



**Gold Coast
Health Plan**SM
A Public Entity

Provider Operations Bulletin

AUGUST 2024

www.goldcoasthealthplan.org

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SECTION 1:

Medi-Cal for Kids & Teens Provider Training

As of January 2024, California's Managed Care Plans (MCPs) must ensure that all Medi-Cal licensed providers receive proper education and training regarding Medi-Cal for Kids & Teens, also known as Early and Periodic Screening, Diagnostic, and Treatment Services (EPSDT), at least every two years.

Medi-Cal for Kids & Teens Services are for all Medi-Cal members under the age of 21, and include, but are not limited to:

- Vision services, including diagnosis and treatment for defects in vision, including eyeglasses.
- Dental services, including relief of pain and infections, restoration of teeth, and maintenance of dental health.
- Hearing services, including diagnosis and treatment for defects in hearing, including hearing aids.
- Other necessary health care, diagnostic services, treatment, and other measures to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services.

Gold Coast Health Plan (GCHP) will host various Medi-Cal for Kids & Teens online trainings for providers and their staff. Attestation forms will be provided to those who attend. Training dates and times will be posted on our website with a link to the training meetings.

Below are the training session materials and corresponding state Department of Health Care Services (DHCS) All Plan Letter.

References

- [DHCS Medi-Cal for Kids & Teens Provider Training](#)
- [DHCS All Plan Letter 23-005: "Requirements for Coverage of Early and Periodic Screening, Diagnostic, and Treatment Services for Medi-Cal Members under the age of 21"](#)

SECTION 2:

Child Health and Disability Prevention (CHDP) Program Transition

Effective July 1, 2024, [Senate Bill \(SB\) 184](#) authorized the state Department of Health Care Services (DHCS) to transition the Child Health and Disability Prevention (CHDP) Program to Medi-Cal Managed Care Plans (MCPs). This transition aligns with the DHCS goal under California Advancing and Innovating Medi-Cal (CalAIM) to reduce administrative complexities, enhance coordination of care and whole person care approach, and increase standardization of care across Medi-Cal by consolidating care responsibilities for children / youth under the Medi-Cal managed care plans.

The transition of the CHDP programs to MCPs will maintain Medi-Cal for Kids & Teens, also known as Early and Periodic Screening, Diagnostic and Treatment (EPSDT), services. These services, which are currently mandated to be covered in the Medi-Cal Fee-for-Service (FFS) and managed care delivery systems, will continue to be available.

GCHP shall cover and ensure the provision of all screening, preventive, and medically necessary diagnostic and treatment services for members under 21 years of age required under Medi-Cal for Kids & Teens services. The EPSDT benefit includes all medically necessary health care, diagnostic services, treatments, and other measures listed in 42 USC Section 1396d(a). GCHP will continue CHDP provider trainings, however the specifics are still being finalized.

The CHDP transition preserves:

- Presumptive eligibility enrollment activities currently offered through the CHDP Gateway. The function of the CHDP Gateway has been preserved, expanded, and renamed Children's Presumptive Eligibility (CPE). [Click here](#) for more information.
- Activities under the CHDP-Childhood Lead Poisoning Prevention (CLPP) Program. Visit the [Ventura County Public Health \(VCPH\) website](#) or the [CDPH website](#) for more information.
- The Health Care Program for Children in Foster Care (HCPCFC). Visit the [DHCS website](#) and the [VCPH website](#) for more information.

SECTION 3:

Initial Health Appointments (IHA)

As of Jan. 1, 2023, the Initial Health Appointment (IHA) requirement states that each primary care provider (PCP) must complete and periodically re-administer a comprehensive IHA, in accordance with the state Department of Health Care Services (DHCS) Population Health Management (PHM) Policy Guide, for all newly assigned members within 120 days of the member's enrollment. The IHA consists of a history of the member's physical and behavioral health, identification of risks, assessment of need for preventive screens or services and health education, and the diagnosis and plan for any treatment of any diseases.

For members less than 18 months of age, the IHA must be completed within 120 calendar days of enrollment or within periodicity timelines established by the American Academy of Pediatrics (AAP) Bright Futures for 2 years of age and younger, whichever is sooner. The IHA is not necessary if the member's PCP determines that the member's medical record contains complete information that was updated within the previous 12 months.

The IHA must be provided in a way that is culturally and linguistically appropriate for the member. PCPs shall offer translation, interpretation, and accommodations for any disability, if necessary. PCPs and their staff may contact Gold Coast Health Plan's (GCHP) Cultural and Linguistic Department at CulturalLinguistics@goldchp.org for more information.

Member Risk Assessment

An essential component of the IHA, the Member Risk Assessment relates to the health and social needs of members, including cultural, linguistic, and health education needs; health disparities and inequities; lack of coverage / access to care; and Social Determinants of Health (SDOH).

A Health Risk Assessment (HRA) is a patient questionnaire that covers personal and family medical history, lifestyle factors, SDOH, and other relevant health information. The HRA helps health care providers evaluate a patient's overall health status and identify risk factors based on the patient's self-reported responses. Providers who effectively identify and manage risk factors can significantly reduce the number of chronic conditions that develop, which improves patient outcomes and decreases health care costs significantly.

While there is no specific format for the HRA, it must address the following questions / topics, as appropriate for age:

- Demographic data
- Self-assessment of health status, frailty and physical functioning
- Biometric assessments
 - » Height, weight, body mass index (BMI)
 - » Systolic / diastolic blood pressure
 - » Blood lipids
 - » Blood glucose
- Psychosocial risks
 - » Depression / life satisfaction
 - » Stress / anger
 - » Loneliness / social isolation
 - » Pain / fatigue
- Behavioral risks
 - » Tobacco / drug use
 - » Physical activity
 - » Nutrition and dental / oral health
 - » Alcohol consumption
 - » Sexual history / practices

- » Motor vehicle safety (e.g., booster seat use, seat belt use)
- » Home safety

The Staying Healthy Assessment (SHA) is one example of a well-known tool that has been used in assessing health risks. While the SHA is no longer a requirement, GCHP encourages providers to continue using it or to implement other evidence-based tools to measure risk assessment.

Social Determinants of Health are the conditions in the environments where people are born, live, learn, work, play, and worship that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Examples of SDOH include:

- Housing instability
- Food insecurity
- Transportation needs
- Utility needs
- Interpersonal safety

The Social Needs Screening Tool, created by the American Academy of Family Physicians, is one example of a screening tool that providers can use as a member risk assessment.

For members 65 years of age and above, cognitive health assessments can help identify whether members have signs of Alzheimer's disease or related dementias. Examples of validated screening tools include the:

- General Practitioner Assessment of Cognition
- Mini-Cog
- Eight-item Informant Interview to Differentiate Aging and Dementia

Adverse Childhood Experiences (ACEs) are potentially traumatic experiences, such as neglect, experiencing or witnessing violence, having a family member attempt or die by suicide, household with substance abuse problems, mental health problems and other experiences that occur in childhood that can affect individuals for years and impact their life opportunities. Two examples of validated screening tools include:

- Adverse Childhood Experience Questionnaire for Adults
- Pediatric ACEs and Related Life Events Screener (PEARLS)

IHA Reports and Outreach Logs

GCHP's Quality Improvement (QI) Department will continue to distribute monthly lists of newly assigned members to each provider site.

IHA monthly reports are designed and intended to be used for documenting your mandatory IHA outreach attempts. These logs must be completed using the GCHP standardized process for timely IHA outreach log completion and submission. IHA monthly outreach logs are to be submitted to the QualityImprovement@goldchp.org once completed. GCHP QI nurses will conduct quarterly IHA medical record reviews to monitor compliance and provide additional support to ensure a thorough IHA is conducted.

Providers and their staff can contact GCHP's QI Department at QualityImprovement@goldchp.org for:

- Continuing education and training related to the IHA and outreach logs.
- Submission of IHA outreach logs.
- Update contact information for recipients of the IHA monthly report.

IHA Resources

- [IHA Billing Codes](#)
- [United States Preventative Services Task Force](#)
- [Bright Futures Periodicity Table](#)
- [Comprehensive Health Assessment Forms](#)
- [Staying Healthy Assessment Questionnaires](#)
- [Social Needs Screening Tool](#)

SECTION 4:

Important Facts for Immunizations

Shots Required for TK–12th and 7th Grade

- **Diphtheria, Tetanus, and Pertussis (DTaP, DTP, Tdap, or Td) — Five doses**
(Four doses OK if one was given on or after 4th birthday. Three doses OK if one was given on or after 7th birthday.)
For 7th–12th graders, at least one dose of pertussis-containing vaccine is required on or after 7th birthday.
- **Polio (OPV or IPV) — Four doses**
(Three doses OK if one was given on or after 4th birthday)
- **Hepatitis B — Three doses**
(Required at admission to any grade except 7th grade)
- **Measles, Mumps, and Rubella (MMR) — Two doses**
(Both given on or after 1st birthday)
- **Varicella (Chickenpox) — Two doses**

The Transitional Kindergarten / Kindergarten – 12th grades immunization requirements apply to new admissions and transfers for all grades, including 7th grade, and students whose exemptions are no longer valid.

Students Advancing to 7th Grade Need Records of:

- **Tetanus, Diphtheria, Pertussis (Tdap) — One dose**
(Whooping cough booster usually given at 11 years and up)
- **Varicella (Chickenpox) — Two doses**
(Usually given at 12 months and 4–6 years of age)

HPV Vaccine

Protect your child with vaccination. The Centers for Disease Control and Prevention (CDC) recommends two doses of HPV vaccine at 11–12 years of age. HPV vaccination can be started at age 9 years of age.

- Children who get the first dose **before** their 15th birthday need only two doses.
- Teens who get the first dose **on or after** their 15th birthday need three doses.

The HPV vaccine series is most effective when given before a person is exposed to the virus.

Dosage and Schedule

CDC recommends routine vaccination of preteens at ages 11 or 12 years of age. The vaccination series can be started at 9 years of age. HPV vaccine may be given at the same time as other vaccines.

HPV vaccination is administered as:

- A two-dose series (0, 6–12 months) for most persons who initiate vaccination at 9 through 14 years of age.
- A three-dose series (0, 1–2, 6 months) for persons who initiate vaccination at 15 through 45 years of age, and for immunocompromised persons.

In a two-dose schedule of HPV vaccine, the **minimum interval** is five months between the first and second dose.

In a three-dose schedule of HPV vaccine, the **minimum intervals** are four weeks between the first and second dose, 12 weeks between the second and third dose, and five months between the first and third dose.

SECTION 5:

Behavioral Health

Wellness Coach Certification

In just a few short weeks, the total number of Certified Wellness Coaches (CWC) has doubled to over two hundred! Congratulations to these dedicated professionals who are now equipped to help enhance the mental well-being of children and youth across the state. This diverse group is ready to bring meaningful support to our communities.

Train New Trainers (TNT) Primary Care Psychiatry (PCP) Fellowship Scholarship

The TNT PCP Fellowship Scholarship supports students accepted into the year-long clinical education program for primary care providers who wish to receive advanced training in primary care psychiatry. The TNT PCP Fellowship Scholarship application closes on Oct. 31, 2024. For more information, visit [Train New Trainers Primary Care Psychiatry Fellowship Scholarship](#).

New Behavioral Health MCAS (Managed Care Accountability Set) Measures for Measurement Year 2025

The U.S. Preventive Services Task Force (USPSTF) recommends screening for depression among adolescents 12-18 years of age and the general adult population, including pregnant and postpartum women. The USPSTF also recommends that screening be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and proper follow-up.

The state Department of Health Care Services (DHCS) Comprehensive Quality Strategy outlines three clinical focus areas – children’s preventive care, maternity care and birth equity, and behavioral health integration – that are designed to address the foundations of health (i.e., preventive efforts that have long-lasting impact from infants to seniors). Addressing child and maternal health and behavioral health for all populations will reduce chronic diseases and serious illnesses in the decades to come. As such, there is increasing DHCS focus on behavioral health measures, as evidenced by the addition of four new measures to the Managed Care Accountability Set (MCAS) measure set on depression screening and follow-up.

Beginning in Measurement Year (MY) 2025, Gold Coast Health Plan (GCHP) will be held to the Minimum Performance Level (MPL) or 50th percentile benchmark for the following four measures:

1. [Depression Screening and Follow-up \(DSF\)](#) – Members ages 12 years and older who were screened for depression using a standardized tool and, if screened positive, received follow-up care. The measure requires a standardized assessment instrument, such as the PHQ-9, and a LOINC code to capture the screening. Follow-up care may consist of a clinic encounter, dispensed antidepressant medication, and/or documentation of additional depression screening indicating a negative screen.
2. [Depression Remission or Response for Adolescents and Adults \(DRR\)](#) – Members ages 12 years and older with a diagnosis of depression who had an elevated PHQ-9 score, with evidence of remission or response within 4-8 months of the elevated score. The measure requires a LOINC code to identify the PHQ-9 score to indicate follow-up or remission. Selection of the appropriate PHQ-9 should be based on the member’s age.
3. [Prenatal Depression Screening \(PND\)](#) – Pregnant members who were screened for clinical depression, and if screened positive, received follow-up care within 30 days (about 4 and a half weeks). The measure requires a standardized assessment instrument, such as the Edinburgh Postnatal Depression Scale (EPDS), and a LOINC code to capture the screening. Follow-up care may consist of a clinic encounter, dispensed antidepressant medication, and/or documentation of additional depression screening indicating a negative screen.

SECTION 6:

Cultural and Linguistic Services

Accessing Language Assistance Services

Gold Coast Health Plan (GCHP) adheres to federal and state regulations that require health plans to provide language assistance services to Limited English Proficient (LEP), non-English speaking or monolingual members at no cost to members.

To access [language assistance services](#), including translation and alternative formats (such as Braille, large print, audio, accessible electronic formats) and auxiliary aids and services for individuals with disabilities, contact GCHP's Cultural and Linguistic Services.

Additionally, telephone interpreting services are available to GCHP providers 24 hours a day, seven days a week. If you are a medical health care provider, or behavioral health provider, it is important to use the correct access code when accessing a telephone interpreter. Please use the following information:

For Medical Providers and Staff

To access a telephone interpreter:

1. Dial: 1-866-421-3463
2. Provide access code: Health care providers access code is **843014**
3. Indicate: Language needed
4. Provide: Caller's name, agency, member's zip code, member's GCHP ID number
5. Document the interpreter's name and ID number for reference

For Carelon Behavioral Health Providers

To access a telephone interpreter:

1. Dial: 1-866-421-3463
2. Provide access code: Carelon Behavioral Health Providers Access Code is **80086648**
3. Indicate: Language needed
4. Provide: caller's name, agency, member's zip code, member's GCHP ID number
5. Document the interpreter's name and ID number for reference

As a reminder, members are **NOT** required to bring an interpreter or use a friend, family, including minors, to interpret during their medical and behavioral appointments.

Note: For indigenous telephonic interpreting services, please call ahead to schedule an interpreter. To request an appointment with a telephonic interpreter, providers and staff may complete the [request form](#).

State Department of Health Care Services (DHCS) Guidelines on Alternative Format Selection for Members

GCHP would like to remind you that the state Department of Health Care Services (DHCS) released the [All Plan Letter \(APL\) 22-002: "Alternative Format Selection for Members with Visual Impairments,"](#) which provides information on the processes to ensure effective communication with members with visual impairments or other disabilities requiring the provision of written materials in alternative formats, including auxiliary aids and services to individuals with disabilities.

Below are descriptions of each alternative format:

- Large print: Large (20-point) size Arial font.
- Audio CD: Provides the ability to listen to hear notices and information.
- Data CD: This allows for the use of computer software to read notices and other written information.
- Braille: Uses raised dots that can be read with fingers.

CLAS, Cultural Competency, and Cultural Humility

GCHP encourages health care providers to learn about a patient's social identities, life experiences, values, perceptions, communication needs, history, and more. Eliciting and listening to patient's concerns in a respectful and compassionate manner is key to providing high quality care.

You can do this by providing CLAS, which includes practicing cultural competency and cultural humility.

To learn more about how to provide culturally and linguistically appropriate services, please read the [Providing CLAS](#) strategies.

For questions or additional resources, visit the GCHP website or contact GCHP's Cultural and Linguistic Services at 1-805-437-5961, Monday through Friday from 8 a.m. to 5 p.m., (except holidays). You can also email CulturalLinguistics@goldchp.org.

SECTION 7:

Health Education

Well-Child Visits

Providers are encouraged to talk to parents about the importance of routine well-child visits, especially for newborns and babies under 30 months of age. Well-child visits are an opportunity for providers to assess a child's health status and provide personalized guidance for healthy babies.

- These visits are vital for disease prevention and health promotion for a child's development. Providers can download Gold Coast Health Plan's (GCHP) [Well-Care Visits: What to Expect \(0 to 30 Months\)](#) flyer (available in English and Spanish) to provide to members.
- After age 3, well-child visits are done once a year until age 21. GCHP has also created a [Well-Care Visit: What to Expect 3 -21 Years](#) flyer.

0 to 30 Months

Well-Care Visits: *What to Expect*

What does the doctor evaluate during a well-care visit?

- Health history
- Physical exam
- Height, weight, body mass index (BMI), and head circumference
- Hearing and vision
- Lead screening
- Physical activity
- Healthy eating habits
- Behavior with family and groups
- Vaccines (shots to prevent diseases)
- Screening for physical and mental development
- Health education and safety
- Dental fluoride varnish*

* Dental fluoride varnish can be done up to three times a year at the doctor's office.

	First 3-5 days of life	1 Month	2 Months	4 Months	6 Months	9 Months	12 Months	15 Months	18 Months	24 Months	30 Months
Well-Care Visit											
Vaccines*											
Lead Screening							✓				
Developmental Screening						✓			✓		✓

* Vaccines may not be given at every visit.

What can I talk to my child's doctor about during the visit?
You might have questions about parenting, eating and sleeping habits, and safety issues at home. The doctor is there to listen and help. If you have any questions, this is the time to ask. Your child's doctor can provide guidance and helpful resources.

Do I have to pay for well-care visits?
No. This is a free service if you are a full-scope Gold Coast Health Plan (GCHP) member.

What can I do if I need care after hours?
Call GCHP's 24-Hour Advice Nurse Line at **1-805-437-5001** or **1-877-431-1700** (toll-free). If you use a TTY, call **711**. You can talk to a registered nurse 24 hours a day, seven days a week, in your preferred language when you or a family member have medical questions.

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3 to 21 Years

Well-Care Visits: *What to Expect*

What can the doctor evaluate during a well-care visit?

- Health history
- Physical exam
- Height, weight, and blood pressure
- Vision and hearing
- Physical and mental development
- Eating habits
- Behavioral and mental health
- Immunizations (shots to prevent diseases)
- Health education
- Lead exposure screening (under 6 years)
- Dental fluoride varnish (under 6 years can be done up to three times a year at the doctor's office)
- Substance use and tobacco/vape screening (ages 11-21)
- Sexual history (starting at age 12)

How often should well-care visits be scheduled?
Once a child turns 3, well-care visits should be scheduled **every year** up to the age of 21.

Do you need help scheduling a well-care visit?
Call GCHP's Health Education Department at **1-805-437-5718**, Monday through Friday, from 8 a.m. to 5 p.m. (except holidays).

What can you talk to your child's doctor about?
You might have questions about parenting, eating habits, mental health issues, or stress at home. The doctor is there to listen and help. If you or your child have any questions, this is the time to ask. Your child's doctor can provide guidance and helpful resources.

Do I have to pay for well-care visits?
No. Well-care visits are a covered benefit for Gold Coast Health Plan (GCHP) members.

What can I do if I need care after hours?
Call GCHP's 24-Hour Advice Nurse Line at **1-805-437-5001** or **1-877-431-1700** (toll-free). If you use a TTY, call **711**. You can talk to a registered nurse in your preferred language when you or a family member have medical questions.

For other questions, call Member Services at **1-888-301-1228**, Monday through Friday, from 8 a.m. to 5 p.m. (except holidays). If you use a TTY, call **711**. Members may also visit the GCHP website at www.goldcoasthealthplan.org.

Location	Address	Dates and Times
Our Lady of Guadalupe Church	427 N. Oak Street, Santa Paula	Oct. 15, 2024 4 – 8 p.m.
Ventura College	4667 Telegraph Road, Ventura	Nov. 2, 2024 8 a.m. to 2 p.m.

To see upcoming flu vaccine clinic hours and locations throughout Ventura County, please visit the [GCHP calendar](#).

Coming Soon: Flu Vaccine Member Incentive

GCHP is preparing for an upcoming new member incentive to promote flu vaccines among members 6 months to 2 years of age.

To qualify, members must be full-scope Medi-Cal enrolled in GCHP, between 6 months and 2 years of age and must complete their 2nd dose of the flu vaccine on or before their 2nd birthday by May 31, 2024. Members will be provided a member incentive flyer for the flu, and we ask our providers to assist members in completing their vaccine and member incentive flyer. The flyer can be downloaded from our website through our [Member Rewards Program webpage](#), and can be sent to GCHP via:

Email: QualityImprovement@goldchp.org

Fax: 1-805-248-7616



Mail: Gold Coast Health Plan
Attn: Quality Improvement
P.O. Box 9153, Oxnard, CA 93031-9826

GCHP 24-Hour Advise Nurse Line

GCHP offers a [24-Hour Advice Nurse Line](#) to support members during flu season and beyond. Members can call 1-805-437-001, 24 hours a day, seven days a week, and receive the care and guidance they need promptly.

Healthwise – Health Library

Providers can direct members to learn about the flu and flu vaccine through [GCHP's Health Library](#). Content includes videos and interactive tools in English and Spanish.

24-Hour Advice Nurse Line

Gold Coast Health Plan (GCHP) has a 24-hour Advice Nurse Line. This line gives you access to a registered nurse 24 hours a day, seven days a week. The nurse can speak to you over the phone in your preferred language when you or a family member have any medical questions.

The nurse also can help you decide if you:

- Need to go to urgent care.
- Can wait to see your doctor.
- Can take care of your symptoms at home.

Talk to a nurse by calling:

- 1-877-431-1700 (toll free)
- If you use TTY, call 711

If you are having a medical emergency, dial 911, or go to the nearest Emergency Room (ER).

To receive free health education materials on your condition, please call the GCHP Health Education Department at 1-805-437-5961. Monday through Friday, 8 a.m. to 5 p.m. (except holidays). If you use TTY, call 711. You can also visit www.GoldCoastHealthPlan.org.

Línea de Asesoramiento de Enfermeras de 24 horas

Gold Coast Health Plan (GCHP) cuenta con una Línea de Asesoramiento de Enfermeras las 24 horas. Esta línea le brinda acceso a una enfermera profesional las 24 horas del día, los siete días de la semana. La enfermera puede hablar con usted por teléfono en el idioma que prefiere si usted o un miembro de su familia tienen alguna pregunta médica.

La enfermera también puede ayudarle a decidir si usted:

- Necesita ir a atención de urgencia.
- Puede esperar a ver a su médico.
- Puede tratar sus síntomas en casa.

Hable con una enfermera llamando al:

- 1-877-431-1700 (llamada gratuita)
- Si usa un TTY, llame al 711

Si tiene una emergencia médica, marque el 911 o vaya a la Sala de emergencias (ER, por sus siglas en inglés) más cercana.

Para recibir materiales educativos de salud gratuitos sobre su condición de salud, llame al Departamento de Educación para la salud de GCHP al 1-805-437-5961, de lunes a viernes, de 8 a.m. a 5 p.m. (excepto días festivos). Si usa un TTY, llame al 711. También puede visitar www.GoldCoastHealthPlan.org.

Diabetes Prevention Program

Help our members prevent diabetes by encouraging them to join the free [Diabetes Prevention Program](#) with our partner Solera. GCHP members that enroll and participate in the program will receive an activity tracker, a wireless scale (with online programs), and help from a health coach.

To sign up, members can visit the Solera website (available in [English](#) and [Spanish](#)) or call 1-888-305-6008 (TTY: 711), Monday to Friday, from 6 a.m. to 6 p.m.



Take the Path to a Healthier You
Don't miss out on this program for Gold Coast Health Plan members

Getting healthier and losing weight is even easier now.

Gold Coast Health Plan (GCHP) has teamed up with Solera to bring you a diabetes prevention program designed with you in mind. When you sign up, you'll get health education information to make healthier food choices, move more, and lower your risk of type 2 diabetes. And it's available at no cost to you!

Don't miss out. Join other Gold Coast Health Plan members who have already gotten started on their health journey.

For other health concerns, call the GCHP 24-Hour Advice Nurse Line toll-free at 1-877-431-1700 (TTY: 711).

For all other questions, call GCHP Member Services at 1-888-301-1228 (TTY: 711), Monday–Friday, 8 a.m. to 5 p.m. (excluding holidays).

1 in 3 people are pre-diabetic

Losing 5% to 7% of your weight lowers your risk

Participants who lose weight have more energy and sleep better

Get Started in Three Easy Steps

- 1 TAKE A HEALTH QUIZ**
Complete a short quiz at solera4me.com/gchp or call 1-888-305-6008 (TTY: 711) Monday through Friday, 6 a.m. to 6 p.m.
- 2 PICK YOUR PROGRAM**
Choose an online-only program from a leading health solution or a community group.
- 3 GET YOUR TOOLS**
Get an activity tracker,* receive a wireless scale (with online programs), and help from a health coach.

*For participants who complete four weeks of activity meeting Diabetes Prevention Program guidelines. Applies to select models; limited to one per person. Solera Health reserves the right to substitute an alternative tracker.



Elija el camino para estar más saludable
No se pierda este programa para los miembros de Gold Coast Health Plan

Ahora es más fácil mejorar su salud y bajar de peso.

Gold Coast Health Plan (GCHP) se asoció con Solera para ofrecerle un programa de prevención de la diabetes que creamos pensando en usted. Cuando se inscribe, recibirá información sobre educación en salud para que elija alimentos más saludables, moverse más la y reducir el riesgo de contraer diabetes tipo 2. Además, ¡está disponible sin costo para usted!

No se lo pierda. Únase a otros miembros de Gold Coast Health Plan que ya comenzaron su recorrido hacia una buena salud.

Para otros problemas de salud, llame gratis a la Línea de Asesoramiento de Enfermeras las 24 horas de GCHP al 1-877-431-1700 (TTY: 711).

Para todas las demás preguntas, llame al Servicio para Miembros de GCHP al 1-888-301-1228 (TTY: 711), de lunes a viernes, de 8 a.m. a 5 p.m. (excepto días festivos).

1 de cada 3 personas tiene prediabetes

Bajar de peso entre un 5% y un 7% reduce el riesgo

Los participantes que bajan de peso tienen más energía y duermen mejor

Tres pasos sencillos para empezar

- 1 RESPONDA EL CUESTIONARIO DE SALUD**
Complete un breve cuestionario en solera4me.com/es/gchp o llame al 1-888-305-6008 (TTY: 711) de lunes a viernes, de 6 a.m. a 6 p.m.
- 2 ELIJA SU PROGRAMA**
Elija un programa únicamente en línea por parte de una de las principales soluciones de salud o un grupo comunitario.
- 3 OBTENGA SUS HERRAMIENTAS**
Reciba un dispositivo de registro de actividad*, una báscula inalámbrica (con programas en Internet) y la ayuda de un entrenador de salud.

*Para participantes que completen cuatro semanas de actividades que cumplan con las pautas del Programa de Prevención de la Diabetes. Se aplica a modelos de fitness seleccionados, límite de uno por persona. Solera Health se reserva el derecho de sustituir por un rastreador alternativo.

Chronic Disease Self-Management Program

GCHP is offering the Chronic Disease Self-Management Program (CDSMP) for members 18 years and older to help them take charge of the conditions and live healthier lives. To view upcoming classes, visit the GCHP calendar. Providers can refer any member to GCHP with a chronic condition including diabetes, heart disease, obesity, arthritis, asthma, chronic pain, lung disease, renal disease, tobacco cessation, and more.

NEW: Diabetes Self-Management Program

GCHP's new Diabetes Self-Management Program (DSMP) is a six-week interactive program that allows members to make individual plans to help them meet their goals.

Providers and members can contact GCHP's Health Education Department for additional scheduling and other community classes.

GCHP Workshop Schedule

Workshop	Dates	Day	Time
DSMP English Virtual #1	July 30 – Sept. 3	Tuesday	2 – 4 p.m.
DSMP Spanish Virtual #1	Aug. 1 – Sept. 5	Thursday	10 a.m. to 12 p.m.
CDSMP Spanish Telephonic #3	Sept. 24 – Oct. 29	Tuesday	3:30 – 4 p.m.
CDSMP English Telephonic #3	Sept. 25 – Oct. 30	Wednesday	3:30 – 4 p.m.
CDSMP English Telephonic #4	Nov. 5 – Dec. 10	Tuesday	10:30 – 11 a.m.
CDSMP Spanish Telephonic #4	Nov. 5 – Dec. 10	Tuesday	4 – 4:30 p.m.

* Diabetes Self-Management Program (DSMP)

* Chronic Disease Self-Management Program (CDSMP)

Health Education Workshops

GCHP's Health Education Department hosts various health workshops throughout Ventura County. Topics include heart health, well-care visits, mental health and substance use, men's health, diabetes, asthma, prenatal and postpartum care, women's health, and much more. For additional information or to request health education services, contact GCHP's Health Education, Cultural and Linguistic Services at 1-805-437-5961, Monday through Friday from 8 a.m. to 5 p.m. (except holidays). You can also email HealthEducation@goldchp.org.

Health Education

For more information including referring members or requesting health education materials, please contact GCHP's Health Education, Cultural and Linguistic Services at 1-805-437-5961, Monday to Friday, 8 a.m. to 5 p.m. (except holidays).

Complete the [Health Education Referral Form](#) to refer members. To receive materials, email HealthEducation@goldchp.org. Visit [GCHP's Health Education webpage](#) to find out more.

SECTION 8:

Medi-Cal Rx Updates

Gold Coast Health Plan (GCHP) Website and Pharmacy Newsletter

Medi-Cal Rx updates can be viewed on the [Provider Pharmacy Services](#) section of Gold Coast Health Plan (GCHP) website. GCHP Pharmacy Services also publishes a quarterly newsletter that includes important Medi-Cal Rx updates and useful articles and tips! [Click here](#) to view the most recent Pharmacy Newsletter.

Changes to the Contract Drugs List (CDL) and Covered Products Lists

Please check the [Contracts Drug List \(CDL\)](#) for the most recent changes to the medications and other covered products lists. These updates typically occur at the beginning of every month. You may also view the Medi-Cal Rx [Drug Lookup Tool](#). This easy-to-use feature has been upgraded and now allows you to look up drugs by brand or generic name. It also lists the NDC and available dosages, any restrictions, and whether prior authorization is required. There is also a link to CoverMyMeds to submit an electronic prior authorization (ePA). For instructions on how to use this feature, [click here](#).



Medi-Cal Rx Code I Diagnosis Requirement for Chronic Weight Management: Reject Code 80 – Diagnosis Code Submitted Does Not Meet Drug Coverage Criteria

Effective April 30, 2024, Medi-Cal Rx implemented claim utilization management (UM) edit for Code I diagnosis restriction (Reject Code 80 – Diagnosis Code Submitted Does Not Meet Drug Coverage Criteria) for members 22 years of age and older. If the Code I diagnosis requirement is not met, claims for liraglutide (Saxenda) and semaglutide (Wegovy) submitted to Medi-Cal Rx will deny with Reject Code 80 – Diagnosis Code Submitted Does Not Meet Drug Coverage Criteria. For further information on the ICD-10 code(s) acceptable for Saxenda and Wegovy, please refer to the “[Medi-Cal Rx Diagnosis Crosswalk](#).” Please provide a diagnosis or ICD-10 code(s) with the prescription.

Enteral Nutrition Updates

The [List of Contracted Enteral Nutrition Products](#) has been updated on the [Medi-Cal Rx Web Portal](#). The effective date of the changes is Sept. 1, 2024. The following products will be deleted from the list:

Manufacturer	Product Label Name	Medi-Cal 11-digit Billing Number (NDC)
Nutricia North America	Neocate® Junior with Prebiotics, unflavored, 400g powder	49735012912
Nutricia North America	Neocate® Junior with Prebiotics, tropical flavor, 400g powder	49735012124

New Medi-Cal Rx Web Portal Resource Pages: FDA Drug Recall Notification

Medi-Cal Rx will now provide notifications to prescribers and members impacted by Class I and Class II U.S. Food and Drug Administration (FDA) Drug Recalls. Each Class I and Class II FDA Drug Recall will be announced via an alert published on the [Bulletins & News](#) page of the [Medi-Cal Rx Web Portal](#). Additionally, impacted prescribers and members will receive letters by U.S. mail for Class I drug recalls.

- Prescribers may access the [FDA Drug Recall Notifications](#) page by selecting **Drug Recall** on the [Medi-Cal Rx Provider Portal](#).

For more information regarding Medi-Cal Rx, visit the [Medi-Cal Rx Education & Outreach page](#) and look for updates under [Medi-Cal Rx's Bulletins & News](#).

The [Medi-Cal Rx](#) website contains the most accurate, up-to-date information. The website includes an overview and background information, frequently asked questions (FAQs), [Bulletins & News](#), [Contract Drugs List \(CDL\)](#), [Medi-Cal Rx Provider Manual](#) and other helpful information. Make sure to bookmark this website today and sign up for the [Medi-Cal Rx Subscription Services \(MCRxSS\)](#).

For assistance regarding a pharmacy claim or prior authorization (PA), please contact the Medi-Cal Rx Customer Service Center at 1-800-977-2273. Agents are available 24 hours a day, seven days a week, 365 days a year.

For pharmacy billing, claims will process under: **BIN 022659, PCN 6334225, Group MEDICALRX.**

For assistance regarding submitting a PA or appeals for a pharmacy claim to Medi-Cal Rx, please fax to 1-800-869-4325.

To locate a Medi-Cal Rx contracted pharmacy, [click here](#).

COVID-19 Updates

- ACIP recommends 2024-2025 COVID-19 vaccine as authorized or approved by FDA in persons ≥ 6 months of age.
- California Department of Public Health (CDPH), Immunization Branch has updated [COVID-19 Provider FAQs](#).
- For current information regarding Medi-CAL's COVID-19 response, visit the [COVID-19 Medi-CAL Response page](#).
- COVID-19 vaccines, over-the-counter (OTC) [COVID-19 antigen test kits](#) and treatment are still covered benefits under Medi-Cal Rx. For more information, visit the [Medi-Cal Rx Contract Drugs List](#) to see what is covered.
- As of Nov. 29, 2023, COVID-19 vaccines are now covered under Medi-Cal Rx for beneficiaries 3 years of age and older. For members 6 months to 3 years of age, coverage of the vaccine will be available only through the Vaccines for Children (VFC) program. Products remain federally funded. To locate an eligible provider, [click here](#) or call 1-877-243-8832.

Advisory Committee on Immunization Practices (ACIP) Recommendation Updates

The Advisory Committee on Immunization Practices (ACIP) approved the following recommendation at the June 26-28, 2024, meeting:

- ACIP recommends adults 75 years of age and older receive a single dose of the RSV vaccine.
- ACIP recommends adults 60-74 years of age and older who are at increased risk of severe RSV disease receive a single dose of the RSV vaccine.
- ACIP recommends PCV21 (CAPVAXIVE™) as an option for adults aged >19 years who currently have a recommendation to receive a dose of PCV.


For more information on ACIP recommendations, [click here](#).

Physician Administered Drugs (PADs)

This section serves as a reminder that Physician Administered Drugs (PADs) include all infused, injectable drugs provided or administered to a member that is billed by a provider on a medical claim by a Procedure Code (i.e., J-Code). These providers include, but are not limited to, physician offices, clinics, outpatient infusion centers, and hospitals.

GCHP maintains risk for PADs, and, with few exceptions, these medications are not billable under the state Medi-Cal pharmacy benefit program (Medi-Cal Rx). Certain PADs require prior authorization (PA) to ensure medical necessity prior to receiving the drug therapy. Any request for a PAD medication (administered at a provider's office or infusion / hospital facility) via Procedure Code (i.e., J-Code) requiring a PA must be submitted as a [Prior Authorization Treatment Request Form](#) to GCHP to be considered for coverage under the medical benefit. Generally, PADs are covered under the medical benefit and billed by the provider on a medical claim to GCHP. The provider will need to purchase the drugs from their wholesaler, distributor, or manufacturer (or another internal process at their site of practice) and then administer to the member and later bill GCHP for reimbursement.

Effective Feb. 20, 2024, the Physician Administered Injectables List has been re-titled to Physician Administered Drugs List and the list has been updated. GCHP will continue to update this list. Please use the [List of Services Requiring Prior Authorizations](#) (see list of Physician Administered Drugs) for the most updated list.


Integrity • Accountability • Collaboration • Trust • Respect

PRIOR AUTHORIZATION TREATMENT REQUEST FORM

☐ URGENT (72 hours) ☐ ROUTINE ☐ RETRO
 FAX: 1-855-883-1552 PHONE: 1-888-301-1228 www.goldcoasthealthplan.org

TO PROCESS YOUR REQUEST THIS FORM MUST BE COMPLETED AND LEGIBLE

PROVIDER: Authorization does not guarantee payment. Eligibility must be verified at time services are rendered.

Patient Name: Last _____ First _____ Date: _____ Mailing Address: _____ City: _____ Zip: _____ CIN Number: _____ Male <input type="checkbox"/> Female <input type="checkbox"/> Date of Birth: _____ Age: _____ Name of PCP: _____ Location: _____	
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Ordering Provider:	Rendering Provider:	Facility / Vendor:
<input type="checkbox"/> In-Network <input type="checkbox"/> Out-of-Network <input type="checkbox"/> Out-of-Area Name: _____ Specialty: _____ NPI: _____ TIN: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____ Office Contact: _____	<input type="checkbox"/> In-Network <input type="checkbox"/> Out-of-Network <input type="checkbox"/> Out-of-Area Name: _____ Specialty: _____ NPI: _____ TIN: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____ Office Contact: _____	<input type="checkbox"/> In-Network <input type="checkbox"/> Out-of-Network <input type="checkbox"/> Out-of-Area Name: _____ Specialty: _____ NPI: _____ TIN: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____ Office Contact: _____

AUTHORIZATION REQUEST

☐ Outpatient Facility ☐ DME Rental (RPT)
☐ Inpatient Facility ☐ Home Health
☐ SNF ☐ Home Infusion

☐ DME Purchase (DIB)
☐ Rehab Services (PT, OT, ST)
☐ Radiology Imaging Services

☐ Hospice
☐ Surgical
☐ CCS
☐ Interventional Pain Management
☐ Orthotics / Prosthetics
☐ Other

Estimated Length of Stay (days): _____

REASON FOR OUT-OF-NETWORK REQUEST

☐ Member's Preference
☐ Specialized Procedure / Area of Expertise

☐ Provider Not Accepting New Patients
☐ Timely Access to Provider

☐ Provider Not Available In-Network
☐ Other: _____

REFERRING PROVIDER'S ORDER MUST BE SUBMITTED

Date(s) of Service: _____		Retro Date(s) of Service: _____	
List ALL procedures requested along with appropriate CPT code(s)			
Diagnosis: _____ ICD-10: _____			

CPT/HCPCS Code(s)	Requested Procedure(s)	Quantity	CPT/HCPCS Code(s)	Requested Procedure(s)	Quantity

PERTINENT HISTORY (SUBMIT RELEVANT MEDICAL RECORDS, TEST RESULTS, X-RAYS, ETC.)

711 East Daily Drive, Suite 106, Camarillo, CA 93010 | 1-888-301-1228 | www.goldcoasthealthplan.org

Rev. 04/23



**Gold Coast
Health Plan**SM
A Public Entity

Provider Operations Bulletin

AUGUST 2024

For additional information, contact Customer Service at 1-888-301-1228.
Gold Coast Health Plan
711 East Daily Drive, Suite 106, Camarillo, CA 93010
www.goldcoasthealthplan.org