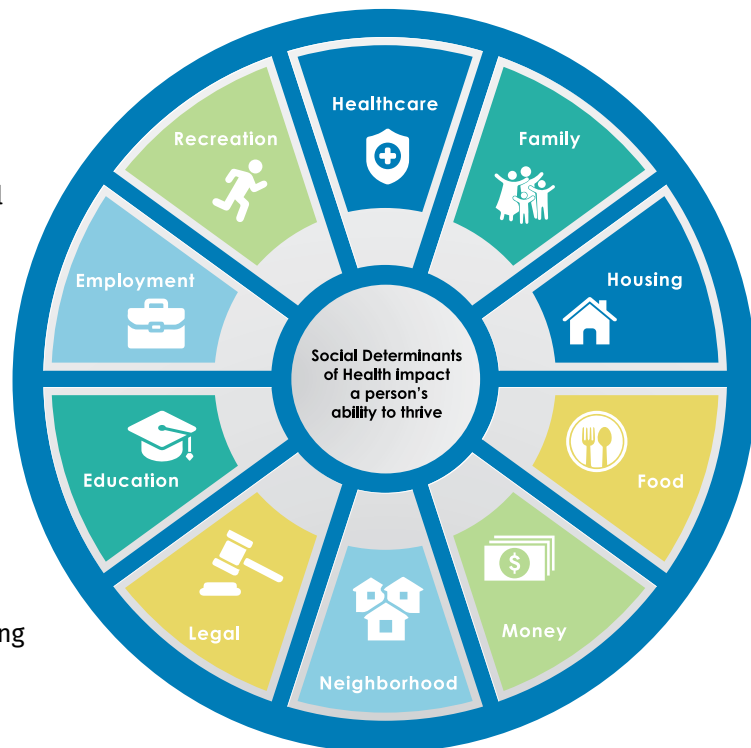
## Why CenCal Health is focusing on Social Determinants of Health

The Centers for Disease Control and Prevention (CDC) defines Social Determinants of Health (SDOH) as the nonmedical factors that influence health outcomes. The conditions into which people are born and in which they live their lives have a profound effect on their health.

To support health equity for all, CenCal Health is focused on addressing Social Determinants of Health to ensure we best address the health needs of the community we serve. CenCal Health is asking our provider partners to help us identify our members' SDOH by submitting procedure codes within authorizations and claims to allow us to appropriately assess the needs of our community. Thank you for your partnership in collecting and submitting these data.

For more information on coding for SDOH, please visit: [cencalhealth.org/providers/social-determinants-of-health/](http://cencalhealth.org/providers/social-determinants-of-health/)

Please visit the CDC website for additional information on Social Determinants of Health: [www.cdc.gov/about/sdoh/index.html](http://www.cdc.gov/about/sdoh/index.html)



## New Doula benefit for pregnancy, miscarriage, abortion, and post delivery

Any CenCal Health member who is pregnant or was pregnant within the past year and meets eligibility criteria may receive Doula services. Doula services require a recommendation from a provider.

A recommendation for services authorizes the following:

- One initial visit;
- Up to eight additional visits that may be provided in any combination of prenatal and postpartum visits;
- Support during labor and delivery (including labor and delivery resulting in a stillbirth), abortion or miscarriage; and
- Up to two extended three-hour postpartum visits after the end of a pregnancy

Doulas serving CenCal Health members provide person-centered, culturally competent care that supports the racial, ethnic, linguistic, and cultural diversity of beneficiaries, while adhering to evidence-based best practices. Doula services are aimed at preventing perinatal complications and improving health outcomes for birthing parents and infants.

If your organization would like to become a Doula provider or if you would like assistance locating a Doula provider, please contact the Provider Relations department at [psrgroup@cencalhealth.org](mailto:psrgroup@cencalhealth.org).



### CLINICAL CORNER

## New Provider Portal report for Improving Well-Baby Visits

CenCal Health has added a new “Well Baby Report” to the Provider Portal to support the provision of at least 6 well-care exams by a child’s 15<sup>th</sup> month of age.

This new report aligns with the American Academy of Pediatrics (AAP) periodicity schedule to help prevent children from falling behind in their recommended and subsequent appointments. According to AAP, by the time a child is 15 months of age, they should have received approximately eight well-care exams. In addition, this new report will support providers in improving Quality Care Incentive Program (QCIP) performance in childhood immunizations, lead testing, and developmental screenings.

**Primary Care Providers will be able to access and download the well-baby report by following these simple steps**

1. Sign into CenCal Health’s Provider Portal
2. Select Quality Care Incentive Program then Well Baby Report
3. On the Well Baby Report home screen, providers can enter a specific date to generate a report
4. Select ‘View Report’ to auto-populate detailed information for all members due for their Well Baby Exam for member outreach

For more information, please email us at [QCIP@cencalhealth.org](mailto:QCIP@cencalhealth.org).



# Street Medicine: A new Medi-Cal benefit

Among the many new benefits offered under California Advancing and Innovating Medi-Cal (CaAIM) is Street Medicine.

Street Medicine refers to health and social services developed to address the unique needs of individuals experiencing unsheltered homelessness. Under Medi-Cal, this means those visits provided directly to members in their unsheltered lived environment, outside the clinic walls. Street Medicine can be provided via mobile units (such as RVs) that go directly to unsheltered Members; however, services provided in fixed locations or in shelter settings, are not considered Street Medicine. Providers who may render

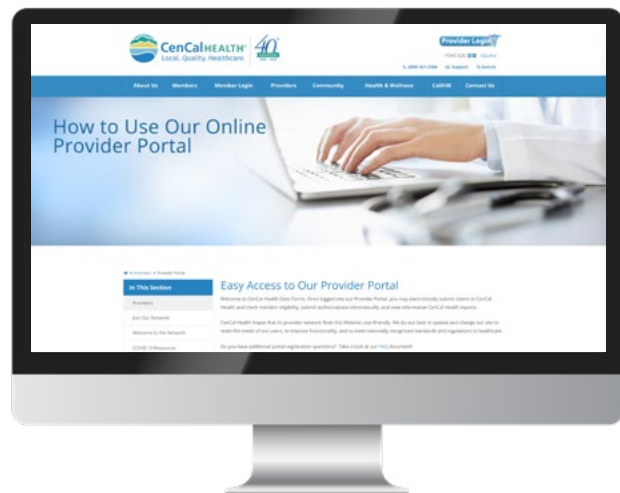
Street Medicine include a licensed Doctor of Medicine (MD)/Doctor of Osteopathic Medicine (DO), Physician Assistant (PA), Nurse Practitioner (NP), and Certified Nurse Midwife (CNM) who have knowledge and experience in street medicine clinical guidelines and protocols. These providers should ensure linkages to needed medical, behavioral, and social services including referrals to Enhanced Care Management (ECM) and Community Supports (CS).

There are several ways a Street Medicine provider may perform services and participate in the CenCal Health network, as either a:

- **Primary Care Provider (PCP)** – where Members elect to have a Street Medicine provider as their PCP, providing all primary care and components of the medical home including case management, care coordination, and referrals to specialists and other supportive services.
- **Referral Provider** – where Street Medicine providers coordinate with the Member’s assigned PCP and ECM Care Managers to ensure provision of direct services and ensure coordination and referrals to primary care and other needed services.
- **Enhanced Care Management Provider** – providing those comprehensive care coordination and case management functions directly to Members in their lived environment.

CenCal Health is proud to partner with organizations to provide our members with expanded benefits and whole person care approaches under CaAIM to serve our most vulnerable community members. To learn more about the Street Medicine benefit, including becoming a contracted Street Medicine provider with CenCal Health, please contact our Provider Relations department at [psrgroup@cencalhealth.org](mailto:psrgroup@cencalhealth.org) or at (805) 562-1676.

## How do I know if my assigned member is receiving care coordination services?



The Provider Portal Eligibility module has been enhanced to identify members receiving Care Management ECM and Community Supports services.

Providers are encouraged to check this new report to determine if assigned members are engaged in care coordination and to outreach to the respective provider to collaborate on care coordination efforts and engagement with CenCal Health members.

# Enhanced Care Management spotlight: Children and youth and adults at risk of long-term care institutionalization

**With CaAIM, the holistic health needs of members are prioritized through Enhanced Care Management (ECM), a whole-person care approach to address clinical and non-clinical needs of high risk members.**

These services aim to provide comprehensive care and achieve better health outcomes for members whose wellness is impacted by complex social factors, including homelessness, behavioral health, care needs for older adults, transitioning from incarceration, and our children and youth population.

Members who are enrolled in ECM are assigned a Lead Care Manager who conducts a comprehensive assessment, develops a member-centric care plan, and coordinates with those involved in the members care such as PCP, Specialists, and community based organizations. The Lead Care Manager ensures that the member is receiving all necessary services including durable medical equipment, caregiver support and nursing care.

CenCal Health would like to highlight two Populations of Focus eligible for ECM.

**Effective 7/1/2023 CenCal Health will be offering the ECM benefit for qualifying Children and Youth, allowing for the systematic coordination of services across other children/youth care management programs, specialty mental health services, Child Welfare Services, and foster care systems.**

Children and Youth who meet the following ECM eligibility criteria will be eligible:

- Experiencing homelessness
- At Risk for Avoidable Hospital or E.D. Utilization
- With Serious Mental Health and/or SUD Needs
- Enrolled in CCS or CCS WCM with additional needs beyond the CCS condition
- Are involved in Child Welfare Services
- With an Intellectual/Development Disability
- Pregnant or Postpartum



## Helping members live healthy at home!

**In addition, effective 7/1/2023 CenCal Health will be offering another ECM benefit which is designed to meet the specific needs of Adults Living in the Community and At-Risk for Long Term Care Institutionalization.**

Intensive coordination through ECM can help adults continue to reside in the community, who would otherwise have entered an institutional setting for care.

**Adult members eligible for this Population of Focus are:**

- living in the community who meet the SNF Level of Care (LOC) criteria

OR who require lower-acuity skilled nursing, such as time-limited and/or intermittent medical and nursing services, support, and/or equipment for prevention, diagnosis, or treatment of acute illness or injury;

- Actively experiencing at least one complex social or environmental factor influencing their health
- Are able to reside continuously in the community with wraparound supports

To refer eligible members for ECM benefits please submit the CenCal Health Case Management Referral Form located online under the ECM section of our website [cencalhealth.org/providers/calaim](https://cencalhealth.org/providers/calaim). If you are interested in becoming an ECM provider for these populations of focus, please contact the Provider Relations Department at (805) 562-1676 or email [ecmandcs@cencalhealth.org](mailto:ecmandcs@cencalhealth.org)

# Provider Bulletin update

CenCal Health is now publishing quarterly Provider Bulletins in March, June, September, and December, in addition to monthly digital Bulletins!

CenCal Health will continue providing time-sensitive information to our provider network through other means of communication, including emails, the CenCal Health website, and in person during provider visits.

To ensure that you receive important updates, sign up today by scanning the QR code or with your email address online at [cencalhealth.org/providers/provider-bulletin-newsletter/](https://cencalhealth.org/providers/provider-bulletin-newsletter/)



## CenCal Health Holiday Closures

- Monday, June 19, 2023 (JuneTeenth National Independence Day observed)
- Tuesday, July 4, 2023 (Independence Day observed)
- Monday, September 4, 2023 (Labor Day observed)

Provider Services (805) 562-1676  
 Claims Services (805) 562-1083  
 Pharmacy Services (805) 562-1080  
 Health Services (805) 562-1082  
 Member Services (877) 814-1861  
 Behavioral Health (805) 562-1600



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### CLAIMS CORNER

## New itemized report available for Prop 56 payments!

**Beginning in April 2023, claims received and paid where Prop 56 Supplemental Add-On payments are due are no longer reflected on individual claims, but instead are reimbursed monthly by separate check from CenCal Health.**

These payments will be made by the 15th of the following month that the claim appeared as “**Payable**” on an Explanation of Payment (EOP).

For **payment details** you can find the New Prop 56 Report on the Provider Portal located under the Claims & Billing module. The report will contain the claim information that the Prop 56 payment is related to, including the member’s information, internal patient account number, and the claim Explanation of Payment (EOP) date. This report will be a great tool to assist in provider billing reconciliation.

### HELPFUL TIPS:

- If you are experiencing difficulties with viewing the “View Report” icon at the top of the report, zoom out by pressing and holding the CTRL & Minus button on your keyboard.
- For best practice and legibility, you can download the Prop 56 Report to an excel file or PDF file.

Please contact the Claims department at (805) 562-1083 if you have any additional questions related to claims and billing and your Prop 56 payments.

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