Gold Coast Health Plan℠
A Public Entity

Provider Operations Bulletin

APRIL 2015

24

Table of Contents

Are You Ready for ICD-10?

Beginning October 1, 2015, you will be required to bill for the services you provide all patients -- including those patients you treat through Gold Coast Health Plan (GCHP) -- using a new and improved international standard of coding. This change will affect your software, your claim forms, your workflow, your documentation and more. As you prepare for the change to ICD-10, the following checklist might assist you in successfully transitioning away from ICD-9 to ICD-10.

Preparing for ICD-10:

- Review information about ICD-10 published by CMS at www.cms.gov/icd10
- If submitting paper claims, order new CMS-1500 (02/12) Paper Claim Forms. Medicare now only accepts the revised form.
- Order ICD-10 CM Coding Handbook for training and evaluating the equivalent codes for your ICD-9-CM codes. Here are a couple of good tools we would recommend:
    - » ICD-10-CM 2015 Codebook from the AMA
    - » ICD-10-CM Mappings 2015 from the AMA
- Identify your most commonly used ICD-9 Diagnosis codes and begin identifying the equivalent ICD-10 codes. Depending on your type of practice, the list of most commonly used codes could be between 10 to 20, and in some cases, 50 to 100.
- Review your overall claim submission process in order to meet timely claims filing requirements.
- Review your current encounter or claim form.
    - » After reviewing your most commonly used ICD-9 codes, identify the ICD-10 codes you feel would be most utilized by your practice. You may want to develop a laminated cheat sheet to assist in determining the most appropriate ICD-10 commonly used codes to use.
- Review your documentation.
    - » Based on your review of the most commonly used ICD-9 codes and the equivalent or most appropriate ICD-10 codes, determine if your current documentation will sufficiently allow you to identify the most appropriate ICD-10 code or if you have to modify your current documentation methods, templates or forms.
    - » Remember, if the service is not documented then the service was never performed, so correct documentation and coding is essential.
- Analyze your workflow.
    - » This is a significant change and you will need to evaluate your current workflow and how it will be impacted by internal delays (i.e., documentation coding, billing, rejections, etc.) and create contingency plans now rather than come up with solutions as they occur. Here are some examples to consider:
        - ‣ Provider taking longer to do documentation and coding;
        - ‣ Documentation not sufficient for the coder to identify the appropriate ICD-10 code and having to request additional documentation from the provider.
- Conduct staff training.
    - » Identify training vendors that are ideal for your practice (i.e. specialty or role specific coding training)
    - » Order training materials now and reduce the risk of backorders
    - » Schedule your staff training
        - ‣ GCHP will begin holding training sessions for our providers in May of 2015.
- Develop a financial plan.
    - » Identify your current practice budget (monthly) and determine funding options in the event of payment delays (health plan issues, rejections, denials, technical issues, etc.). At a minimum, plan for three months but have a contingency plan if it lasts longer.
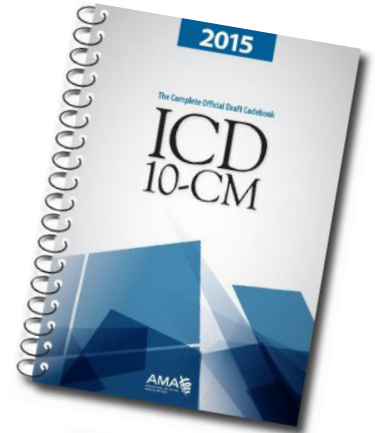
- Begin testing.
  - » **TIP** GCHP is gearing up to test our system and would request providers to begin early testing of your internal office or practice system and make necessary changes to create a smooth transition to ICD-10. If you would like to work with GCHP regarding the testing of the changes in the submission of claims with dates of service on or after October 1, 2015, please contact GCHP Customer Service at 1-888-301-1228 or email GCHP Network Operations at providerrelations@goldchp.org.
- Attend a GCHP Town Hall.
  - » GCHP is setting up three training sessions entitled "ICD-10, CHANGING THE BILLING LANDSCAPE" A Town Hall discussion and Informational Session.
  - » **TIP** These upcoming Town Hall events will instruct and educate providers and their staff with how to successfully transition to ICD-10.
  - » A notice regarding the upcoming Town Hall events will be sent out to providers on or around the 29th of April.
    - ‣ The Town Hall notice is included in this edition of the Provider Operations Bulletin (POB)
    - ‣ Please register early as seating will be limited.

GCHP trusts you will find the above list useful as you finalize your transition to ICD-10. In the weeks and months to follow, the Plan will be contacting providers to determine your readiness and will offer assistance to providers in order to make the transition a success for you, as well as for GCHP. We see this transition as a partnership with our providers to successfully make the change to an improved coding standard with no disruption in the submission, adjudication, and payment of the services you provide to our members.

"ICD-10, Changing The Billing Landscape" a Town Hall Information Session

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Memorandum

Gold Coast Health Plan's (GCHP) Network Operations Department will host three (3) town hall information sessions entitled, *"ICD-10, Changing the Billing Landscape."* These sessions are intended to inform and educate providers on how the transition to ICD-10 codes will affect how they bill and are paid for services.

Please note:

• Starting October 1, 2015, providers must submit claims utilizing the new and improved ICD-10 international standard of coding.
• Prior to October 1, 2015, providers should submit claims using the current ICD-9 coding methodology.
• Claims submitted on or after October 1, 2015 that do not include the appropriate ICD-10 code will be denied and the provider will not be paid.

It Is Extremely Important That Providers Correctly Bill Utilizing ICD-10 Codes In Order To Be Paid Timely And Accurately For Dates Of Service As Of October 1, 2015.

Please register for the *ICD-10, Changing the Billing Landscape* town hall information session by clicking on the link below.

Dates & Locations

Tuesday, May 19, 2015	Monday, Aug. 17, 2015	Thurs., Aug. 20, 2015
Ventura County Health Services	Ventura County Health Services	Ventura County Health Services
2240 E. Gonzales Road	2240 E. Gonzales Road	2240 E. Gonzales Road
Suite 200	Suite 200	Suite 200
Oxnard, CA 93036	Oxnard, CA 93036	Oxnard, CA 93036
12:30 PM - 1:30 PM	**12:30 PM - 2:00 PM**	**12:30 PM - 2:00 PM**
Click here to register	Click here to register	Click here to register

Seating Is Limited; Registration Recommend

If you have any questions or concerns, please call GCHP Customer Service at 1-888-301-1228 or email GCHP Network Operations at providerrelations@goldchp.org

Provider Portal Reminder

Health Services has been receiving incomplete requests via the Provider Portal. Please remember to complete the Ordering Provider and Authorized Provider fields when entering requests through the Portal. See instructions and form examples below:

Physician Info:
This information is automatically populated based on your login. If your login is associated with multiple physicians, the associated physicians are listed in the dropdown menu for **Physician ID**. Choosing a physician from the menu populates the rest of the information in the ordering provider section.

Provider Info:
If the ordering provider is associated with more than one provider, then the details are reflected in the drop down menu. The system populates the remaining details and will choose the required **Provider ID**.

Ordering Providers					
	ID	Name	Tax ID	NPI	Taxonomy
Physician info					
Provider info*					

Authorized Providers:
Completing this section is mandatory if:

The **Ordering Provider** is *not* the PCP of the member
OR
Service Type = Other *and* **Other (Provider)**.

All fields are automatically populated based on the information you enter.

Physician Info:
Enter the ID or physician name in the ID field.

Enter the ID or the first few letters of the last name of the provider. If a physician is associated with more than one Provider, the drop-down menu lists all the associated Providers. Selecting a Provider auto-populates the remaining fields.

Facility Info:
Enter the ID or facility name. Select an ID from the list presented to auto-populate the remaining fields.

Authorized Providers		
	ID	Name
Physician info		Coverage Pool
Provider info	▼ OR	
Facility info		

[Click here](#) to access the Provider Web Portal User Guide located on the GCHP website.

Preauthorization Treatment Request Form

The Preauthorization Treatment Request Form was revised in January 2013. Please make sure to use the correct version of the form when submitting requests for preauthorization. Click here to access the form.

GCHP Provider Portal and the HIPAA Privacy Rule

Membership in the first quarter of 2015 has grown to more than 188,000. GCHP providers require a fast and reliable method for submitting authorizations, obtaining claims inquiries and checking on member eligibility. The GCHP provider portal is quickly becoming the method of choice for the vast majority of providers to satisfy these questions.

The portal has now outpaced the call center when it comes to submitting and obtaining inquiries regarding authorizations.

Click here to view the February 2015 provider portal/call usage dashboard.

As new providers join the network, GCHP creates a new user account and grants access to member and provider data upon request. As a result, security issues have become paramount.

GCHP would like to remind all providers of your responsibility regarding the use of the GCHP provider portal, access to personal health information (PHI) and user accounts.

Providers have a responsibility to inform GCHP on all staff changes occurring in your office or practice as they pertain to individual user accounts. It is important to prevent ex-employees, or those whose access to such information is no longer required, from accessing PHI on members who are being treated in your office or practice. Please remember it is a HIPAA Privacy Rule requirement that all information regarding a patient remain confidential. There can be substantial fines and penalties imposed on any individuals who accesses a patient's confidential medical information without the proper authorization.

Protect your practice against HIPAA Privacy Rule violations by making certain that access to PHI and user accounts are up-to-date and accurate. Please report any changes immediately to GCHP, by contacting our Customer Service department at 1-888-301-1228 or email GCHP Network Operations at providerrelations@goldchp.org.

Balance Billing
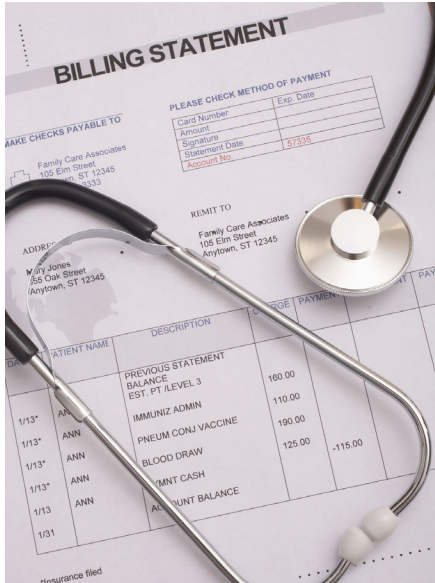
As a reminder to all providers and vendors of Medi-Cal covered services, it is a regulatory requirement that you do not directly request payment from a Medi-Cal enrolled member for the services or treatment you provide. It is also a requirement of your contract with GCHP that you only look to GCHP for such payment.

Roughly one (1%) percent of all Medi-Cal enrollees may be enrolled as a share of cost (SOC) Medi-Cal member. In those cases, you will need to access the Medi-Cal website to determine whether that SOC member has satisfied their monthly out of pocket amount. If the GCHP member is a SOC member and you submit a **CMS 1500 form**, please do the following:

- Add the amount the patient is responsible for in boxes 10D and 29.
- If you are a facility submitting a **UB04** claim form please place the information in boxes 39 through 41.

Please note: Any providers or vendors of Medi-Cal services that directly bill Medi-Cal enrollees may impact your ability to participate in the GCHP network.

Please email
ProviderRelations@goldchp.org
if you have any questions regarding billing of Medi-Cal members enrolled with GCHP.

Crossover Claims for Dual Eligible Members

Earlier this month, GCHP began accepting electronic crossover claims for dual eligible members (Medi-Medi) for Medicare Part B claims with dates of service on or after April 1, 2015.

GCHP began receiving a Medicare Part B Medi-Medi crossover claims file from the Department of Health Care Services (DHCS), as of April 2015. Providers no longer need to submit to GCHP hardcopy (paper) claims for Part B services with the Medicare Explanation of Benefits (MEOB) attached to their claim. This change is effective for claims with dates of service on or after April 1, 2015.

GCHP will only be receiving a Part B electronic claims file from DHCS. Providers who need to submit claims for Part A services for Medi-Medi members should continue to submit claims in a hardcopy format to GCHP with the MEOB attached (for more information please refer to the GCHP Provider Manual).

For questions regarding Medi-Medi crossover claims, please call GCHP Customer Service at 1-888-301-1228 or email GCHP Network Operations at providerrelations@goldchp.org.
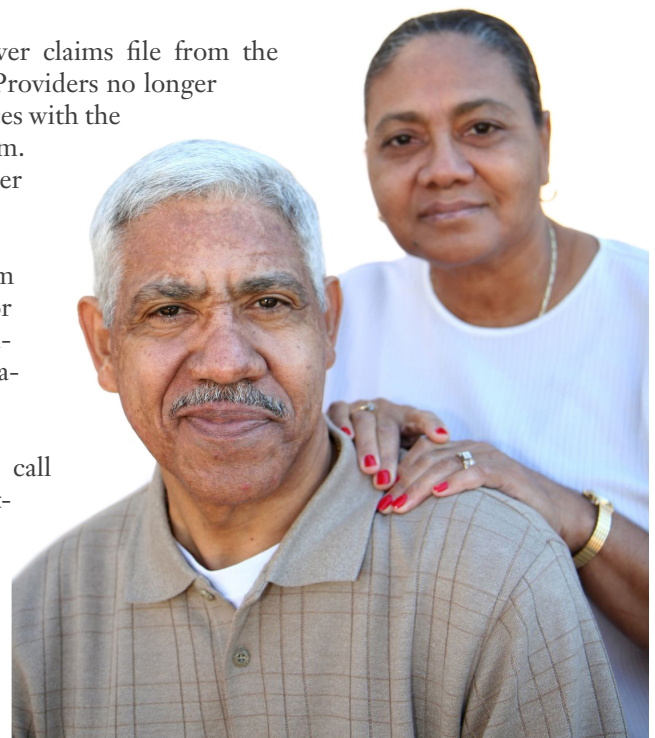
Access and Availability

GCHP providers must meet certain access and availability standards when providing services to Medi-Cal members. The regulations associated to these requirements are as follows:

A. Appointments

GCHP has established and maintains procedures for Medi-Cal members to obtain appointments for routine care, urgent care, routine specialty referral appointments, children's preventative periodic health assessments and adult health assessments, which providers need to implement and follow. Providers also need to establish and maintain procedures regarding follow-up care and missed appointments. Remember that Medi-Cal members cannot be charged for missed appointments. If a member develops a pattern of missing appointments, please contact Provider Relations.

B. First Prenatal Visit

Providers must grant female Medi-Cal members the first prenatal visit for a pregnant member within two (2) weeks of the request.

C. Wait Times

GCHP has established and implemented a procedure to monitor wait times in providers' offices, telephone calls (to answer and return) and time to obtain various types of appointments. Please refer to the Provider Manual or contact Network Operations at providerrelations@goldchp.org with any questions.

D. Telephone Procedures

GCHP requires all providers to maintain a procedure for triaging member's telephone calls, providing telephone medical advice and accessing telephone interpreters.

E. Urgent Care

All providers must ensure that members requiring urgent care that do not require prior authorization are seen within 48 hours of the request.
All request for urgent care services that require prior authorization are seen within 96 hours of the request.

F. PCP Appointments

Non-urgent primary care physician (PCP) services are seen within 10 days of the request.

G. Specialist Appointments

All appointments with specialist are made within 15 days of the request.

H. Ancillary Appointments

All ancillary appointments for the diagnosis or treatment of injury, illness or other health condition is within 15 days of the request.

Timeframes may be shorten or extended as clinically appropriate by a qualified health care professional acting within the scope of his or her practice consistent with professionally recognized standards of practice. If the timeframe is extended, it must be documented in the member's medical record that a longer timeframe will not have a detrimental impact on the member's health.

Updates to the Gold Coast Pre-Authorization Requirements

Gold Coast Health Plan continues to evaluate and monitor the services that require pre-authorization. As a result, the following changes are being made and will become effective July 22, 2015. The following PET scan codes will require authorization:

- Procedure codes 78800 through 79999

High Risk Pregnancy Care Management

Statistics indicate that Ventura County has a high rate of pre-term deliveries. In an effort to be proactive, GCHP Care Management provides perinatal services for our members with high risk pregnancies.

To enhance improved outcomes, GCHP nurse care managers begin by building a trusting relationship with each high risk mother. GCHP is able to facilitate communication with providers, link members to community resources and provide education and psychosocial support, which is so often needed at this crucial time.

Consider Care Management for your members with high risk pregnancies that are less than 35 weeks gestation and have diabetes, chronic hypertension, pre-eclampsia, pre-term labor, placenta previa, IUGR, oligo or polyhydramnios, polypharmacy, seizure or bleeding disorder, severe fetal anomalies or non-adherence to the medical plan.

Click here to access the Care Management referral form to make a referral. This fillable form can be completed and emailed to caremanagement@goldchp.org or faxed to 1-855-883-1552.

Recommendations on Fluoride

The US Preventive Services Task Force (Task Force) recently reviewed the potential benefits of efforts by primary care providers to prevent dental caries (tooth decay). The Task Force recommends two ways for medical providers to help prevent dental caries:

1. In areas where the water supply does not have enough fluoride, prescribe fluoride supplements (drops, tablets, or lozenges) to infants and children beginning at six months of age.
2. Apply fluoride varnish on all children's teeth beginning when an infant's first baby tooth has come in.

CHDP providers perform oral assessment and education at each CHDP health exam. With funding from First 5 Ventura and the Tobacco Settlement Program, the CHDP Oral Health Program provides free fluoride varnish to medical providers who agree to perform and document fluoride varnish applications during office visits. The cost of providing the service may be reimbursed by Medi-Cal. During the last fiscal year (2013-14), 51 CHDP Provider offices and clinics provided 9781 fluoride applications to infants and children in Ventura County.

Click here to read more about the Prevention of Dental Caries in Children From Birth Through Age 5.

Pediatric Care Management

Nearly 1 in 2 children in Ventura County are enrolled in Medi-Cal and are GCHP members. As we all know, the needs of ill children are different … they are not just small adults. Their diseases and responses are different. When children are ill, they can present many challenges to the medical team.

The Care Management Pediatric Team at GCHP partners with other community agencies, such as CCS, Tri-Counties, CHDP and Public Health to coordinate care for children with special needs and conditions.

Our pediatric nurses and social workers collaborate with parents, physicians and the medical management team to identify the health and social needs of at-risk children. Together, a plan of care is formulated and one-on-one attention is given to each child referred.

Click here to access the Care Management referral form to make a referral to Pediatric Care Management team. This fillable form can be completed and emailed to caremanagement@goldchp.org or faxed to 1-855-883-1552. To speak with a GCHP pediatric nurse, call Ms. Lagunas at 1-805-437-5653.

SBIRT: Screening, Brief Intervention, and Referral to Treatment Training

Gold Coast Health Plan (GCHP) and its Health Education Department will host an SBIRT Training in Ventura County. The training will be held on May 20, 2015, from 12:45 PM – 5:00 PM at the Family Medicine Residency and Specialty Care Center, Academic Auditorium in Ventura. The training is Co-Sponsored by the University of California Los Angeles, (UCLA) Integrated Substance Abuse Programs (ISAP) and the California Department of Health Care Services.

Click here for a copy of the flyer and registration form.

The SBIRT Training is designed for healthcare professionals including but not limited to the following: Physicians, Nurse Practitioners, Physician Assistants, Registered Nurses, Psychologists, MFTs, LCSWs, Medical Assistants, Health Educators, Certified Substance Use Disorder Treatment Counselors, and other Behavioral Health Clinicians.

If you would like more information about the training, please send an email to the Health Education Department at healtheducation@goldchp.org.

Diabetes Education

GCHP's Health Education Department wants to let you know that diabetes education classes are available at a variety of hospital systems and clinics contracted with the Plan. Diabetes classes and/or instruction in a one-on-one setting are available at the following locations:

- Community Memorial Hospital
- Clinicas Del Camino Real
- Dignity Health
- Livingston Memorial Visiting Nurse Association
- VCMC Affiliated Clinics

The classes are available in English and Spanish and the majority are free of charge. The Health Education Department has compiled a listing of diabetes education classes available to our members through either there primary care provider, ancillary providers, or community based agencies that provide diabetes education throughout the Ventura County.

Please contact us at healtheducation@goldchp.org if you are interested in referring your patients to any of the classes or required additional information.

Outreach – GCHP Annual Community Resource Fair

Gold Coast Health Plan will host its 4th Annual Community Resource fair at Plaza Park in Oxnard, on Saturday, June 6th, from 10am – 2pm. Free health screenings and resource information will be offered by various health and community agencies.

The GCHP Community Resource Fair will host several exhibitors including the following:

- The City of Ventura Police Department & Ventura County Behavioral Health Department will display the Crash Car trailer which is the mobile DUI prevention exhibit;
- The Ventura County Public Health Tobacco Bus which is utilized to educate the community on the harms of nicotine and tobacco and more;
- Dignity Health will be on-site with their mobile van conducting various health screenings.

There will be fun activities for families and children such as Zumba demos, dancing and entertainment. If you have any questions or are interested in participating please contact us at outreach@goldchp.org.

Save the Date

Gold Coast Health Plan
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4th Annual Community Resource Fair

Saturday, June 6, 2015

Location: Plaza Park, Downtown Oxnard
Address: 500 S. 'C' Street, Oxnard, CA
Time: 10:00 AM – 2:00 PM

- Free Health Screenings
- Entertainment
- Resource Booths
- Giveaways

For more information please call the
Health Education Department at 805-437-5500
Or email Outreach@goldchp.org

Cultural and Linguistic Program Services

GCHP's Cultural and Linguistic Services offers the following services:

- Free sensitivity training to providers. If you are interested in having training at your location, contact Cultural and Linguistic Services at culturallinguistics@goldchp.org.
- Free interpreters to providers and limited English proficient members in order to communicate appropriately. To request a face-to-face interpreter for medical visits or request a sign language interpreter please contact culturallinguistics@goldchp.org. Please allow 5 business days advance notice for face-to-face interpreter services.