In relation to health care, 2018 seemed to be the quiet after the storm compared to 2017, when there were several failed attempts to repeal the Affordable Care Act in Congress. While health care policy changes took a bit of a breather in 2018, the daily challenges of successfully addressing community health issues took no days off.

We now have historically low rates of residents in our region that are uninsured, which is a significant accomplishment. However, now that coverage is available, how do we as a community effectively address our area’s health care challenges? For me, two challenges immediately come to mind, which we at CenCal Health are working to address.

The first is the better integration of physical and mild-to-moderate mental health services. To be clear, access for low-income residents since 2014 (when CenCal Health began administering these benefits) has improved considerably. People who before had no access to psychiatrists, psychologists, counselors, etc., now have it – and within reasonable time-frames. That being said, we’re fully aware that there remain problems with communication between physicians and mental health specialists, timely payments, etc. We’re working with our delegate quite aggressively to improve these processes. The importance of integrating physical and behavioral health care is becoming clearer every day – therefore it will remain a top priority for us in 2019.

The second is more effectively managing the care of the homeless population. Cycling in and out of emergency departments is an expensive and often ineffective means of treating chronic health issues. Obviously, homelessness is a condition that which a number of factors have served to contribute. Therefore, a multi-pronged approach is needed to make progress with this population. In this vein, CenCal Health is partnering with area hospitals and community-based organizations to fund and administer recuperative programs in San Luis Obispo and Santa Barbara – with a program for Santa Maria on the horizon. Recuperative care programs are designed to provide medical beds in facilities to which homeless hospital patients can be discharged and receive appropriate follow-up care. Further, substance abuse, behavioral health issues, and eventually housing assistance are on the menu of services that can be offered. The total number of individuals that can be helped at any one time (approximately two dozen at full capacity) is still small compared to the total population in need, but it’s a start.

I suspect that 2019, like most years before it, will be a year of both challenges and accomplishments. Like every year, we enter 2019 with optimism and energy. As always, we value and appreciate our provider partners as we work on a daily basis to make our members/patients and community better off than the day before.

Robert Freeman
Chief Executive Officer
The Provider Bulletin is produced as a timely supplemental information service for provider office staff and is published monthly by the Provider Services Department. Questions and/or suggestions for articles may be made to psrgroup@cencalhealth.org or by calling (805) 562-1676.


**Provider Portal Reminder**

CenCal Health’s Provider Portal allows for the management and security of portal accounts. The designated ‘Physician/Administrator’ within your organization is responsible for determining individual access options, re-setting passwords, creating new portal access, and deactivating access for terminated staff.

**Portal Physician Administrators have the ability to:**
- Allow for multiple ‘Physician/Administrators’ within the organization
- Act as the contact for staff to make changes to their portal settings i.e. password resets, create access, or add additional screen functions on the provider portal

**Reminder Tips:**
- For ‘Multiple User’ (access to multiple Tax ID accounts) portal access please contact CenCal Health’s Provider Services Department at webmaster@cencalhealth.org or call (805) 562-1676
- All individual users are required to have a unique login and password
- To reset your password, follow the steps in the ‘Forgot your password?’ link located in the Provider Login page at https://web.cencalhealth.org/Account/ForgotPassword
- Do not share password details with others
- All active users will be prompted to reset their password every 180 days

For additional information and/or reference guide material, please contact the Provider Services department at (805) 562-1676 or visit CenCal Health’s website at https://www.cencalhealth.org/providers/provider-portal/.

**Digital Community Report**

CenCal Health is proud to announce its first ever entirely-digital Community Report, complete with videos, photos, audio testimonials, and animation. The organization has issued traditional paper-based reports previously, but made the switch this year coinciding with its 35th anniversary. The online format allows content to be shared and revised annually easily, and can be viewed on a desktop, phone, or tablet. It’s available now at www.cencal2018.org.

**Annual Well Checks and Screenings for Members**

As a reminder, annual well checks and screenings can help mitigate potential health problems due to chronic diseases. Below are a few of the more common recommended health screenings for specific populations that should be completed at least once a year:
- Diabetes – HBA1c test, retinal eye exam, nephropathy screening, and hypertension
- Patients on an ACE/ARB or diuretic – renal panel
- Asthma – Asthma Action Plan, flu vaccine
- Adolescents - Depression screening, HPV/meningococcal/Tdap vaccinations
- Adult - colorectal cancer screening, breast cancer screening, cervical cancer screening, flu vaccine and fall prevention

For more comprehensive information regarding recommended annual screenings and clinical guidelines, please visit CenCal Health’s website at https://www.cencalhealth.org/providers/quality-of-care/.

**Holiday Closure**

CenCal Health will be closed on Monday, January 21st in observance of the Martin Luther King, Jr. holiday.
CenCal Health has made several changes to our Formulary based on clinical review, provider interest, cost and utilization analysis. All of the changes represent development and growth of our current Formulary thus giving more choices to the prescribing physician. The changes are represented in summary on the chart below.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Class</th>
<th>Formulary Status</th>
<th>Restriction/Limits</th>
<th>Implementation Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Formulary Additions</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Xofluza 40mg</td>
<td>Infectious Disease-Viral</td>
<td>Formulary: Quantity Restriction</td>
<td>Restriction: Quantity limit of 2/30 days and 1 fill every 180 days</td>
<td>12/1/2018</td>
</tr>
<tr>
<td>Differin 0.1% Gel OTC</td>
<td>Dermatologic-Acne</td>
<td>Formulary: Quantity Restriction</td>
<td>Restriction: OTC preferred, 18 years or less, Quantity limit of 45gm/30 days</td>
<td>1/1/2019</td>
</tr>
<tr>
<td>Prasugrel</td>
<td>Hematologic Disorders</td>
<td>Formulary</td>
<td></td>
<td>1/1/2019</td>
</tr>
<tr>
<td><strong>Formulary Changes</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lyrica 25mg, 50mg, 75mg, 100mg, 150mg &amp; 200mg</td>
<td>Seizure Disorder</td>
<td>Formulary: Quantity Restriction</td>
<td>Restriction: Quantity limit of 90/30 days</td>
<td>1/1/2019</td>
</tr>
<tr>
<td>Lyrica 225mg, 300mg</td>
<td>Seizure Disorder</td>
<td>Formulary: Quantity Restriction</td>
<td>Restriction: Quantity limit of 60/30 days</td>
<td>1/1/2019</td>
</tr>
<tr>
<td>Differin 0.1% Cream</td>
<td>Dermatology-Acne</td>
<td>Non-Formulary</td>
<td>Restriction: OTC Differin Gel Preferred, 18 years or less, Quantity limit of 45gm/30 days</td>
<td>1/1/2019</td>
</tr>
</tbody>
</table>