



PROVIDER

PULSE

SUMMER 2021



CalViva
HEALTH™

Health Net®
COMMUNITY SOLUTIONS

Welcome to the summer 2021 issue of the *Provider Pulse* newsletter!

As 2021 progresses, we want to extend a heartfelt thank YOU for your continued partnership! We appreciate your dedication and hard work as you provide quality care to members in our local communities.

In this issue of *Provider Pulse*, see how we've continued to respond to your input to update teams and processes. Also, learn how we're engaging to help you, your patients and your community.

What you'll find in this issue:

- **Updated incentive program** for value-based payments.
- **Improved Prop 56 payment process.**
- **Population health updates** on adverse childhood experiences (ACEs) and pre-exposure prophylaxis (PrEP).
- **CalViva Health announces new leadership.**
- **Supporting our communities:** Significant grants to feed local communities and help enroll Central Valley residents in Medi-Cal.

— *Your Provider Relations team*

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PROVIDER SATISFACTION Highlights



OPERATIONAL EXCELLENCE

Updated Provider Incentive Programs: Value-Based Payments

Our incentive programs continue to reward our primary care physicians (PCPs), clinics and participating physician groups (PPGs) who partner with us to improve quality outcomes and access to care for members. We are excited to share program updates and successes!

Key Updates

- **Cozeva®:** As of the end of 2020, 76% of eligible providers have started using this tool for better tracking clinical quality measures and increase payment frequency from biyearly check payments to quarterly e-payments for providers.
- **COVID-19 response:** We have created an alternative model for MY¹ 2020 to assist providers who may have decreased utilization due to the COVID-19 pandemic.

	HEDIS® Improvement Program (HIP)	HEDIS Clinic Improvement Program (C-HIP)	HEDIS Quality Improvement (HQIP)
Description	PCPs are awarded for care gaps closed in 17 different HEDIS ² measures.	FQHCs ³ /RHCs ⁴ /IHS ⁵ providers are awarded for meeting the MPL ⁶ and having a certain % of improvement (1% for providers meeting MPL and 2% for providers below MPL) in 17 different HEDIS measures.	PPGs are awarded for meeting goals and surpassing prior year performance on encounter submission, in 18 different HEDIS measures, and membership access to care (timely available appointments).
Who	Individual PCPs and non-safety net clinics	FQHC/RHC/IHS safety net clinics	PPGs
Where	Fresno, Kings and Madera counties	Fresno, Kings and Madera counties	Fresno, Kings and Madera counties
Rewards available for participating providers	<p>Total rewards paid: \$2.5 million (MY 2019)</p> <p>Average rewards (MY 2020 interim period):</p> <ul style="list-style-type: none"> • CalViva – \$13,145. <p>Percentage of participating providers earning rewards: 57%</p>	<p>Total rewards paid: \$4.1 million (MY 2019)</p> <p>Average rewards (MY 2020 interim period):</p> <ul style="list-style-type: none"> • Cal Viva – \$22,185. <p>Percentage of participating providers earning rewards: 84%</p>	<p>Total rewards paid: \$5.2 million (MY 2019)</p> <p>Average rewards (MY 2019):</p> <ul style="list-style-type: none"> • \$200,000. <p>Percentage of participating providers earning rewards: 65% (for all of health plan)</p>
Examples of program success	<p>Increases in care gap closures (MY 2019-2020 interim period):</p> <ul style="list-style-type: none"> • Breast Cancer Screening – 1%. 	21% of eligible providers earned an advance payment for meeting 50th percentile and improvement goals while maintaining access to care for members (MY 2019-2020)	<p>Average of 4% improvement in HEDIS scores across all counties (MY 2019)</p> <p>One-third of HEDIS measures improved 7% or greater (MY 2019)</p>

¹Measurement year

²Healthcare Effectiveness Data and Information Set

³Federally qualified health centers

⁴Rural health clinics

⁵Indian Health Service

⁶Minimum performance level

Improved Process for Prop 56 Payments

NEW PAYMENT PROCESS NOW INCLUDES AN RA

More good news! We've set up a new process so payments can be made to providers for capitated encounters and to providers who have not submitted a current W-9 form. This new process will include a remittance advice (RA) sent with your payment.

What's on the RA

The RA you receive for supplemental or add-on payments for 2017–2020 will give summary information on which encounters are included in the payment. This change will help resolve issues with supplemental payments for fee-for-service claims.

You will receive the RAs by the same method you receive payments – paper or electronic.

What this means for you

- W-9s will no longer be needed.
- An automated process issues payments and includes an RA with each payment.
- If providers have questions or would like to file an appeal, the RAs include whom to contact with questions.

Services eligible for add-on payments

The services that qualify for Prop 56, or programs that have add-on payments include:

- Physician services.
- Sensitive services (Hyde Amendment).
- Developmental screening.
- Family planning.

W-9 still required for value-based payments

This new process does not include value-based payments (VBPs). Providers must still submit a current W-9 form to receive VBPs from capitated encounters.



POPULATION

HEALTH in Focus: ACEs and PrEP!

LEARN HOW WE CONTINUE WORKING TO MAKE A DIFFERENCE BY ADDRESSING THESE KEY AREAS

Addressing ACEs to Improve Health Outcomes

The plan's wraparound approach supports care where kids need it – at home, in schools and at the doctor's office. It's why the plan invests in preventative programs, like screenings and programs for ACEs and promoting trauma-informed care for our members and providers. By screening for ACEs, providers can better assess if a patient is at an increased health risk due to a toxic stress response. Since January 2020, the plan has launched a range of initiatives to address ACEs for the diverse communities that we serve.

These activities include:



Conducting a series of trainings for providers, staff and community. So far, the plan has conducted 55 trainings educating 1,738 participants on topics, such as ACEs 101, Trauma-Informed Care, Social Determinants of Health, Cultural Competence and Motivational Interviewing.



Launching a provider resiliency program through "Resilience Thursday," with 27 drop-in sessions reaching 269 providers.



Initiating a member communications campaign to educate members on ACEs, reduce disparities and increase access to resources.



Producing member materials – in English and Spanish – on Understanding ACEs, Parenting and ACEs and Lowering Toxic Stress in Children and Adults.



MEMBER SUCCESS STORY

COVID-19 outreach: Clinical pharmacy team helps a member with COVID-19

A CalViva Health Medi-Cal member with hypertension presented to the emergency room (ER) with a fever, body aches and vertigo. The member tested positive for COVID-19.

The member remained in the hospital for three days. Following recovery and testing negative for COVID-19, the member continued to experience vertigo. Also, the member expressed feelings of sadness and depression.

The Clinical Pharmacy team took steps to help the member. The team:

- Informed the member about In-Home Supportive Services (IHSS) and provided contact information for the IHSS office. The member had stated that due to depression, they would like in-home assistance.
- Educated the member about the difference between the ER and urgent care as the member had a history of ER visits. In addition, the team provided information on the Nurse Advice Line available 24/7.
- Advised the member to notify their PCP right away if any COVID-19 symptoms reoccur.

The member appreciated the call and all of the information and help the team offered. The member further stated that the team called at the right time because they were in need of someone to talk to.

HIV Prevention: PrEP Facts

JULY IS NATIONAL HIV AWARENESS MONTH



What is PrEP?

Pre-exposure prophylaxis (PrEP) is a safe and effective way to prevent the transmission of HIV in adherent at-risk adults.

U.S. Food and Drug Administration-approved HIV PrEP formulations include once-daily Descovy® (tenofovir AF-emtricitabine) and Truvada® (tenofovir DF-emtricitabine). The newer formulation, Descovy, reduces the risk of long-term renal and bone injury.

In 2018, Centers for Disease Control and Prevention (CDC) studies indicated only 18% of persons in the U.S. at risk of contracting HIV were prescribed PrEP.⁷

HIV disproportionately affects Black/African Americans and Hispanics/Latinos. Other risk factors for HIV include men who have sex with men (MSM), transgender women who have sex with men and people who inject drugs (PWID).⁸

Keep in mind:

- The 2017 U.S. Public Health Service HIV PrEP Clinical Practice Guidelines do not support on-demand PrEP dosing.⁷
- PrEP prescribed to HIV-negative patients as a 90-day supply facilitates adherence.
- In addition to baseline labs, monitoring for PrEP includes HIV testing every three months, pregnancy testing every three months, renal function labs every three to six months, and screening for sexually transmitted infections every three to six months.⁷
- HIV-negative persons diagnosed with chronic hepatitis B (HBV) mono-infection may safely take PrEP. However, discontinuation of PrEP in such persons may result in HBV reactivation and hepatitis flare-ups.⁷
- Perform HIV testing in persons who wish to discontinue PrEP and electronically document the reason for discontinuation.
- COVID-19 vaccination is recommended for all persons taking PrEP. There is a misconception that PrEP can prevent COVID-19 infection and/or facilitate recovery. However, there are no studies to support this assertion.

The drugs listed above are carved out and a Medi-Cal fee-for-service (FFS) benefit. For questions about issues with obtaining PrEP medications, contact the Department of Health Care Services.

⁷Spach DH, Kalapila AG, and Farley J E. (2020, August 18). *Core Concepts - Preexposure Prophylaxis (PrEP) - Prevention of HIV - National HIV Curriculum*. National HIV Curriculum. <https://www.hiv.uw.edu/go/prevention/preexposure-prophylaxis-prep/core-concept/all/#racial-gender-disparities-prep-use>.

⁸HIV.gov. Date last updated: May 27, 2020. "Who Is at Risk for HIV?" HIV.gov, 8 Apr. 2021, www.hiv.gov/hiv-basics/overview/about-hiv-and-aids/who-is-at-risk-for-hiv#:~:text=By%20race%2Fethnicity%2C%20Blacks%2F,significant%20risk%20for%20getting%20HIV.

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COVID-19 and HIV: What You Need To Know. (n.d.). IAS. Retrieved April 19, 2021, from <https://iasociety.org/covid-19-hiv>.



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ENGAGING

Our COMMUNITIES

We support you, your community and your patients!

CalViva Health Announces Plans for New CEO

CalViva Health recently announced a shift in leadership as its founding Chief Executive Officer (CEO), Greg Hund, prepares to retire and the organization's long-standing Chief Operating Officer (COO) prepares to fill the leadership role.



Greg Hund



Jeffrey Nkansah

In preparation for Hund's retirement scheduled for July 31, 2021, CalViva Health has selected Jeffrey Nkansah as the organization's new CEO. Nkansah joined CalViva Health in 2011 and has since served in several roles, including his current position as the organization's Chief Operating Officer.



STRATEGIC GIVING

Community Success Story: CalViva Health Helps the Central California Food Bank Feed 20,000

CalViva Health recently donated \$100,000 to the Central California Food Bank (CCFB).

The funding has helped support the CCFB's Groceries2Go program, which offers basic food items on a by-appointment basis twice in a given 30-day period. Users register online for the grocery pick-up. Groceries2Go has served about 20,000 individuals over the last year.

CalViva Health celebrates this milestone and the opportunity to work with CCFB to support families in local communities.

CCFB has a distribution center in south Fresno and 10 satellite sites across central California.



United Health Centers of the San Joaquin Valley Receives New Funding From the Health Plan

We bridge traditional gaps in care through innovation and collaboration. Our wraparound approach to health equity is reducing disparities.

To increase access to quality care for California’s most vulnerable patients during the pandemic, the health plan awarded United Health Centers of the San Joaquin Valley (United Health Centers) an \$80,000 grant to help enroll and educate Central Valley residents in Medi-Cal managed care.

Part of the plan’s broader commitment to support communities during the national pandemic, United Health Centers is one of 24 organizations statewide that received funding totaling \$1.95 million dedicated to keeping the safety net strong for those most at risk.

“As a Federally Qualified Health Center, improving the quality of life and making health care more accessible in the communities we serve is our core goal,” said Colleen Curtis, president and CEO of United Health Centers of the San Joaquin Valley. The support “... will help us continue to provide accessible, comprehensive and quality health care to some of the most at-risk patients in the Central Valley with compassion and respect.”

By increasing Medi-Cal enrollment, education and retention support, providers and community organizations are able to better care for those affected by the pandemic.

HEALTH EQUITY

The Health Plan and Physicians for a Healthy California Launch Cultural Competence Education Series for Providers

With the largest cultural and linguistic team, and a workforce that lives in and mirrors our communities’ diversity, the health plan is committed to matching and meeting our members’ backgrounds, unique abilities and disabilities.

The health plan and Physicians for a Healthy California have launched a comprehensive, seven-part education series for California providers focusing on how to deliver culturally competent care in diverse communities. The series will better equip providers to overcome health disparities.



The plan’s Health Disparity team developed the provider education series. It will cover topics including:

- ✓ ACEs
- ✓ Childhood immunizations
- ✓ Women’s preventive care
- ✓ Diabetes
- ✓ Developmental and physical disabilities
- ✓ BIPOC and LGBTQ health care



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.

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