CenCal Health has operated a Health Insurance Premium Payment (HIPP) Program for over 20 years. This program has helped many CenCal Health members with payment of their private health insurance premiums.

Effective September 1, 2016, CenCal Health will no longer be offering the HIPP Program. This means we will no longer be making private health insurance premium payments on behalf of members currently in the HIPP program. We have been reaching out to these members to inform them of this change and discuss their needs going forward.

In order to ensure a smooth transition for those involved, CenCal Health will be taking full responsibility for members who consequently become Medi-Cal primary, including coordinating continuity of care needs.

For questions regarding the termination of the program or coordination of care efforts for members, please contact the Provider Services Department at (805) 562-1676.

Acupuncture Benefit Restored

CenCal Health is pleased to announce that the Department of Health Care Services (DHCS) has restored Acupuncture Services for the Medi-Cal program, effective for dates of service on or after July 1, 2016. The acupuncture benefit is available for all Santa Barbara Health Initiative (SBHI) and San Luis Obispo Health Initiative (SLOHI) members. This newly restored benefit will allow members to obtain acupuncture services from CenCal Health contracted physicians, podiatrists and certified acupuncturists.

For more information please view the Acupuncture Protocols in CenCal Health's manual located on our website at www.cencalhealth.org. For questions regarding this benefit, please contact the Provider Services Department at (805) 562-1676.

UPCOMING DHCS AUDIT–PCP SITE VISITS

PCPs may be contacted by DHCS sometime in September or October to schedule an onsite visit between October 18th and October 28th, 2016.

DHCS will conduct a routine medical audit of CenCal Health from October 18 through October 28, 2016. The DHCS audit will consist of an evaluation of CenCal Health’s compliance with its contract with DHCS and regulations in the following areas: utilization management, continuity of care, availability and accessibility, member rights, quality management, and administrative and organizational capacity. A component of the audit includes site visits of selected PCP offices to conduct medical record reviews of specific members’ records. DHCS nurse evaluators will collect copies of members’ medical records and conduct brief interviews with providers and/or staff regarding coordination of care.

Please be aware that DHCS, as a health oversight agency conducting activities necessary for appropriate oversight of government benefit programs, has the authority to review confidential information. See Title 45, Code of Federal Regulations, Subpart E, Sections 164.512, 164.506, and 164.512(d). We have been advised that the DHCS audit team has signed appropriate confidentiality agreements and will conduct any record reviews or staff interviews in accordance with HIPAA requirements.

If you have any questions, please contact Sheila Thompson, Provider Services Manager, at (805) 562-1677 or sthompson@cencalhealth.org.
Cervical Cancer Screenings

One essential preventative health care need for CenCal Health members is **cervical cancer screenings for women**. Cervical cancer screenings are recommended for women between the ages of 21-64 every 3 years, or every 5 years after the age of 30 with a Human papillomavirus (HPV) test per the US Preventive Services Task Force (USPSTF) guidelines.

In partnership with the American Cancer Society, CenCal Health will be mailing reminder postcards to all members due for a Pap test encouraging they schedule their next preventative health screening with their Primary Care Provider (PCP) or OBGYN provider. CenCal Health’s coordination of care portal is an online tool which providers PCP’s ability to identify and manage members due for preventative health screenings. The coordination of care portal is available via CenCal Health’s website, www.cencalhealth.org, located in the provider restricted section.

For questions or assistance and training on utilizing the coordinator of care portal, please contact your Provider Services Representative at (805) 562-1676.

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Formulary Update

Effective October 1, 2016, alogliptin products such as generic Nesina, Kazano and Oseni will be the preferred DPP-4 inhibitors on the CenCal Health Formulary. All other DPP-4 inhibitors will be removed from the CenCal Health formulary and a Medication Request Form (MRF) will be required.

On August 1, 2016, providers with members taking any of the DPP-4 inhibitors that were removed from the formulary and received a Prescription Change form via fax requesting authorization of a new prescription to CenCal Health’s preferred alogliptin DPP-4 inhibitors. The Prescription Change form will serve as a valid order to begin dispensing the new medication with the next routine prescription fill.

If the Prescription Change Form is not completed and faxed to MedImpact at (805) 685-7781 by October 1, 2016, a MRF will need to be submitted for medical necessity for all non-formulary DPP-4 inhibitors.

For more information, please contact CenCal Health’s Pharmacy Department at (805) 562-1080.

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Meningococcal Vaccine Reminder

The California Department of Public Health (CDPH) issued health advisories related to an outbreak of invasive meningococcal disease occurring in Southern California. To read the CDPH Health Advisories in their entirety, please visit the CDPH website at http://www.cdph.ca.gov/Pages/NR16-045.aspx.

CenCal Health would like to remind our provider network that meningococcal vaccines are covered without restrictions for those members over the age of 18 and do not require a prior Treatment Authorization Request (TAR). To view further detail on covered meningococcal vaccines, refer to the Drugs: Contract Drugs List Part 1 section of the Part 2 Pharmacy manual on the Medi-Cal website.

For questions regarding the meningococcal vaccine benefit please contact the Health Services Department at (805) 562-1082.

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Claims Corner

CenCal Health has developed some additional explain codes for the processing of CHDP claims. These explain codes will accompany all other standard explain codes and will aid in describing in more detail the status of your claim. The new CHDP explain codes are as follows:

- **EW**- CHDP PROVIDER CONFIGURATION MISSING-CONTACT PROVIDER SERVICES
- **EY**- CHDP PREVENTATIVE SERVICE REQUIRES A PM160 SUBMITTED THROUGH ECHDP
- **EX**- CHDP PREVENTATIVE SERVICE MUST BE SUBMITTED THROUGH ECHDP VENDOR
- **EU**- PAID UNDER CHDP PROGRAM
- **EV**- DENIED UNDER CHDP PROGRAM
- **EZ**- INTERNAL CLAIM REVIEW FOR RECPT OF PM160 FROM ECHDP

As a reminder, any denials on claims submitted through eCHDP must be corrected by contacting your Claims Customer Service Representative. If you would like additional information on these codes, or your CHDP claim submissions please contact your Claims Representative at (805) 562-1083 or email: cencalclaims@cencalhealth.org.