

# PROVIDER PRESS

Summer 2024

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# CalOptima Health Approves \$526.2 Million Provider Rate Increase

Recognizing the importance of a financially stable health care safety net, CalOptima Health is showing our commitment to our provider network with the largest provider rate increase of its kind in our nearly 30-year history. This funding is in addition to the Targeted Rate Increases (TRI) mandated by the Department of Health Care Services (DHCS).

Our Board of Directors, during its regular meeting on May 2, 2024, approved a commitment of \$526.2 million from unallocated reserves to enhance the rates for health networks, hospitals, physicians, community clinics, behavioral health providers and ancillary services providers. The funds are used to support timely access to and the quality of critical health care services for members and promote long-term financial stability of the managed care network.

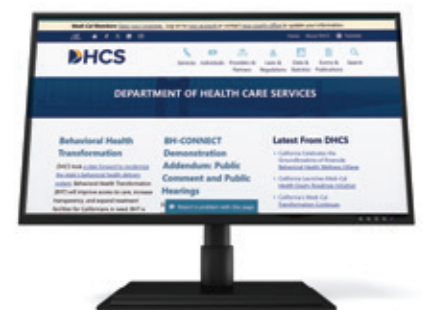
We also have put into action the TRI enacted by DHCS in January 2024. We received guidance from DHCS for implementing these new rates, which are payable at the procedure code level to participating Medi-Cal providers. The increase supports advances in access, quality and equity for Medi-Cal members.

## CalOptima Health will follow the implementation timeline laid out below:

- **Provider Rate Increases (Non-TRI) Payments:** CalOptima Health implemented all other planned health network and provider rate increases effective July 1, 2024.
- **TRI Payments**
  - ❖ For services provided on and after July 1, 2024, CalOptima Health implemented TRI rates for CalOptima Health Direct and CalOptima Health Community Network (COD/CHCN)-contracted providers.
  - ❖ Retrospective payments: By August 31, 2024, CalOptima Health will reconcile previously paid COD/CHCN claims (including Proposition 56 physician services) with dates of service between January 1, 2024, and June 30, 2024. Providers will receive a supplemental payment for the TRI rate adjustment. Retrospective supplemental payments will continue to be paid on a monthly basis as fee-for-service (FFS) claims are received within the timely filing limits.
- **Post-Public Health Emergency (PHE) Supplemental Payment Program:** With the consideration of the above rate increases, CalOptima Health ended the temporary, post-PHE supplemental payment program on June 30, 2024.

Providers can learn more about the TRI program, including the rates, provider eligibility and relevant procedure codes on DHCS' website. The TRI rate schedule on DHCS' website includes a note tab with additional details regarding the payments.

We appreciate your dedication to caring for our members. If you have any questions, please contact your Provider Relations representative at **714-246-8600** or [providerserviceinbox@caloptima.org](mailto:providerserviceinbox@caloptima.org).



*Stock photos. Posed by models.*



# No-Cost Naloxone Is Available for Your Patients!

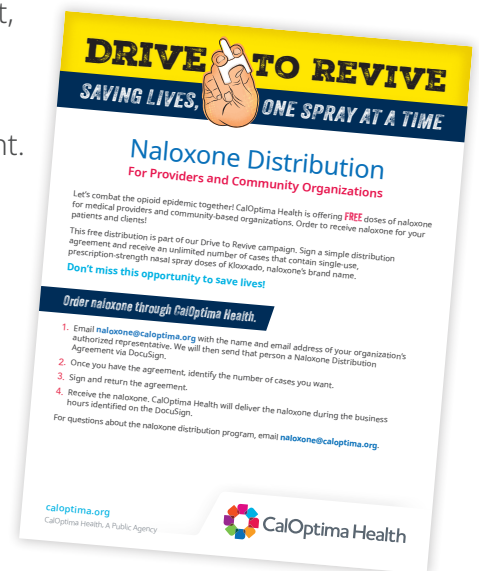
CalOptima Health is supporting our provider partners' efforts to stem the opioid epidemic by providing your office with no-cost doses of naloxone for distribution to your patients.

These prescription-strength nasal spray doses of naloxone (brand name Kloxxado) can potentially save lives if administered to someone having a known or suspected opioid overdose or fentanyl poisoning. Naloxone is easy to use, requires no special training and is safe even for use on children.

To request naloxone for your practice, please follow these steps:



1. Email [naloxone@caloptima.org](mailto:naloxone@caloptima.org) with the name and email address of your organization's authorized representative. We will then send that person a Naloxone Distribution Agreement via DocuSign.
2. Once you have the agreement, identify the number of cases (12 boxes per case) you want.
3. Sign and return the agreement.
4. Receive the naloxone. CalOptima Health will deliver the naloxone during the business hours identified on the DocuSign.



CalOptima Health encourages providers to educate their patients about this life-saving medicine, when and how to administer it, and to always call **911** immediately afterward.

For additional questions about the naloxone distribution program, email [naloxone@caloptima.org](mailto:naloxone@caloptima.org).

## Symptoms of an opioid overdose or fentanyl poisoning

- Pale face
- Limp body
- Blueish lips
- Vomiting or gurgling
- Drowsiness or unconsciousness
- Slow breathing or heartbeat
- Muscle spasms



## Resources for help with a substance use disorder

- National Crisis Hotline: **988**
- Orange County Resources: **211**
- OC Links: **855-625-4657**

# CalOptima Health Awards \$25 Million in Grants to Address OC Workforce Shortages

In April 2024, CalOptima Health's Board of Directors approved nearly \$25 million in workforce education grants to seven institutions in Orange County. These grants mark the first phase of our \$50 million Provider Workforce Development Initiative to address health disparities, secure the future delivery of medical and behavioral health care, and ease predicted shortages and gaps in the Orange County health care workforce that serves the Medi-Cal population.

"CalOptima Health recognizes that our mission to serve members begins with having a strong health care workforce to deliver quality care," said Michael Hunn, CEO of CalOptima Health. "The challenge of health care worker shortages at organizations across Orange County drove CalOptima Health's landmark community investment in a \$50 million Provider Workforce Development Initiative."

The following institutions received grant awards in the first phase of funding:

- 1. California State University, Fullerton:**  
\$5 million to expand and increase enrollment in its Bachelor of Science in Nursing (BSN) program.
- 2. Chapman University:**  
\$5 million for full tuition physician assistant (PA) scholarships and local practice PA education for academically qualified, low-income students.
- 3. Coast Community College District:**  
\$2.04 million to expand the registered nurse pipeline at Golden West College and to develop a pathway to the radiologic technology certificate program at Orange Coast College.
- 4. Concordia University Irvine:**  
\$5 million in grant funding to expand the Accelerated Bachelor of Science in Nursing (ABSN) program and provide more scholarships to pre-nursing and ABSN students.



- 5. Orange County United Way:**  
\$1.36 million to expand its UpSkill OC program and provide career coaching, connections to paid training and certification programs, and job placements in the health care industry.
- 6. Santiago Canyon College:**  
\$1.2 million to increase the behavior technician and medical assistant programs and develop a licensed vocational nursing program.
- 7. University of California, Irvine:**  
\$5 million to create a program that provides Medi-Cal-focused externships to prelicensure nursing students and residencies to graduate students along with other activities that support their work serving vulnerable populations.





# CalOptima Health Supports Providers Following Change Healthcare Cyberattack

On February 21, 2024, Change Healthcare, a subsidiary of UnitedHealth Group, experienced a cyberattack, leading the organization to proactively take its systems offline to safeguard partners and patients.

Change Healthcare offers tools for payment and revenue cycle management, and CalOptima Health uses some of these tools for claims payment and claims clearinghouse services. After being notified of the incident, we disconnected our systems from UnitedHealth Group, including Change Healthcare and Optum Healthcare. CalOptima Health reconnected with Optum following an attestation of its network security and partially reconnected with Change Healthcare for clearinghouse products at the beginning of May.

Immediately following the incident, CalOptima Health took steps to alleviate the potential impact on our providers. We notified providers about how to submit hard-copy claims and how to use OfficeAlly, our contracted electronic data interchange clearinghouse.

Providers can contact OfficeAlly at **866-575-4120** and visit [www.officeally.com](http://www.officeally.com) to register and submit claims.

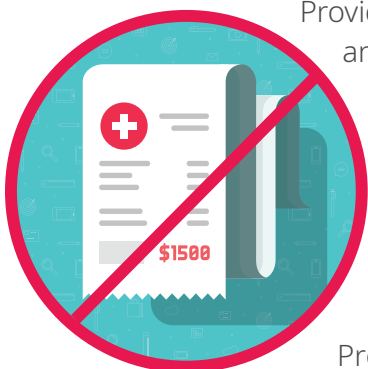
For hard copy paper claims, submit those directly to CalOptima Health at:

CalOptima Health  
P.O. Box 11037  
Orange, CA 92856

Providers receiving physical checks were also instructed on how to receive electronic payments and to check the status of claims via the CalOptima Health Provider Portal.

Following a recommendation from DHCS, CalOptima Health and our health networks are also temporarily allowing a 90-day grace period to the 365-day timely filing deadline for provider claims as of February 21. This flexibility applies to both Medi-Cal and Medicare claims and will be in place until Change Healthcare remediates the effects of the cyberattack.

## Providers Cannot Balance Bill Medi-Cal and OneCare Members



Providers are reminded that federal and state law prohibits balance billing Medi-Cal and OneCare members. Medi-Cal members should not pay — including copays, co-insurance or deductibles — for physician visits or other medical care when receiving covered services from a provider in their provider network.

DHCS reviews billing practices as a component of the Annual Medical Audit, and a violation of billing practices may lead to enforcement actions, including sanctions. Additional information can be found in Section H14: Member Billing Restrictions within the CalOptima Health Provider Manual, located under the Providers section of [www.caloptima.org](http://www.caloptima.org).



# Street Medicine Program Expands Into New Communities

A year after launching our Street Medicine Program in Garden Grove, CalOptima Health is planning to expand it to two additional Orange County cities this summer.

In December 2023, the CalOptima Health Board of Directors approved serving the communities of Anaheim and Costa Mesa. In March 2024, after a rigorous review process, the Board selected Celebrating Life Community Health Center to administer the program in Costa Mesa and Healthcare in Action to administer the program in Anaheim.

Long Beach-based Healthcare in Action, a member of the SCAN Group, is a medical group that serves patients experiencing homelessness by contracting with Medicare and Medi-Cal health plans as well as hospitals and health systems. Celebrating Life Community Health Center is a Mission Viejo-based nonprofit organization with a clinic in Costa Mesa committed to serving and advocating for low-income individuals residing in Orange County.

Street Medicine plays a key role in CalOptima Health's comprehensive strategy to address homelessness by bringing urgent and primary care to the streets. The program provides medical, behavioral and social services to unhoused people, preventing the progression of untreated health conditions while seeking to reduce unnecessary emergency department visits and increase access to permanent housing. Since the program's launch in Garden Grove, more than 300 individuals have received coordinated health care, behavioral health and social services.

"The fundamental idea behind Street Medicine is to meet individuals experiencing homelessness on their own terms and where they are," said Kelly Bruno-Nelson, DSW, Executive Director of Medi-Cal/CalAIM. "With the addition of these new communities and the selection of health care providers to service them, CalOptima Health will bring life-changing care to hundreds more and support them in becoming housed as the foundation of good health."



# CalOptima Health Partners With SullivanLuallin Group to Improve Patient Experience

CalOptima Health is partnering with the SullivanLuallin Group (SLG) to offer a robust program to assist providers in improving the patient experience.

Since 1979, SLG has provided comprehensive services and programs for patient experience transformation to more than 2,500 health care organizations nationwide, including physician groups, hospitals, provider networks and health plans.

The first phase of this partnership started in May with a series of lunch-and-learn webinars that covered topics such as building an effective health care team, improving patient access and flow, having positive patient experiences, making patient encounters efficient and effective, and managing challenging patient encounters.



In addition to these webinars, CalOptima Health and SLG will offer the following:

- In-person workshops: Longer, in-person conference-like sessions with content geared toward physicians and their staff.
- Virtual workshops: Longer, virtual conference-like sessions with content geared toward physicians and their staff.
- A provider-shadowing coaching program: Providers complete an introductory in-person workshop, and then an SLG coach shadows them for a full day. The coach then provides a written report and follows up to assess progress.

We will notify providers as these and more opportunities become available. Watch your email and our monthly Provider Update for future announcements about at-the-elbow support being provided through SLG.

For questions about the SLG partnership, please contact CalOptima Health's Quality Improvement team at [QI\\_Initiatives@caloptima.org](mailto:QI_Initiatives@caloptima.org).

## Use the Provider Portal to Confirm Member Eligibility

CalOptima Health has retired our Interactive Voice Response (IVR) System that was previously used to verify member eligibility. Now, providers can use the CalOptima Health Provider Portal to verify member eligibility. Through the Provider Portal, providers can see both the member's assigned health network and primary care provider (PCP). Please note that providers must be registered with CalOptima Health to use the portal.



Except for emergency services, providers rendering covered services to any CalOptima Health member should first verify eligibility. Verifying eligibility is critical to determining whether a member's enrollment status has changed and to ensure payment. A membership card does not guarantee eligibility.

Providers may register through the Provider Portal link on the CalOptima Health website, [www.caloptima.org](http://www.caloptima.org).



# 2024 CalOptima Health Medi-Cal Member Reward Programs

CalOptima Health offers health rewards to eligible members who take an active role in their health. Our providers can play an important part in helping members receive needed screenings or tests and complete their rewards form. Please help us achieve our quality care goals together! For more information, please visit [www.caloptima.org/healthrewards](http://www.caloptima.org/healthrewards).

Medi-Cal Reward Programs	No-Cost Reward	Eligibility Criteria
Annual Wellness Visit	\$50 gift card	Members 45 and older who complete an annual wellness visit in 2024. No form submission needed.
Breast Cancer Screening	\$25 gift card	Members ages 50–74 who complete a breast cancer screening mammogram in 2024.
Cervical Cancer Screening	\$25 gift card	Members ages 21–64 who complete a cervical cancer screening in 2024.
Colorectal Cancer Screening	\$50 gift card	Members ages 45–75 who complete a colonoscopy in 2024.
Diabetes A1C Test	\$25 gift card	Members ages 18–75 with a diagnosis of diabetes who complete an A1C test in 2024.
Diabetes Eye Exam	\$25 gift card	Members ages 18–75 with a diagnosis of diabetes who are due for and complete a diabetes dilated or retinal eye exam in 2024.
Postpartum Checkup	\$50 gift card	Members who have a postpartum checkup between one and 12 weeks after delivery.
Blood Lead Test at 12 Months of Age	\$25 gift card	Members 12–23 months of age who complete a blood lead test in 2024.
Blood Lead Test at 24 Months of Age	\$25 gift card	Members 24–35 months of age who complete a blood lead test in 2024.
Follow-Up Care for Children Prescribed ADHD Medication	\$25 gift card	Members ages 6–12 who complete three recommended follow-up visits within five months of being prescribed ADHD medicine.
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication	\$25 gift card	Members ages 18–64 who complete a diabetes screening. Members must be using antipsychotic medication and cannot already be diagnosed with diabetes. No form submission needed.

- Members can claim their rewards by completing and submitting the reward form found on CalOptima Health's website, [www.caloptima.org/healthrewards](http://www.caloptima.org/healthrewards), or by contacting Medi-Cal Customer Service at **1-888-587-8088** (TTY **711**) to have a form mailed to them.
- Members may participate in each reward program only once per calendar year.
- It may take at least eight weeks after receiving reward forms or claims for gift cards to be mailed to members.

# 2024 CalOptima Health OneCare Member Reward Programs

OneCare Reward Programs	No-Cost Reward	Eligibility Criteria
Annual Wellness Visit	\$50 gift card	Members who complete an annual wellness visit in 2024. No form submission needed.
Breast Cancer Screening	\$25 gift card	Members who complete a breast cancer screening mammogram in 2024.
Colorectal Cancer Screening	\$50 gift card	Members who complete a colonoscopy in 2024.
Health Risk Assessment	\$25 gift card	Identified members who are due for and complete a Health Risk Assessment by phone, mail or in person in 2024.
Diabetes A1C Test	\$25 gift card	Members with a diagnosis of diabetes who complete an A1C test in 2024.
Diabetes Eye Exam	\$25 gift card	Members with a diagnosis of diabetes who complete a dilated or retinal eye exam in 2024.
Osteoporosis Screening	\$25 gift card	Members who receive a bone mineral density test in 2024.

- Members can claim their rewards by completing and submitting the reward form found on CalOptima Health's website, [www.caloptima.org/healthrewards](http://www.caloptima.org/healthrewards), or by contacting OneCare Customer Service toll-free at **1-877-412-2734** (TTY **711**) to have a form mailed to them.
- Members may participate in each reward program only once per calendar year.
- It may take at least eight weeks after receiving reward forms or claims for gift cards to be mailed to members.



## Modivcare Now Providing All Medical Transportation Services

As of April 1, 2024, Modivcare is CalOptima Health's contracted vendor for all transportation services for members in Medi-Cal and OneCare (HMO D-SNP), a Medicare Medi-Cal Plan. This includes both Non-Medical Transportation (NMT) and Non-Emergency Medical Transportation (NEMT).



Your patient's transportation benefits have not changed and the process for arranging NMT and NEMT services remains the same. To schedule transportation or confirm upcoming trips, Medi-Cal patients should call **1-833-648-7528**, and OneCare patients should call **1-866-612-1256**.

For additional questions about the transition to Modivcare, please contact your Provider Relations representative at **714-246-8600** or at [providerservicesinbox@caloptima.org](mailto:providerservicesinbox@caloptima.org).

# Your Medicare Patients May Benefit From CalOptima Health's OneCare Plan

Did you know that CalOptima Health manages a Medicare plan? If you have patients who are eligible for both Medicare and Medi-Cal, then CalOptima Health's OneCare plan might be right for them.

To be eligible for OneCare, a member must be:

- Age 21 and older
- Living in Orange County
- Enrolled in Medicare Parts A and B
- Receiving Medi-Cal benefits

OneCare supplemental benefits for 2024 include:

- **Prescription medicines:**  
Zero copays for generic and brand-name medicines throughout the year. Members will not have any donut hole.
- **Over-the-counter (OTC) items:**  
\$100 allowance per quarter to buy items online, over the phone or by mail order.
- **Vision care through Vision Service Plan (VSP) providers:**  
A new pair of eyeglasses or contact lenses every year with a \$250 limit.
- **Hearing services:**  
\$1,000 allowance every year for hearing aids above the Medi-Cal limit of \$1,510 per year.
- **Fitness benefits:**  
No-cost gym memberships available at many locations in Orange County, one home fitness kit, access to digital workout videos and much more.
- **Unlimited transportation:**  
Covered by Medi-Cal to plan-approved medical services, such as doctor visits, labs, X-rays, the hospital or the pharmacy. OneCare members have the supplemental benefit of unlimited transportation to and from the gym.
- **Worldwide emergency care, urgent care and emergency transportation services outside the U.S.:**  
Services to treat a condition that needs immediate medical care, such as an injury or a sudden medical illness. Members pay for the services, and OneCare will reimburse them up to \$100,000 per year.
- **Companion care:**  
Up to 90 hours of non-medical services per year to help with activities of daily living, such as transportation, light housework, technology, exercise, grocery shopping, medicine deliveries, etc.
- **Annual physical examination:**  
One physical exam per year, including laboratory services as needed. The plan pays for one annual wellness visit every 12 months to make or update the member's care plan to help prevent illness.

**Dental services are provided through the Medi-Cal Dental program, but not as a supplemental benefit.**

- Coverage includes dental exams, cleaning, crowns, root canals and partial dentures with adjustments, repairs and relines.
- Up to \$1,800 in covered services per year and possibly more if medically necessary or if the member is living in a nursing home.

For more information on CalOptima Health OneCare benefits, your patients can call **1-877-412-2734** or visit [www.caloptima.org/en/ForMembers/OneCare/Benefits](http://www.caloptima.org/en/ForMembers/OneCare/Benefits).





# Complete Annual Wellness Visits to Earn Up to \$296 in Incentives Per Patient

CalOptima Health is rewarding physicians who provide comprehensive annual wellness visits (AWVs) with incentive payments. The incentives ensure members complete their AWVs and improve member engagement with you, their primary care provider.

Depending on the age of the member and the type of visit, you can receive between \$112.20 and \$146.75 per assigned member per year for each completed, submitted and verified AWV billed using the proper Current Procedural Terminology (CPT) code. You can also receive another \$150 per completed and verified attestation form, with supporting medical records, per member per year. The attestation form and medical records submission instruction documents for each of your assigned members can be found on the CalOptima Health Provider Portal. As part of the AWV, you should report confirmed conditions diagnosis codes, capture social determinants of health, review preventive care needs and properly document this information in the medical record.

As of August 15, 2024, providers can also complete and submit digital AWV attestations through the Provider Portal. Similar to the PDF form, the digital form includes member-specific year-over-year chronic and non-chronic conditions, health screenings and the ability to add other identified diagnosis codes. The digital form also allows you upload member medical records and relevant attachments, submit social determinants of health questionnaires, and provide additional comments.

The provider incentive applies to all AWVs completed with a CalOptima Health Medi-Cal member who is 45 years or older as of December 31 of the service year, excluding dual-eligible members. Additionally, members who complete an AWV by December 31 of the service year are eligible for a \$50 gift card.

Incentive payments will be made within 45 calendar days from the end of the submission month and paid to the assigned provider taxpayer identification number (TIN).

## Submitting an AWV for COD/CHCN members:

CalOptima Health-contracted providers treating COD/CHCN members should use these CPT codes when billing for a completed AWV.

Description	CPT Code	Rate (as of January 1, 2024)
Initial Preventive Visit		
Ages 45–64 years	99386	\$135.01
Ages 65+	99387	\$146.75
Periodic Preventive Visit		
Ages 45–64	99396	\$112.20
Ages 65+	99397	\$121.16

# How to Access Interpreter Services for Your Patients

Federal and state regulations require CalOptima Health to provide interpreter services to limited English proficient (LEP) members. These are members who have a limited ability to read, speak, write or understand English.

Depending on the situation, providers may request either telephonic or face-to-face interpreter services for their CalOptima Health LEP patients.

For more information, see the Providers section of the CalOptima Health website, [www.caloptima.org](http://www.caloptima.org).

## How to Request Interpreter Services

1. Verify the member's eligibility and identify if the member is enrolled in a health network, CalOptima Health Community Network or CalOptima Health Direct.



2. Determine whether telephonic or face-to-face interpreter service is needed.

- a. Telephonic interpreter services are recommended for urgent situations or short and simple conversations. This service is available 24/7.
- b. Face-to-face interpreter services, including American Sign Language, are recommended when a complicated or extensive explanation of treatment or symptoms is required. This service is available for scheduled medical appointments in an ambulatory setting and requires at least five working days' advance notice.

3. Please have the following information ready at the time of the request:

- |                                      |  |
|--------------------------------------|--|
| ■ Member's name                      | ■ Language needed                      |
| ■ Member's client index number (CIN) | ■ Approximate duration                 |
| ■ Member's gender                    | ■ Type of visit                        |
| ■ Member's age                       | ■ Name of doctor/facility              |
| ■ Date of appointment                | ■ Address of appointment/location      |
| ■ Time of appointment                | ■ Phone number of appointment/location |

4. If the member is in CalOptima Health Community Network or CalOptima Health Direct, call CalOptima Health's Customer Service department at **714-246-8500**. Prior authorization is not required.

5. If the member is in a CalOptima Health-contracted health network, please use the list on the next page to contact the member's health network after verifying eligibility. The member's health network will work with you and the member to coordinate all interpreter services.



## Health Network Interpreter Services Contact List

Health Network	Telephonic Interpreter Service Contact	Face-to-Face Interpreter
AltaMed Health Services	877-462-2582	877-462-2582
AMVI Care Health Network	866-796-4245	866-796-4245
CHOC Health Alliance	800-424-2462 (Member line) 800-387-1103 (Provider line)	800-424-2462 (Member line) 800-387-1103 (Provider line)
Family Choice Health Network	Language Line: 800-874-9426	800-611-0111
Noble Mid-Orange County	888-880-8811	888-880-8811 Ask for Utilization Department
Optum	888-656-7523	888-656-7523
Prospect Medical Group	800-708-3230	Call: 800-708-3230 Fax Request: 714-560-7305 Online Request: <a href="http://www.prospectmedical.com">www.prospectmedical.com</a>
Regal Medical Group	844-292-5173	844-292-5173
United Care Medical Network	877-225-6784	877-225-6784

## New Behavioral Health Telehealth Service Available



In April, CalOptima Health launched telehealth services for behavioral health care through our contracted vendor TeleMed2U.

This service will improve options and access to care for routine outpatient services and support timely post-hospitalization follow-up appointments. TeleMed2U behavioral health professionals will treat a range of mild to moderate conditions for our Medi-Cal and OneCare members, delivering services for outpatient mental health evaluation, medication management, therapy and more.

TeleMed2U can provide therapy services to all CalOptima Health members 13 years and older and medication management services to members 5 years and older. These services are provided as a

resource and a formal provider referral is not required. Members can access these services by calling CalOptima Health's Behavioral Health Line at **855-877-3885** or by directly dialing **562-268-0955**.



# Here's How Your Office Can Improve Blood Lead Testing

Children enrolled in Medi-Cal are considered at high risk for lead poisoning. CalOptima Health would like to share some tips and best practices to optimize lead testing in your offices.

As a provider overseeing the care of our pediatric members, you and your team can impact the health of our members through the following:



- **Anticipatory guidance**

Advise parents/guardians of the risks associated with lead exposure and ways to reduce exposure at each periodic health assessment, even in instances where parents refuse testing. In 2023, CalOptima Health conducted a call campaign to remind members to complete their well-child visits and test for lead. Many parents reported being unaware of the risks and testing requirements, highlighting the need for continual education.

- **Perform point-of-care testing**

This is the best way to ensure lead testing is completed.

- **Code appropriately**

Make sure to submit CPT code 83655 for point-of-care testing.

- **Monitor lab orders**

Institute an office process to monitor uncompleted lab tests. Visits to an off-site lab may pose a significant challenge to members. In these instances, reminders about the importance of lead testing and open lab orders help bring members in for testing.

- **Leverage health rewards**

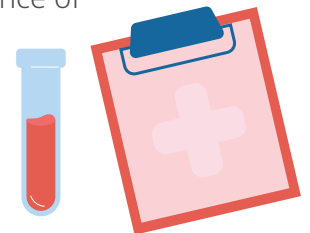
Eligible CalOptima Health Medi-Cal members can receive two no-cost \$25 gift cards for completing a blood lead test at 12 and 24 months of age.

- **EMR alerts**

Work with your IT/electronic medical record (EMR) support team to incorporate alerts in your EMR system for when lead testing is due. This takes the guesswork out of your daily workflows.

- **Leverage visits**

Take advantage of every office visit, including sick visits, to perform any lead testing that is due or provide a reminder to complete an open lab order.



- **Leverage reports**

Use the Blood Lead Screening report in the CalOptima Health Provider Portal. This report identifies members 6 years of age and under who have missed a state-required test.

- **Access resources**

The Childhood Lead Poisoning Prevention Branch (CLPPB) has various lead resources to help you stay current with the latest recommendations. For more information, visit [www.cdph.ca.gov/Programs/CCDPPH/DEODC/CLPPB/Pages/prov.aspx](http://www.cdph.ca.gov/Programs/CCDPPH/DEODC/CLPPB/Pages/prov.aspx).

- **Testing refusals**

Document any lead testing refusals in the member's medical record.

Thank you for your commitment to serving our members and providing them with quality care. For more information or support with these practices, please contact the Quality Improvement team at [QI\\_Initiatives@caloptima.org](mailto:QI_Initiatives@caloptima.org).

# Let's Talk About Topical Fluoride and Reimbursement

Dental cavities are one of the greatest unmet health treatment needs. Because young children are seen earlier and more frequently by a medical provider than by a dentist, all providers have a unique opportunity to support the oral health needs of members by:

- Applying topical fluoride varnish in the primary care setting to pediatric members through age 5
- Ensuring that members ages 6–20 have a dental home where they can receive topical fluoride

## Why Apply Topical Fluoride in the Primary Care Setting?

### It's clinically recommended

Bright Futures/American Academy of Pediatrics (AAP) recommends the periodic application of fluoride to the primary teeth of all infants and children from the time of primary tooth eruption through age 5.



### It's effective

Fluoride has consistently been proven effective at preventing tooth decay.



### It's needed

Medicaid-eligible children are considered high-risk and should receive a fluoride varnish application at least every three months, equivalent to four times a year. Data suggests that this population is not receiving the minimum of two topical fluoride applications.



### For accountability

The provision of at least two fluoride varnish applications by a dental or health care professional is assessed through the Topical Fluoride for Children (TFL-CH) Healthcare Effectiveness Data and Information Set (HEDIS) quality measure and must meet the minimum designated rate for performance.



## Get Reimbursed for Supporting Oral Health

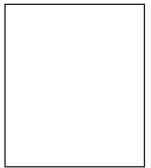
For CHCN members, CalOptima Health provides a fee-for-service reimbursement at \$23.22 per fluoride varnish treatment up to three times a year for members up to 5 years of age. For health network members, please check fluoride varnish reimbursement details with the health network.

For information and resources about getting started with applying topical fluoride, contact CalOptima Health Quality Initiatives at [QI\\_Initiatives@caloptima.org](mailto:QI_Initiatives@caloptima.org).



CalOptima Health, A Public Agency  
P.O. Box 11063  
Orange, CA 92856-8163

[www.caloptima.org](http://www.caloptima.org)



## Hospital Corner

## UCI Health Acquires Tenet Hospitals

In March 2024, UCI Health acquired six Tenet hospitals and other affiliated entities. These facilities are:

- Los Alamitos Medical Center Inc.
- Fountain Valley Regional Hospital & Medical Center
- Lakewood Regional Medical Center Inc.
- Placentia-Linda Hospital Inc.
- Pacific Endoscopy and Surgery Center LLC
- First Choice Physician Partners, OCLA

CalOptima Health holds a contract with the following hospitals and entities:

- Los Alamitos Medical Center Inc.
- Fountain Valley Regional Hospital & Medical Center
- Placentia-Linda Hospital Inc.
- Pacific Endoscopy and Surgery Center LLC
- First Choice Physician Partners, OCLA

### What does this mean for providers?

- Providers can still refer patients to any of the three CalOptima Health-contracted Tenet hospitals (Los Alamitos Medical Center, Fountain Valley Regional Hospital & Medical Center and Placentia-Linda Hospital).
- Providers can still refer members to the same specialists who provide services at any of the three contracted Tenet hospitals.

If providers have additional questions regarding the acquisition of these facilities by UCI Health, please contact your Provider Relations representative at **714-246-8600** or [providerservicesinbox@caloptima.org](mailto:providerservicesinbox@caloptima.org).