

PROVIDER Update



CONTRACTUAL | JULY 30, 2018 | UPDATE 18-511 | 2 PAGES

CalViva Health Plan Reminder

CalViva Health is the local initiative health plan for the Medi-Cal managed care program in Fresno, Kings and Madera counties. CalViva Health partners with Health Net Community Solutions, Inc. (Health Net) to serve Medi-Cal beneficiaries in these counties. You are receiving this communication because you have contracted with Health Net and/or CalViva Health to provide services to CalViva Health Medi-Cal members. Under the direction of the Fresno-Kings-Madera Regional Health Authority, CalViva Health selected Health Net as its contractor to provide administrative and network services under the Two-Plan model expansion in the three-county region.

Health Net holds most provider network contracts in Fresno, Kings and Madera counties as CalViva Health's subcontractor. As a reminder,

- CalViva Health is the local initiative health plan for the Medi-Cal managed care program in Fresno, Kings and Madera counties.
- CalViva Health selected Health Net as its contractor to provide administrative and network services for its Medi-Cal members.
- When asked if you participate with CalViva Health, answer Yes per the Medi-Cal line of business included in your direct agreement with CalViva Health, Health Net or with your direct participating physician group (PPG) agreement.
- It is important that the correct participation response is provided when a patient or a regulator is inquiring if you accept CalViva Health and/or Medi-Cal.
- If you have a question regarding your current agreement, contact your PPG and/or Health Net to review the terms of your agreement.

PROVIDER OUTREACH

In accordance with the Health and Safety Code (HSC), section 1367.27 and California Insurance Code, section 10133.15, CalViva Health is verifying providers' participation and demographic information in its printed and online provider directory to ensure beneficiaries have access to accurate information when selecting providers.

Health Net Community Solutions, Inc. (Health Net), on behalf of CalViva Health, is sending the Provider Data Verification form to providers via fax on August 6, 2018. The Provider Data Verification form includes:

- The information CalViva Health has in its directory for the provider, including a list of networks and products in which the provider participates.
- A statement that failure to respond to the outreach notification may result in a delay of payment or reimbursement of claims.
- Instructions on how the provider can update information.
- A statement requiring an affirmative response from the provider acknowledging that the notification was received and requiring the provider to confirm that the information in the directory is current and accurate or to provide an update to the

THIS UPDATE APPLIES TO
MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

PROVIDER SERVICES

1-888-893-1569
www.healthnet.com

information required to be in the directory. If the health plan does not receive an affirmative response within 30 business days, the following will occur:

- The health plan takes no more than an additional 15 business days to verify whether the provider's information is correct or requires updates. The receipt and outcome of each attempt to verify the information is documented by the health plan.
- If the health plan is unable to verify whether the provider's information is correct or requires updates, Health Net notifies the provider 10 business days prior to removal that the provider will be removed from the provider directory. The provider is removed from the provider directory at the next required update of the provider directory after the 10 business-day notice period. A provider is not removed from the provider directory if he or she responds before the end of the 10 business-day notice period.

To ensure beneficiaries have access to accurate information when selecting providers, providers should review the form carefully and confirm the information is correct as is or make corrections. Providers must sign, date and fax the completed form to the provider network administrator (PNA) designated on the form. The health plan's goal is to receive responses on 100 percent of the forms.

NON-RESPONDERS

As mentioned, providers who do not respond may experience delays in payment or reimbursement of claims, and be removed from the new printed and online provider directory.

ADDITIONAL INFORMATION

If you have questions regarding the information contained in this update, contact CalViva Health at 1-888-893-1569.