Gold Coast Health Plan℠
A Public Entity

Provider Operations Bulletin

FEBRUARY 2025

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POB 72

SECTION 1:

Child and Adolescent Preventive Health Care Webinar

Gold Coast Health Plan's (GCHP) Quality Improvement Department invites you to join us for a Lunch and Learn Webinar on preventive health care for children and adolescents on **March 19, 2025, 12 - 1 p.m.**

Presenters will include:

- Dr. James Cruz, GCHP Acting Chief Medical Officer
- Dr. Carlos O'Bryan, FAAP, Medical Director of Academic Family Medicine Center and Urgent Care
- Dr. Teri Brown, GCHP Medical Director
- April Whetsell, MPH, GCHP Quality Improvement Program Manager I

What you will learn

Attendees will learn how to increase vaccination rates through evidence-based best practices used to confront vaccination hesitancy, review the required screenings and schedules for well-child visits age 0-21 years, and dive into the child and adolescent quality measures. In addition, GCHP will share resources for providers and members.

If you and/or your clinic staff would like to attend this webinar, please click here to register. Registration will remain open until the day of webinar.

SECTION 2:

Medi-Cal Rx Updates

Pediatric Integration of Members 21 Years of Age and Younger

Medi-Cal Rx reinstated claim edits and prior authorization (PA) requirements for members 21 years of age and younger on Jan. 31, 2025, for new start drugs / products. Continuation of therapy claims will be implemented within 60 days from Jan. 1, 2025.

Pharmacy providers and prescribers may proactively submit PA requests up to 100 days in advance of new start therapy or PA expiration for members 21 years of age and younger starting Jan. 31, 2025. For more information on claim and PA request requirements, refer to the Medi-Cal Rx Provider Manual. For more information on reinstatement of Pediatric Integration, go to the Medi-Cal Rx Education & Outreach page and select the Pediatric Integration.

California Children's Services Paneled Providers

On Jan. 31, 2025, Medi-Cal Rx implemented the California Children's Services (CCS) Panel Authority policy for CCS Paneled Providers who are physicians or certified nurse practitioners and enrolled in Medi-Cal. CCS Panel Authority enables CCS Paneled Providers to prescribe for members 20 years of age and younger without submitting a PA request for Medi-Cal Rx covered drugs / products, with some exceptions.

Prescriptions written by providers that do not meet the CCS Panel Authority policy requirements or by providers without CCS Panel Authority will be subject to PA requirements.

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

Please check the Contract 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 National Drug Code (NDC) and available dosages, any restrictions, and whether PA 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.

For more information regarding Medi-Cal Rx, please click on the Medi-Cal Rx Education & Outreach page and look for any new updates under Medi-Cal Rx's Bulletins & News.

The state Department of Health Care Services (DHCS) has a website for Medi-Cal Rx that contains the most accurate, up-to-date information. The website includes an overview and background information, frequently asked questions (FAQs), Bulletins & News, CDL, Medi-Cal Rx Provider Manual and other helpful information. Please 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 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 per year.

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

For assistance regarding submitting a prior authorization 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, please click here.

DHCS VFC Pharmacy Pilot Program

The state Department of Health Care Services (DHCS) is collaborating with the California Department of Public Health (CDPH) on the Vaccines for Children (VFC) Pharmacy Pilot program. DHCS will reimburse Medi-Cal enrolled pharmacy providers who provide immunization services under the VFC program to VFC-eligible members in Medi-Cal. My Turn Vaccine Locator is available to find vaccine providers (including pharmacies enrolled in VFC) in a given coverage area: Vaccine Locator – My Turn CA.gov.

The VFC Program helps families by providing vaccines at no cost to medical providers who serve eligible children from birth through 18 years of age. CDC contracts with vaccine manufacturers to buy vaccines at reduced rates. Enrolled providers order federally funded vaccines through their state VFC program and receive routine vaccines (including influenza) at no cost.

Medical Benefit Drugs or Physician Administered Drugs

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.

Gold Coast Health Plan (GCHP) maintains risk for PADs and – with few exceptions – these medications are not billable under the California Medi-Cal pharmacy benefit program (Medi-Cal Rx). Certain PAD drugs require 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 requiring a PA must be submitted as a Prior Authorization Treatment Request Form to GCHP to be considered for coverage under the medical benefit. For the most part, 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.

GCHP, with direction from DHCS and the GCHP Pharmacy & Therapeutics (P&T) Committee, updates the PAD list quarterly. This notice is to inform you of the approved changes from the Nov. 14, 2024, P&T committee meeting will be effective May 1, 2025.

The current PAD list is posted on the GCHP website Medical Drug Benefit for Providers page. The updated PAD list with the changes below and the clinical guidelines is scheduled to be posted on the GCHP website by May 1, 2025.

Changes to the GCHP PAD list effective, May 1, 2025:

HCPCS	Generic Name	Brand Name	Changes
J9354	Ado-trastuzumab	Kadcyla	Added.
J9312	Rituximab	Rituxan	Added. *Note: PA not required for Non-Hodgkin Lymphoma (NHL) and Chronic Lymphocytic Leukemia (CLL) uses.*
Q5115	Rituximab - abbs	Truxima	Added. *Note: PA not required for NHL and CLL uses.*
Q5123	Rituximab – arrx	Riabni	Added. *Note: PA not required for NHL and CLL uses.*
Q5119	Rituximab – pvvr	Ruxience	Added. *Note: PA not required for NHL and CLL uses.*
J9311	Rituximab – hyaluronidase	Rituxan Hycela	Added.
J1554	Immune Globulin	Asceniv	Added.
J1599	Immune Globulin	Alyglo	Added.
J1551	Immune Globulin	Cutaquig	Added.

HCPCS	Generic Name	Brand Name	Changes
J1555	Immune Globulin	Cuvitru	Added.
J1575	Immune Globulin	Hyqvia	Added.
J1576	Immune Globulin	Panzyga	Added.
J1558	Immune Globulin	Xembify	Added.

Added – The medication is added to the PAD list and PA is needed.

If you have any questions, please contact GCHP's Pharmacy Services Department at Pharmacy@goldchp.org.

GCHP website and Pharmacy Newsletter

GCHP provides Medi-Cal Rx updates in the Provider Pharmacy Services section of the 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 edition of our newsletter.

SECTION 3:

2025 Managed Care Accountability Set (MCAS) / Healthcare Effectiveness Data and Information Set (HEDIS®) Medical Record Collection Kick Off

The annual project to collect medical records for the 2024 Managed Care Accountability Set (MCAS) and Healthcare Effectiveness Data and Information Set (HEDIS®) measures will begin in February 2025. Gold Coast Health Plan (GCHP) has partnered with Virtix Health, in partnership with Inovalon, to handle the HEDIS® medical record data abstraction.

The MCAS / HEDIS® medical record data abstraction process will occur from February to early May 2025. Virtix Health may reach out to your provider office via mail or fax during this period to request chart components as part of the quality measures.

GCHP appreciates your cooperation with Virtix Health during this process.

If you have questions or concerns, please contact the Quality Improvement Department at: QualityImprovement@goldchp.org.

SECTION 4:

Measuring Asthma Medication Management with the Asthma Medication Ratio (AMR) Healthcare Effectiveness Data and Information Set (HEDIS®) Measure

Prevalence of Asthma in the U.S.

In 2023, the Centers for Disease Control and Prevention (CDC) reported that more than 26 million people in the United States have asthma, with the annual health care costs associated with asthma care exceeding $50 billion. Asthma is a chronic respiratory disease than can cause difficulty breathing, chest pain, coughing, and wheezing. However, asthma can be controlled with medication treatment and managing environmental triggers. The table below shows the national prevalence of asthma by age, gender, and race / ethnicity.

Abbreviation: NH=non-Hispanic
[1]Age defined as children (aged <18 years) and adults (aged 18+ years)
[2]Sex is defined as persons who answered "male" or "female" to the question "Are you male or female?"
[3]Sex and race/ethnicity include all ages
Source: National Health Interview Survey, National Center for Health Statistics, Centers for Disease Control and Prevention

Asthma Medication Ratio (AMR) Rates

An asthma medication management Healthcare Effectiveness Data and Information Set (HEDIS®) measure that Gold Coast Health Plan (GCHP) reports is Asthma Medication Ratio (AMR). It measures the percentage of members 5 to 64 years of age who had a diagnosis of persistent asthma or had four asthma medication dispensing events, during the measurement year and the year prior, and had a ratio of controller medications to total asthma medications of 50% or greater. The AMR measure assesses if asthma was appropriately managed with asthma controller medications. If a member's AMR ratio is less than 50%, it may indicate the member is using too much asthma rescue medication and their asthma is not controlled. For more information on the AMR measure, access the GCHP tip sheet here.

The table below shows that between 2019 and 2023, GCHP's AMR rates trended below the 25th National Medicaid percentile. The preliminary measurement year (MY) 2024 AMR rates show the rate has increased by 15.47% points. In 2024, GCHP launched various member and provider outreach and education campaigns to increase awareness and engagement in asthma medication management. Some of these initiatives included member outreach programs to educate and support care coordination, and a provider Asthma Lunch and Learn to share best practice guidelines. GHCP's goal is to continue to improve the AMR measure in 2025 to achieve, at a minimum, the 50th National Medicaid percentile.

Measurement Year	2019	2020	2021	2022	2023	2024*
AMR Rate	50.09	48.52	51.22	52.41	46.80	62.27
National Medicaid Percentile Rank	< 25th	< 25th	< 25th	< 25th	< 25th	25th

*Preliminary MY 2024 rate. The final MY 2024 rate will be reported in June 2025.

What can providers do to improve asthma medication management and adherence to controller medications?

- Follow the recommended clinical practice guidelines per the 2024 Global Initiative for Asthma (GINA) updates:
  » Prescribe **ICS-formoterol (i.e., Symbicort) as a reliever** instead of short-acting beta-agonist (SABA).
  » **Low-dose ICS-formoterol is the PREFERRED reliever** because it reduces the risk of severe exacerbations compared with treatment options in which reliever is SABA.
    › ICS-formoterol should not be used as a reliever by patients who are taking a different maintenance ICS-LABA.
    › For as-needed use, one inhalation of ICS-formoterol for symptom relief or before exercise or allergen exposure instead of SABA reliever.
  » May use extra inhalations when symptoms persist or recur but recommend seeking medical care if need more than the following **total inhalations in a single day** (as needed plus maintenance).

Total Maximum Daily Inhalations (as needed plus maintenance)		
Budesonide-formoterol (Symbicort)	Adults and adolescents 12 years of age and older.	Children 6 to 11 years of age.
	Twelve inhalations per day.	Eight inhalations per day.

- Familiarize yourself and your team with asthma controller and reliever medication clinical guidelines. Below are the National Institute of Health's (NIH) recommended clinical practice guidelines for providing quality asthma care:
  » Initial Visit
    › Diagnose asthma.
    › Assess asthma severity.
    › Initiate medication and demonstrate use.
    › Develop a written asthma action plan.
    › Schedule follow-up appointment.
  » Follow-up Visits
    › Assess and monitor asthma control.
    › Review medication technique and adherence.
    › Maintain, step-up, or step-down medication.
    › Review and revise the asthma action plan as needed.
    › Scheduled next follow-up visit.
- Educate your patients on taking asthma medication as prescribed and the use of their rescue inhalers vs. their controller medications.
  » Advise them that rescue inhalers should be used in emergency situations, while controller medications should be used daily or as you prescribe them. Your patients may not know that they will often not feel the effects of their asthma controller medication, but use of their controller medication can prevent most asthma emergencies.
- Evaluate barriers to medication adherence:
  » Cultural or personal beliefs that taking controller medications is not needed, does not work or is not safe.
  » Monitor developmental transitions into adolescents and young adulthood when adherence to medication adherence may decline.

- Educate your patients to recognize and avoid asthma triggers like mold and smoke and reduce allergens in the home.
- Ensure that you are following asthma medication prescribing best practices (e.g., 1:1 prescriptions of controller to rescue medications).
- Include members of all health care disciplines (e.g., physicians, pharmacists, nurses, respiratory therapists, and asthma educators) in providing and reinforcing education at all points-of-care.
- Document and code diagnoses and services performed and submit all claims / encounter data timely.

Health Education Resources for Provider and Members

GCHP offers free health education services, material, classes, and online resources to help members achieve a healthy lifestyle. Providers can contact the Health Education Department or refer patients.

- Providers, call: 1-805-437-5961
- Members, call: 1-888-301-1228 / TTY 711
- GCHP Health Education Resources (provided in English and Spanish)
- GCHP Health Library with content including videos and interactive tools

If you have any questions on the AMR measure or would like assistance with improving your clinic's AMR rates, please contact the GCHP Quality Improvement Department at QualityImprovement@goldchp.org.

SECTION 5:

Provider Resources: Managed Care Accountability Set (MCAS) Tip Sheets, FAQs and Reference Guide

Gold Coast Health Plan's (GCHP) Quality Improvement (QI) Department has developed tip sheets, a quick reference guide, and frequently asked questions (FAQs) for the state Department of Health Care Services (DHCS) Managed Care Accountability Set (MCAS) measures. These materials aim to help providers understand measure specifications to ensure peak measure performance outcomes.

Each tip sheet includes the measure description, applicable billing codes, exclusions, and the data collection method. In addition, it lists best practices clinics may implement into their practice workflows. The MCAS Quick Reference Guide provides a condensed version of the measures and their specifications. The Frequently Asked Questions (FAQs) document is available for any additional questions.

These resources can be found on the GCHP website under the Quality Improvement page.

For any questions regarding the MCAS performance measures, please email the Quality Improvement Department at QualityImprovement@goldchp.org.

SECTION 6:

Riding the Wave of Quality Awards Ceremony

To begin the new year with a continued focus on quality and celebrate measurement year (MY) 2023 achievements, Gold Coast Health Plan (GCHP) intended to host its inaugural Quality Convocation event on Jan. 8, 2025. However, to ensure the safety of attendees and GCHP staff, the Quality Convocation was cancelled due to the catastrophic fires in LA County and wind events impacting Ventura County. The intent of the Quality Convocation was to convene network provider quality improvement stakeholders and GCHP's Quality Improvement staff and leaders to celebrate the significant collaborative efforts that demonstrated impressive results on improving member health outcomes and ensuring a high-quality member experience.

To recognize clinics, health systems, and individual contributors for their outstanding achievement in quality, the Riding the Wave of Quality Awards Ceremony planned for the Quality Convocation was instead held during the Jan. 27, 2025, Commission Meeting. Award recipients include:

- Best in Show – Greatest Overall MCAS Achievement by Health System
    - » Clinicas Del Camino Real
- Quality Champion
    - » Gadiel Chavez, Quality Coordinator
- Ventura County Healthcare Agency
- Most Improved – Greatest Overall MCAS Improvement by Health System
    - » Clinicas Del Camino Real
- Most Improved Health System in Any One Measure
    - » Community Memorial Health for well-baby (W30-6+)
- Most Collaborative (for partnership on quality initiatives)
    - » Ventura County Healthcare Agency
- Highest Performing Individual Clinics
    - » Well-Baby – Ventura County Healthcare Agency: Las Islas Family Medical Group
    - » Well-Child – Buena Medical Clinic
    - » Cancer Prevention – Rose Avenue Family Medical Group
    - » Reproductive Health – Clinicas Del Camino Real: Meta Health Center (Oxnard)
    - » Chronic Conditions – Ventura County Healthcare Agency: Fillmore Family Medical Group

Robert Streeter, MD, Community Memorial Health

From left: Gadiel Chavez, Quality Coordinator, Ventura County Healthcare Agency; Michelle Meissner, Director Quality & Population Health, Ventura County Healthcare Agency; Rachel Stern, MD, Chief Medical Quality Officer Ambulatory Care, Ventura County Healthcare Agency; Rene Rangel, PA-C, Quality Improvement Director, Clinicas Del Camino Real; Robert Streeter, MD, Community Memorial Health

From left: Michelle Meissner, Director Quality & Population Health, Ventura County Healthcare Agency; Gadiel Chavez, Quality Coordinator, Ventura County Healthcare Agency; Rachel Stern, MD, Chief Medical Quality Officer Ambulatory Care, Ventura County Healthcare Agency

Rene Rangel, PA-C, Quality Improvement Director, Clinicas Del Camino Real

GCHP plans to hold the Quality Convocation annually, which will include the Riding the Wave of Quality Awards Ceremony. Congratulations to all awardees and thank you to our providers for your ongoing commitment to ensuring members receive high-quality health care!

SECTION 7:

2025 Member Rewards

Gold Coast Health Plan (GCHP) will continue to offer the member rewards program in 2025. Investing in our members is a key priority for GCHP and supports our mission to improve the health of our members through the provision of high-quality care and services. Members that complete their recommended health screenings and preventive care exams will continue to be rewarded throughout 2025.

GCHP is happy to announce that we will be continuing the incentive programs from 2024 into this year, as detailed below.

Program	Requirements	Gift Card Value
Lead Screening	Members 0 to 2 years of age who complete a blood lead test on or before their second birthday in 2025.	$25
Child and Adolescent Well-Care Visits	Members 3 to 21 years of age who complete a well-care visit with a primary care physician in 2025.	$25
Human Papillomavirus (HPV) Vaccine – 2nd Dose	Members 9 to 13 years of age who complete their second dose of the HPV vaccine series in 2025.	$25
Cervical Cancer Screening	Female members 21 to 64 years of age who complete a cervical cancer screening (pap test) in 2025.	$50
Breast Cancer Screening	Female members 40 to 74 years of age who complete a breast cancer screening (mammogram) in 2025.	$50

Point of Care (POC) Program

Some of the above listed incentives are offered at point of care (POC), where a member can receive their gift card at the time service or screening is rendered. We are proud to note that the POC program has been expanded to 50 clinics / facilities throughout Ventura County. It has been highly successful in rewarding members as soon as they complete their important health care screening and has demonstrated a decrease in no-show rates.

Member Incentive Form

GCHP is excited to announce a new look to our member incentive form. The form offers the same great programs, but the individual program forms have been consolidated into one all-inclusive form.

A member incentive form will be mailed to members who are eligible for any of the listed incentives beginning in March 2025.

Forms and other resources are also available online on GCHP's Members Rewards Program webpage.

Members, clinic staff, and community organizations can download this form for their use. It has been helpful for clinic staff to print, fax or email the form to GCHP on

Get a Free Gift Card!

Gold Coast Health Plan (GCHP) values your health. Completing your routine preventative health screenings and recommended vaccines can help you stay healthy.

Lead Screening
Members 0-2 years of age who complete a blood lead test on or before their 2nd birthday.
$25 Gift Card
☐ Completed   Provider Signature: _____
Date of Screening: _____

Child and Adolescent Well-Care Visit
Members 3-21 years of age who complete their annual well-care visit.
$25 Gift Card
☐ Completed   Provider Signature: _____
Date of Exam: _____

Human Papilloma Virus (HPV)
Members 9-13 years of age who complete their 2nd dose of the HPV vaccine on or before their 13th birthday.
$25 Gift Card
☐ Completed   Provider Signature: _____
Date of Vaccine: _____

Cervical Cancer Screening
Members 21-64 years of age who complete a cervical cancer screening pap-test.
$50 Gift Card
☐ Completed   Provider Signature: _____
Date of Screening: _____

Breast Cancer Screening
Members 40-74 years of age who complete a mammogram.
$50 Gift Card
☐ Completed   Location of Mammogram: _____
Date of Mammogram: _____

How to earn your gift card:
■ Be a GCHP member with full scope Medi-Cal benefits.
■ Complete your health screening, exam or vaccine between Jan. 1, 2025 and Dec. 31, 2025.
■ Mark your completed screening(s) and return the filled out form to GCHP.
■ Send the form to GCHP by Jan. 31, 2026:
   Mail: Gold Coast Health Plan
            Attn: Quality Improvement
            P.O. Box 9153, Oxnard, CA 93031-9826
   Fax: Ask your doctor or their staff to fax this form on your behalf to 1-805-248-7616.
   Email: QualityImprovement@goldchp.org
■ Limit one card per member per qualifying program per year. It may take up to 6-8 weeks after GCHP receives your completed form for you to get your gift card in the mail.

Fill out one form per member:
Member Name: _____
Medi-Cal / GCHP ID Number: _____
Date of Birth: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone Number: _____

Preferred gift card (circle one):
TARGET   Walmart   amazon

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If you have any questions, call GCHP at **1-888-301-1228**, Monday through Friday, 8 a.m. to 5 p.m. (except holidays). If you use a TTY, call **711**. **www.goldcoasthealthplan.org**

behalf of the member as some members may not have access to a printer. GCHP can also provide print versions of the form to clinic staff, upon request.

We would like to extend our gratitude for your support and collaboration with the member incentive program. The program has seen unprecedented success due to your participation and commitment to providing high-quality care to our members!

For questions about the member incentive program, please email the Quality Improvement Department at QualityImprovement@goldchp.org.

SECTION 8:

Potential Quality Issues

A potential quality issue (PQI) is a suspected deviation from expected provider performance, clinical care, or outcome of care, which requires further investigation to determine whether an actual quality issue or opportunity for improvement exists. Identification and investigation of a PQI is a critical process in monitoring and improving patient safety and clinical quality of care. Every provider, facility, and health plan is responsible for ensuring the safety and coordination of care provided to members and patients.

When a PQI is identified, a Quality Improvement (QI) RN conducts an initial review and investigation of the case. If a PQI is identified, the case is then referred for review by a Gold Coast Health Plan (GCHP) medical director. As part of the investigation, relevant medical records and a provider response are requested to allow the provider to give their perspective regarding the PQI, which ensures an unbiased, transparent investigation occurs. The GCHP medical director issues a final determination based on the information provided. Occasionally, the GCHP medical director may request a review consultation by a certified, specialty physician to assist in making a final decision. Based on the type and/or complexity of the clinical issue, the GCHP medical director may refer the case to the GCHP Peer Review Committee (PRC) for a final determination. The PRC is comprised of actively practicing, Ventura County network providers representing multiple medical specialties.

Examples of PQI cases that may impact member / patient quality of care include:

- Delayed access to care.
- Lack of or delays by the treating provider in referring the member to a specialty provider.
- Clinical care that does not meet evidence-based standard of care.
- Unprofessional behavior by the provider or provider staff.
- Compromised member safety.
- Language assistance issues.
- Lack of clinical diagnosis.
- Lack of coordination of care.
- Transportation delays or safety concerns.

The PQI referral form is available on the PQI page of the GCHP website.

A PQI is reported to the QI Department by sending a completed PQI Referral Form, to PQIReporting@goldchp.org.

What to expect
When a potential quality issue is referred to the QI Team, GCHP may request medical records and a provider response. Providers have **20 calendar days** to respond to requests. Follow-up documentation, such as policy and procedures, proof of education training, or similar evidence of actions taken may be required. The QI RN assigned to the PQI case will provide communication and guidance throughout the process.

SECTION 9:

Medi-Cal for Kids & Teens Training

Effective Jan. 1, 2024, the state Department of Health Care Services (DHCS) requires all providers who offer services to members under 21 years of age to complete Medi-Cal for Kids & Teens training every two years.

Children, teens and young adults under 21 years of age enrolled in Medi-Cal qualify for a wide range of free services, including checkups, vaccinations, health screenings, and treatments for physical, mental, and dental health issues.

DHCS has created a standardized training to help providers understand:

- How to deliver appropriate care for members under 21 years of age.
- How to help children and families access necessary medical care.
- How to bill for covered services.

Provider expectations:

- Complete the Medi-Cal for Kids & Teens training today and every two years thereafter.
- Submit individual or multi-provider training attestations to Gold Coast Health Plan (GCHP).
- Comply with Medi-Cal contract requirements related to Medi-Cal for Kids & Teens.
- Coordinate services with other members of a patient's care team.

To access the DHCS training and GCHP's attestation form, please visit our Medi-Cal for Kids & Teens webpage.

GCHP's Provider Relations Team will reach out to ensure that you have access to the training and are in compliance with the deadlines.

For any questions about the Medi-Cal for Kids & Teens training, please email ProviderRelations@goldchp.org.

For more information, you can also view the following DHCS resources:

- DHCS Policy Letter APL23-005
- DHCS Medi-Cal for Kids & Teens Provider Information

SECTION 10:

Timely Access Standards and Methods to Improve Member Access and Availability

The state Department of Health Care Services (DHCS) requires access and availability standards for Medi-Cal providers. Gold Coast Health Plan (GCHP) is proudly charged with maintaining quality care for our members, which includes monitoring access and availability within the network and ensuring that contracted providers comply with access standards.

Please review the table below as a reminder for your practice's scheduling staff and ensure the standards are being incorporated in your clinic workflow. Make note of the in-office wait times for scheduled appointments.

Type of Care	Wait Time
Emergency Services	Immediately.
Urgent Care	Within 48 hours for services that do not require prior authorization. Within 96 hours for services that do require prior authorization.
Non-Urgent Primary Care Appointment	Within 10 business days of request for appointment.
Non-Urgent Behavioral Health Appointment	Within 10 business days of request for appointment.
Non-Urgent Specialty Care Appointment	Within 15 business days of request for appointment.
Phone Wait Time	Within three to five minutes, whenever possible.
Ancillary Services for Diagnosis or Treatment	Within 15 business days of request for appointment.
Initial Health Appointment (IHA)	Within 120 calendar days from enrollment.
Waiting Time in Office	Not to exceed 45 minutes after the time of appointment.
Sensitive Services	Ensure confidentiality and ready access to sensitive services in a timely manner and without barriers – NO AUTHORIZATION REQUIRED.
Long Term Care (LTC) Availability	Within seven business days of request.

The following methods can be used to improve member access and availability:

- Have appointment availability with other contracted, in-area, providers within the same office or different location.
- Have appointment availability with other contracted, in-area, mid-level practitioners, such as a physician assistant or nurse practitioner, within the same office or different location.
- Have weekend appointment availability.
- Have telehealth appointment availability.
- Have cancelled appointment availability.

GCHP's Provider Relations Team is available to assist you with any questions or concerns you may have by email at ProviderRelations@goldchp.org.

SECTION 11:

Behavioral Health

Assembly Bill (AB) 665 - Minor Consent to Outpatient Mental Health Treatment or Counseling

Assembly Bill (AB) 665 allows minors 12 to 17 years of age to consent to outpatient mental health treatment or counseling. As of July 1, 2024, minors can consent to Medi-Cal outpatient mental health treatment or counseling without a parent or guardian's consent only if:

1. The minor presented a danger of serious physical or mental harm to self or others without mental health treatment or counseling.
2. The provider gave their opinion that the minor was mature enough to participate in the outpatient services.

Provider Requirements – Determining When Parents or Guardians Can Be Involved with Treatment

Parents or guardians of a minor seeking mental health treatment or counseling are required by state law to be involved with treatment, unless the provider determines that it would be inappropriate. How to determine appropriateness of a parent or guardian involvement with a minor's treatment:

1. Whether and when the provider attempted to contact the minor's parent or guardian and if that attempt was successful.
2. The provider stating their reason why it would be inappropriate to contact the minor's parent or guardian.

Providers must establish a few safeguards to ensure parents or guardians are not receiving:

1. Appointment notifications.
2. Notice of Adverse Benefit Determination documents.
3. Any other communication that would violate the minor's confidentiality.

Minors must consent with the provider, prior to disclosing information relating to minor consent services to the parent or guardian.

If you have any questions, please contact ProviderRelations@goldchp.org.

SECTION 12:

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 at no cost to members with Limited English Proficient (LEP) and whose primary language is not English. LEP members include those who have a limited ability to read, speak, write, or understand English.

GCHP's Cultural and Linguistic Services Program strives to deliver culturally and linguistically appropriate health care services to our diverse membership by ensuring that all GCHP members, regardless of race, color, religion, ancestry, national origin, ethnic group identification, age, mental or physical disability, medical conditions, genetic information, marital status, gender identify, sexual orientation or language ability, have equal access to quality health care and services in the member's preferred language of choice or alternative format.

To request 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, submit a completed request form to CulturalLinguistics@goldchp.org at least five to seven days prior to the members' appointment.

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 here.

Accessing a Telephone Interpreter

Telephone interpreting services are available to GCHP network providers 24/7. If you are a medical health care provider, or behavioral health provider and need to access telephone interpreting services, it is important to use the correct access code when accessing a telephone interpreter.

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: **843014**
3. Indicate: Language needed
4. Provide: Caller's name, agency, member's zip code, and the 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: **80086648**
3. Indicate: Language needed
4. Provide: Caller's name, agency, member's zip code, and the member's GCHP ID number
5. Document the interpreter's name and ID number for reference

GCHP recognizes the importance of clear communication with your patients, and we are committed to assisting with language assistance services to ensure members are receiving qualified interpreting and translation services. Members are **NOT** required to bring an interpreter or use a friend or family member – including minors – to interpret during their medical and behavioral appointments. It is the responsibility of the provider – not the member – to request interpreting services. Providers shall document electronically or manually in the member's medical chart if the member declines the use of an interpreter at the time of the visit.

Working with Limited English Proficient (LEP), Deaf and/or Hard of Hearing Members

As a reminder, it is important to know how to identify, offer and access language assistance services when working with LEP, deaf, and/or hard of hearing members.

GCHP offers valuable language identification and awareness tools informing members of the availability of language services to indicate their preferred language during health care encounters. We recommend keeping these resources in visible areas for staff to show members when they need help identifying their preferred language or communication method.

1. **Language ID Guide:**
   The Language ID Guide contains the following statement in 99 languages: "Point to your language. An interpreter will be called. The interpreter is provided at no cost to you."

2. **Language ID Poster and Desktop Display:**
Poster and self-standing display containing the statement: "Point to your language. An interpreter will be called. The interpreter is provided at no cost to you." in 24 languages. This is also known as the "I Speak Card."

Nondiscrimination Notices and Language Assistance Taglines

It is important that providers know how to identify, offer, and access language services when working with LEP members.

GCHP encourages providers and staff to inform LEP members of the availability of free language services by posting the Language Available Poster in clinics, urgent care centers, waiting rooms and places where members can easily point to, and providing the language identification guide to LEP members. If you are unable to identify the member's preferred language, have the member point to their preferred language.

The posting of the nondiscrimination notice must be visible to members in at least 12-point font and must be accompanied by the full set of language taglines in 18 non-English languages as required by the state Department of Health Care Services (DHCS).

- To access the Nondiscrimination Notice and Language Taglines, visit the GCHP website.
- To access the *All Plan Letter (APL) 21-004 (Revised) Standards for Determining Threshold Languages, Nondiscrimination requirements, and Language Assistance Services*, click here.

Bilingual Fluency Assessments

GCHP's subcontractors, downstream subcontractors, and network providers shall ensure that their staff working in an area that requires bilingual fluency are competent in Spanish. Bilingual staff working in positions requiring bilingual fluency skills should be assessed in a standard process and providers shall maintain records of bilingual assessments. Policies shall include the frequency of staff being assessed or reassessed for bilingual fluency.

Diversity, Equity, and Inclusion (DEI) Training

GCHP's subcontractors, downstream subcontractors, network providers and staff shall ensure that cultural competency, sensitivity, health equity, and diversity trainings are provided for employees and staff at key points of contact with members in accordance with Exhibit A, Attachment III, Subsection 5.2.11.c (Cultural and Linguistic Programs and Committees). In addition, subcontractor and downstream subcontractors must ensure that cultural competency, sensitivity, health equity, and diversity training is provided for subcontractor's and downstream subcontractor's staff at key points of contact with members.

GCHP created four online training modules to help you work with vulnerable populations and increase your awareness of the diverse health care needs of our membership. To access the Cultural Competency Training, visit the GCHP website.

Upon completion of the training, return a completed Cultural Competency Training Acknowledgement Form to GCHP's Cultural and Linguistic Services. If a training was provider by another organization or entity, providers shall attest to having received and confirm that a training was completed.

To request these materials or language assistance services, please contact GCHP's Cultural and Linguistic Services Department 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.

Coming Soon: Diversity, Equity, and Inclusion (DEI) and Transgender, Gender Diverse or Intersex (TGI) Cultural Competency Training Programs

GCHP will be launching a new Diversity, Equity, and Inclusion (DEI) and Transgender, Gender Diverse or Intersex (TGI) training program that encompasses sensitivity, diversity, cultural competency a cultural humility, and health equity trainings, for all GCHP staff and network providers, regardless of their cultural or professional training and background.

To learn more about the training program requirements set by DHCS, view *All Plan Letter (APL) 24-016; APL 24-017*.

Stay tuned for more information.

SECTION 13:

Health Education

Gold Coast Health Plan (GCHP) offers free health education services to help members achieve a healthy lifestyle. Health education services are designed to ensure that all members have access to health education programs, health promotion materials and classes. You can access our member resources by visiting the GCHP Health Education webpage. Members can access resources including health education materials and flyers in English and Spanish.

Pregnancy and Postpartum Packets

GCHP's Health Education (HE) Department has many resources for expecting mothers and new parents, including pregnancy and postpartum packets. These packets include the state Department of Health Care Services (DHCS) Newborn Referral Form, information on nutrition, immunizations, and many other resources.

GCHP also offers:

- Resources for members.
- Pregnancy and new parent e-newsletters.
- Health library.

2025 Immunization Recommendations

The Centers for Disease Control and Prevention (CDC) recommends routine vaccination to prevent vaccine-preventable diseases that occur in infants, children, adolescents, or adults. Providers are encouraged to help members keep up with their immunizations. Through GCHP, providers can find resources for immunizations.

CDC Resources:

- Recommended Child and Adolescent Immunization Schedule (18 years or younger)
- Recommended Adult Immunization Schedule (19 years or older)

California Department of Public Health (CDPH) Resources:

- "How to Increase Flu Vaccination Coverage in Your Clinic" is a free on-demand webinar that highlights the importance of protecting patients against influenza, the efforts of the Vaccines for Children Program to improve vaccination uptakes, and strategies for increasing overall immunization coverage.
- "Afternoon TEAch with CDPH" is a webinar series that covers a variety of immunization topics.

Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger — UNITED STATES 2025

(CDC Recommended Child and Adolescent Immunization Schedule chart, U.S. Centers for Disease Control and Prevention, 11/21/2024)

Table 1 — Recommended Child and Adolescent Immunization Schedule for Ages 18 Years or Younger, United States, 2025

These recommendations must be read with the notes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars. To determine minimum intervals between doses, see the catch-up schedule (Table 2).

(CDC Table 1 immunization schedule grid, Page 2)

February: American Heart Month

GCHP offers health education materials for members to assist in controlling high blood pressure and making heart-friendly choices. Topics include information on blood pressure, heart disease, healthy eating, exercise, weight loss, and health education classes for members.

Free Workshop for Gold Coast Health Plan Members
Chronic Disease Self-Management Program

Gold Coast Health Plan (GCHP) offers free Chronic Disease Self-Management Program (CDSMP) workshops to members over the age of 18 with a chronic health condition. A chronic health condition is one that lasts for a long time, such as arthritis, diabetes, heart disease, depression, obesity, pain and more. The workshop can teach you how to control and manage your symptoms.

Workshops will be held once a week for six weeks. Members can choose between a virtual or telephonic workshop. The virtual workshop is 2.5 hours each week, and the telephonic workshop is 30 minutes each week.

In the workshop, you will learn about:
- Making a weekly action plan
- Healthy eating
- Physical activity and exercise
- Medication usage

Participants will get:
- "Living a Healthy Life with Chronic Conditions" book
- Class handouts
- Relaxation CD
- Refillable water bottle
- Backpack
- Lunch bag

Sign up now for CDSMP workshops to gain the self-confidence to take charge of your health.

Call the Health Education Department at **1-805-437-5718**, Monday through Friday, 8 a.m. to 5 p.m. (except holidays). If you use a TTY, call **711**. You can also email **HealthEducation@goldchp.org**. For more information, visit the GCHP website, **www.goldcoasthealthplan.org**.

My Blood Pressure Check Up

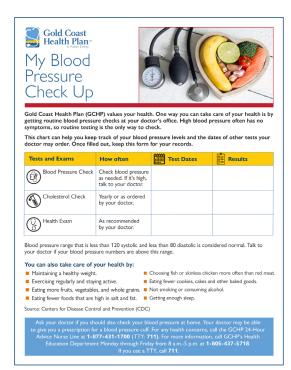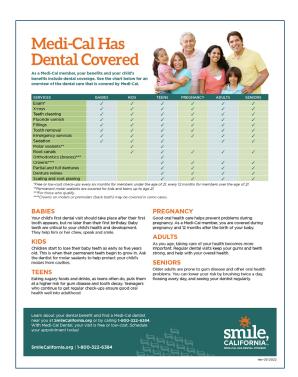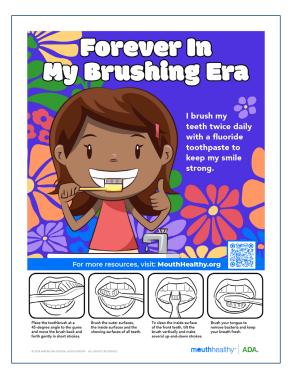Gold Coast Health Plan (GCHP) values your health. One way you can take care of your health is by getting routine blood pressure checks at your doctor's office. High blood pressure often has no symptoms, so routine testing is the only way to check.

This chart can help you keep track of your blood pressure levels and the dates of other tests your doctor may order. Once filled out, keep this form for your records.

Tests and Exams	How often	Test Dates	Results
Blood Pressure Check	Check blood pressure as needed. If it's high, talk to your doctor.		
Cholesterol Check	Yearly or as ordered by your doctor.		
Health Exam	As recommended by your doctor.		

Blood pressure range that is less than 120 systolic and less than 80 diastolic is considered normal. Talk to your doctor if your blood pressure numbers are above this range.

You can also take care of your health by:
- Maintaining a healthy weight.
- Exercising regularly and staying active.
- Eating more fruits, vegetables, and whole grains.
- Eating fewer foods that are high in salt and fat.
- Choosing fish or skinless chicken more often than red meat.
- Eating fewer cookies, cakes and other baked goods.
- Not smoking or consuming alcohol.
- Getting enough sleep.

Source: Centers for Disease Control and Prevention (CDC)

Ask your doctor if you should also check your blood pressure at home. Your doctor may be able to give you a prescription for a blood pressure cuff. For any health concerns, call the GCHP 24-Hour Advice Nurse Line at **1-877-431-1700** (TTY: **711**). For more information, call GCHP's Health Education Department Monday through Friday from 8 a.m.-5 p.m. at **1-805-437-5718**. If you use a TTY, call **711**.

February: National Children's Dental Health Month

This year's message for National Children's Dental Health Month (NCDHM) is "Forever in My Brushing Era." GCHP encourages all our providers to promote good oral health habits to our members. You can find tools in both English and Spanish to help you promote this year's campaign and general dental needs at:

- American Dental Association: NCDHM
- Medi-Cal Dental:
  - » Smile California (English) or Sonríe California (Spanish)
  - » Dental Coverage Flyer (English and Spanish)

For additional information or to request health education services, contact GCHP's Health Education Department at 1-805-437-5718, Monday through Friday, from 8 a.m. to 5 p.m. (except holidays), or email HealthEducation@goldchp.org. To refer members, please complete the Health Education Referral Form and submit it via email to the Health Education Team.

Provider Operations Bulletin

FEBRUARY 2025

For additional information, contact Customer Service at 1-888-301-1228.
Gold Coast Health Plan
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