



**P R O V I D E R**

**PULSE**

WINTER 2021



# Get the latest news in the Winter 2021 issue of the Provider Pulse newsletter!

**YOU** are once again the focus of this issue of the *Provider Pulse*!

Our Provider Relations, Claims and Utilization Management teams have been hard at work to support you and your organization. We want to offer more than words and show what we've done to make it easier for you to do your job.

In this issue, you'll see how we've continued to respond to your input to update teams and processes. You'll also learn how we're engaging to help you, your patients and your community.

Read on to find out about what we're doing for providers in Fresno, Kings and Madera counties:

- **Improved programs and processes** for claims and utilization management.
- **Emergency Room (ER) Diversion** Population Health Program.
- **Engaging the community: CalViva Health's 10-year anniversary** serving members, providers and community partners!

— *Your Provider Relations team*

## TABLE OF CONTENTS



<b>Provider Satisfaction Highlights</b> .....	1
Claims: Faster, Accurate Turnarounds .....	1
Utilization Management: Faster Authorization Turnaround Times for Improved Member Experience and Provider Satisfaction .....	1
Member Success Story .....	1
Provider Relations: Rewards for Your Commitment to Better Care .....	2
<b>Population Health Program</b> .....	5
Emergency Room Diversion Program .....	5
<b>Engaging Our Communities</b> .....	7
CalViva Health celebrates 10 years of service! .....	7



## MEMBER SUCCESS STORY

### Help for a Member with a Language Barrier

*During a COVID-19 outreach call, a health plan Public Programs team member spoke with a CalViva Health Hmong member with a history of chronic comorbidities, who lives in Fresno. The member advised that due to a language barrier, they were having difficulty getting help related to social and medical care needs. The member has limited social support.*

*The member also advised having difficulty getting in to see their PCP, whom they last saw in May 2020. The member advised they needed a follow-up appointment, so the Public Programs team member made a 3-way phone call with the member and the PCP's office to schedule one. The member was glad we helped get them an appointment after having had difficulty doing it themselves.*

P R O V I D E R

## SATISFACTION Highlights



### Claims: Faster, Accurate Turnarounds

We're working on improving the volume of misdirected claims to help you get paid faster.

To do so, we've tracked metrics to help you get paid quickly. Look for more news on this project in the future.

These changes can have a BIG impact for you, so stay tuned.

Providers are encouraged to access the provider portal online at [provider.healthnet.com](http://provider.healthnet.com) for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries and more. If you have questions, contact CalViva Health at 1-888-893-1569.

### Utilization Management: Faster Authorization Turnaround Times for Improved Member Experience and Provider Satisfaction

#### YOUR NEW YEAR STARTS ON A GOOD NOTE!

We're sensitive to your need for timely authorizations.

In response, the plan's Utilization Management (UM) Department made many process improvements in 2020 to speed up authorizations. These successful improvements have yielded huge results – all while maintaining most regulatory turnaround times 90–100% of the time!

The UM Department continues to review our processes to identify opportunities to improve.

**For help with UM questions, contact CalViva Health at 1-888-893-1569.**

## Provider Relations: Rewards for Your Commitment to Better Care

*The Provider Relations team has been hard at work to reward you for a job well done!*

We've been focused on topics that matter to YOU, including provider incentive programs.

We're rolling out continued incentives for primary care physicians (PCPs), clinics and PPGs. Upcoming incentive programs include:

- HEDIS® Improvement Program (HIP)
- Clinic HEDIS Improvement Program (C-HIP)
- 2021 HEDIS Quality Improvement Program (HQIP)

***Read on for details!***

### **PROVIDER INCENTIVE PROGRAMS!**

We're continuing incentive programs for PCPs, clinics and PPGs to reward your excellent work in managing member care and improving quality outcomes. These programs are designed to reward both.

#### **HIP**

##### ***Potential earnings and criteria***

To be eligible, you must be contracted directly with Health Net\* or through a contracted PPG, maintain an open panel and remain in good standing with Health Net. You are rewarded based on per-care-gap closure out of 17 HEDIS measures in 2021.

##### ***Changes***

We made changes to align with the Managed Care Accountability Set (MCAS) established by the California Department of Health Care Services (DHCS). Changes include:

- Using 17 measures instead of 18, due to the Child and Adolescent Well-Care Visits (WCV) combination measure replacing Child and Adolescent Well-Care Visits measures W34 and AWC.
- Well-Child Visits in the First 15 Months of Life (W15) has been modified to Well-Child Visits in the First 30 Months of Life (W30).

*(continued )*





### Webinars to help answer your questions about HIP

Please join one of the upcoming webinars to hear more about the program. We will provide additional information related to payment details, such as tax identification number (TIN) and W-9, at a later date.

Option One	Option Two
<b>Tuesday, January 26, 2021</b> Noon to 1 p.m. Register at: <a href="https://bit.ly/2INA0ry">https://bit.ly/2INA0ry</a>	<b>Tuesday, February 9, 2021</b> Noon to 1 p.m. Register at: <a href="https://bit.ly/3f47Apz">https://bit.ly/3f47Apz</a>

### C-HIP

#### Potential earnings and criteria

To be eligible, you must be considered a safety net clinic, maintain an open panel and remain in good standing with Health Net. Clinics are rewarded based upon demonstration of at least 1% year-over-year improvement or 2% year-over-year improvement and/or by meeting or exceeding the 50th percentile of the National HMO Average from the National Committee for Quality Assurance (NCQA) for 17 HEDIS measures.

If you exceed the 50th percentile, you would only have to demonstrate 1% year-over-year improvement. On the other hand, if you don't meet the 50th percentile, you would need to demonstrate 2% year-over-year improvement. A maximum of \$0.20 can be earned per measure for a total of 17 measures in 2021.

#### Changes

We made changes to align with the MCAS established by the DHCS. Changes include:

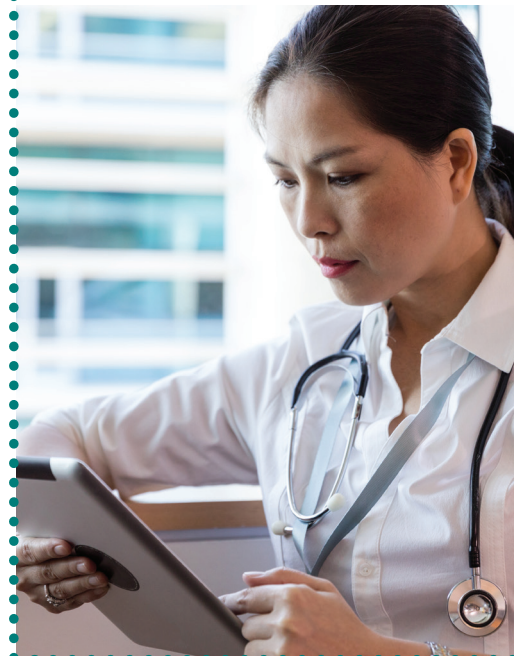
- Using 17 measures instead of 18, due to the Child and Adolescent Well-Care Visits (WCV) combination measure replacing Child and Adolescent Well-Care Visits measures W34 and AWC.
- Well-Child Visits in the First 15 Months of Life (W15) has been modified to Well-Child Visits in the First 30 Months of Life (W30).

### Webinars to help answer your questions about C-HIP

Please join one of the upcoming webinars to hear more about the program. We will provide additional information related to payment details, such as TIN and W-9, at a later date.

Option One	Option Two
<b>Tuesday, February 2, 2021</b> Noon to 1 p.m. Register at: <a href="https://bit.ly/3nAdHVH">https://bit.ly/3nAdHVH</a>	<b>Tuesday, February 16, 2021</b> Noon to 1 p.m. Register at: <a href="https://bit.ly/36JGUXg">https://bit.ly/36JGUXg</a>

(continued)





### HQIP

Medi-Cal PPGs that qualify are:

- Directly contracted with Health Net for January 1, 2021, through December 31, 2021;
- Not part of a performance-based incentive; and are
- Located in one of these counties:
  - Fresno
  - Kings
  - Madera

*Potential earnings:* HEDIS improvement award up to \$1.25 per-member-per-month plus an Access to Care award of up to \$0.50 per-member-per-month.

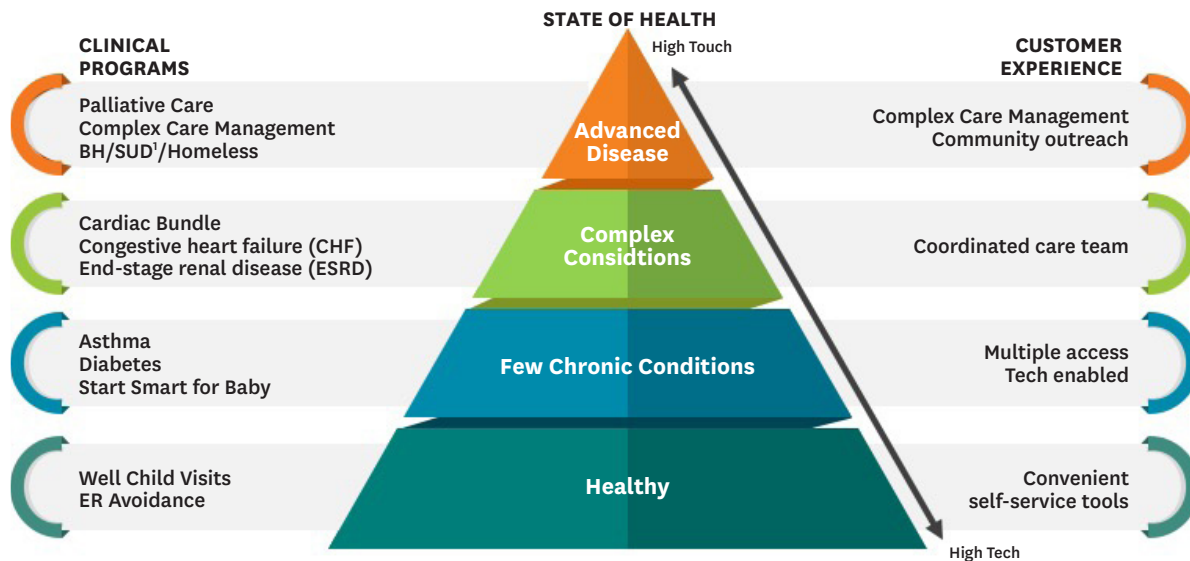
*Criteria:* Satisfactorily meets all program conditions, including eligible enrollee minimums, open to new patients minimums, encounter volume improvements and corrective action plan improvements.

*Changes:* 2021 program has updated qualifying HEDIS measures and eliminates most of the 2020 COVID-19-related changes.

**For more information or to confirm that you qualify, please contact your assigned Provider Relations representative or email [HN\\_Provider\\_Relations@healthnet.com](mailto:HN_Provider_Relations@healthnet.com).**

# POPULATION HEALTH Program

**Population health that's meaningful to members**



The health plan's Population Health Program creates a way for you and the plan to leverage data and programs. With more engagement, we can improve member health and build a deeper partnership.

**See below for highlights of our Emergency Room (ER) Diversion population health program.**

In addition to any medical services you or your organization provide, you can offer this program.

## Emergency Room Diversion Program

You play a vital role by providing patient education. It's a small but critical part that includes letting patients know about avoiding ER visits for non-emergent issues.

Our ER diversion program supports your efforts to educate members about this subject.

Consider offering members the following tips to help them avoid the ER but still get the care they need quickly for non-emergent issues.

(continued)



<sup>1</sup>Any transfer of information or data between providers and/or facilities about a member's opioid use disorder (OUD) or SUD must first be authorized by the member before transferring the information or data between providers and/or facilities. This can be done by having the member sign an Authorization for Disclosure (AFD) form and designating the provider or entity that will be reviewing the member's data.

**As appropriate, remind members to:**

**TRY TO SEE THEIR DOCTOR**

For non-emergency issues like not feeling well or minor injuries, remind them to do their best to schedule an appointment with their PCP first.

**SCHEDULE A TELEHEALTH CONSULTATION**

If a member can't meet with their doctor in person, they can inquire about their provider's telehealth services to speak with a medical professional on the phone, or over video on their smartphone, tablet or computer.

**CALL THE NURSE ADVICE LINE**

If the doctor isn't available quickly, members can call the nurse advice line on the back of their ID card and speak with a registered nurse about symptoms, options for treatment and next steps.

**VISIT URGENT CARE**

Remind members that urgent care offers much of what an ER offers, and that the ER is there for lifesaving emergencies. Members can visit urgent care for illnesses and injuries that require an in-person evaluation, like lab tests and X-rays.

**GET NO COST TRANSPORTATION**

With Medi-Cal, members can schedule a safe, no-cost ride to their medical facility or pharmacy.

**SEE THEIR DOCTOR REGULARLY**

Remind members to be sure to schedule regular check-ups, screenings and well-care visits to avoid emergencies.





# ENGAGING Our COMMUNITIES



*We support you, your community and your patients!*

## CalViva Health celebrates 10 years of service!

*Join us as we mark our 10-year anniversary serving members, providers and community partners.*

We're 10 and going strong, supporting providers in Fresno, Kings or Madera counties.



### **Need help? We can assist you:**

- Obtain free tools and resources for you and your patients.
- Complement your patients' care with classes, workshops, lectures, self-management health programs and health screenings.

### **We can help your patients:**

- Learn to use their health benefits and get the most from their CalViva Health membership.
- Find doctors, clinics, hospitals and pharmacies in their area.
- Speak with a CalViva Health representative 24/7 by calling 1-888-893-1569, TTY 711.
- Sign up for free health education classes.

### **We also assist residents of Fresno, Kings and Madera counties.**

#### **We can help them to:**

- Find out if they qualify for free or low-cost health coverage and get help applying for coverage.
- Sign-up for free classes on losing weight, controlling asthma or diabetes, and more.
- Get information from local organizations to help them live healthy lives.

**Contact CalViva Health at 1-888-893-1569 for more information about the tools and resources above.**





CalViva Health is a licensed health plan in California that provides services to Medi-Cal enrollees in Fresno, Kings and Madera counties. CalViva Health contracts with Health Net Community Solutions, Inc. to provide and arrange for network services. \*Health Net Community Solutions, Inc. is a subsidiary of Health Net, LLC and Centene Corporation. Health Net is a registered service mark of Health Net, LLC. All other identified trademarks/service marks remain the property of their respective companies. All rights reserved.

21-002/NWS049443EH00 (1/21)

