



**Gold Coast  
Health Plan**<sup>SM</sup>  
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# Specialty Care Provider Joint Operations Meeting

March 21, 2024

**Provider Network Operations**

**Integrity**

**Accountability**

**Collaboration**

**Trust**

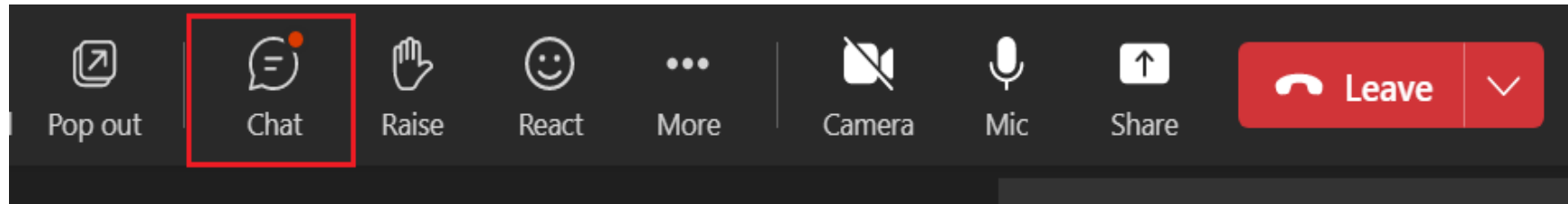
**Respect**

# Agenda

- Housekeeping Items
- Provider Network Operations
- Executive Team
- Provider Relations Team
- Provider Relations Resources
- GCHP Announcements
- Specialty Care Physician Roles & Responsibilities
- Requests For Authorization
- Health Education, Cultural & Linguistic Services Update
- CalAIM : Enhanced Care Management
- Provider Contact Information & GCHP Points of Contact
- Questions

# Housekeeping Items

- ❖ Remain on Mute
- ❖ Add Questions to the Chat



- ❖ A copy of this presentation and FAQs will be available on GCHP website next week

# Provider Network Operations

- GCHP Provider Network Operations Department is committed to building strong and lasting relationships with our providers and their staff. PNO acts as the central touchpoint between providers and GCHP for provider recruitment, education, contracting, reporting and maintenance of provider network adequacy.

The following teams make up the PNO organization:

- Provider Relations
- Provider Contracting
- Provider Regulatory
- Provider Analytics





# Provider Network Operations Executive Leadership



Erik Cho, Chief Policy and Program Officer

Michelle Espinoza, Executive Director, Delivery System  
Operations & Strategies

Vicki Wrihster, Senior Director of Provider Network  
Operations

# Provider Relations Team

Provider Relations (PR) team works together with our contracted providers to support and enhance the quality of care and services that our members receive. The PR team investigates provider issues and provide recommendations and solutions during provider site visits and via email communication.

Provider Relations Team members are:

Sonya Ibarra, Manager of Provider Relations

Monica Hernandez, Provider Relations Lead

Veronica Esparza, Provider Relations Lead



## **Provider Relations Representatives**

Maria Najjar

Nancy Vasquez

Alex Gomez

Shyleen Sandoval

Raymond Reyes

# Provider Relations Resources

## Provider Updates & Bulletins

GCHP will share urgent and vital news to keep our providers informed about upcoming trainings, Medi-Cal updates, campaigns, resources and more. All memos and provider bulletins are archived on our GCHP website at [www.GoldCoastHealthPlan.org](http://www.GoldCoastHealthPlan.org) > For Providers > Provider Updates.

If you are not already receiving our publications by email, please send your name and email address to Provider Relations at [ProviderRelations@goldchp.org](mailto:ProviderRelations@goldchp.org) to be added to our provider communication distribution list.

## Routine Site Visits

You will routinely see our designated team of External PR representatives stop by your office to serve as a GCHP resource. We will communicate important information and provide your staff with support to ensure your needs are met, so that operations run smoothly. Discussions on member access and availability, notification of any office changes, and your overall experience with GCHP, are just some of the topics that we will address during our site visits.

If you have any general questions or would like to schedule a site visit or provider training, please email [ProviderRelations@golchp.org](mailto:ProviderRelations@golchp.org).



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# GCHP Announcements

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# 2024 Joint Operation Meetings (JOM)

Throughout 2024 GCHP Provider Relations Department will hold various Joint Operation Meetings (JOM) to provide education, training and communicate important information to our provider network. During our JOMs we are available to answer provider questions and or concerns.

For questions, concerns and/or to be included in upcoming JOMs, please email [ProviderRelations@goldchp.org](mailto:ProviderRelations@goldchp.org).



# Medi-Cal Targeted Provider Rate Increases

Pursuant to AB 118 (Chapter 42, Statutes of 2023), Medi-Cal is implementing ongoing targeted provider rate increases for primary care, obstetric and doula, and non-specialty mental health services effective for dates of service on or after January 1, 2024.

The targeted provider rate increases are subject to federal approval by CMS in State Plan Amendment (SPA) 23-0035.

Subject to CMS approval, DHCS will direct Medi-Cal Managed Care Plans (MCPs) to pay eligible Network Providers, as defined in All Plan Letter (APL) 19-001, no less than the CY 2024 TRI Fee Schedule rate for specified codes and provider types.

Additional information can be found in the DHCS website:

<https://www.dhcs.ca.gov/Pages/Medi-Cal-Targeted-Provider-Rate-Increases.aspx>

# GCHP Annual Provider Surveys

May to September 2024



**WE WANT TO HEAR  
FROM YOU!**

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GCHP will conduct its annual provider surveys starting in May. Your participation is appreciated.

- Provider Accessibility & Availability
- Provider Satisfaction





# Specialty Care Physician Roles & Responsibilities

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# Specialist (SPC) Responsibilities

SPC is responsible for establishing good system for tracking regularly scheduled appts, failed-scheduled appts and procedures needing completion prior to next scheduled visit.

SPC should ensure access to care 24/7. The SPC should have an adequate phone system to handle member call volume.

SPC may arrange referrals to other SPC for consultation without referring member back to PCP

## SPC Responsibilities

SPC are responsible for ensuring backup coverage during absence, including while SPC is handling an emergency call at the hospital.

SPC should consider severity of medical condition when rescheduling of appointments for unforeseen circumstances.

SPC should ensure that each member health record includes the info needed to facilitate both appointment scheduling and patient recall.



For a full listing of Specialist responsibilities, please refer to the current online Provider Manual, located at [www.GoldCoastHealthPlan.org](http://www.GoldCoastHealthPlan.org) > For Providers > Resources.

# New Provider Orientations

To remain in compliance with DCHS regulatory standards all new GCHP providers, including new practitioners being added to an existing group, are required to complete a new provider orientation within 30 days of their contract effective date.

A Welcome Letter is sent out within 10 business days from the provider's contract effective date to initiate the orientation / training process. The welcome letter provides the effective date that providers can begin to see GCHP members as well as helpful links to make your transition to our network as smooth as possible.

This training also provides information on important GCHP operational processes and procedures as well as programs and services available for our members.



Please email Provider Relations at [ProviderRelations@goldchp.org](mailto:ProviderRelations@goldchp.org) if you have any questions or to learn more about available orientation / training options.

# Ventura Transit System (VTS)



VTS business cards are available in English and Spanish and can be dropped off or mailed. Please email [Providerrelations@goldchp.org](mailto:Providerrelations@goldchp.org) to request additional information.



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# MEMBERS

Do you need a ride to your next medical appointment?

Call Ventura Transit System (VTS) at

**1-855-628-7433**

**1-800-855-7100** California Relay Service

This is a free benefit for Gold Coast Health Plan members.  
Call VTS at least 48 hours in advance of your request.

# Member Reassignment

A specialist can cease providing care for members when the provider/patient relationship becomes unsatisfactory. In these cases, the specialist must notify the PCP and the patient in writing that they will no longer provide care to the patient. The PCP will refer the member to another participating specialist for care and treatment if the specialty care is still medically necessary. The specialist must notify the member in writing that they will no longer provide care for the member and send a copy of the letter to the GCHP Provider Relations Department.

## Examples of cases include, but are not limited to:

- Significant safety concerns, such as threatening the life or wellbeing of personal or the rendering providers.
- Member drug seeking behavior, such as documented evidence of manipulative attempts to obtain substantially more medication than is warranted.

For additional information regarding the Member Reassignment process please refer to the Provider Manual.

[https://res.cloudinary.com/dpmykpsih/raw/upload/gold-coast-site-258/media/r/a9ce5dc1eac346e7982c6bde8e31db57/gchp-provider-manual\\_aug2023\\_v4p.pdf](https://res.cloudinary.com/dpmykpsih/raw/upload/gold-coast-site-258/media/r/a9ce5dc1eac346e7982c6bde8e31db57/gchp-provider-manual_aug2023_v4p.pdf)

Please email Provider Relations at [ProviderRelations@goldchp.org](mailto:ProviderRelations@goldchp.org) for questions regarding the member reassignment process.



# Grievances Response Requests – Time Sensitive

- Resolving member complaints in a timely manner is of utmost importance to Gold Coast Health Plan, to ensure that our members have a superior experience obtaining their medical care.
- When a member brings a complaint to your attention, you must investigate and try to resolve the complaint in a fair and equitable manner. In addition, providers must cooperate with us to identify, process and resolve all member complaints.
- When responding, it is imperative that your response is submitted on a provider's letterhead and not submitted on a blank word document nor in the body of an email. Responses received in the body of an email will not be accepted.
- Cooperation includes, but is not limited to, completing a provider response form, providing pertinent information in relation to the complaint, and/or speaking with GCHP Grievance & Appeals representatives (G&A) to help resolve the complaint in a reasonable manner. G&A Provider Response Forms must be returned within the timeframe specified on the form.



If you are assisting the member with their complaint, the forms are available in English and Spanish.  
Please provide contact information within your office who can address member complaints and or grievances.

# Access & Availability Standards

The state Department of Health Care Services (DHCS) requires access and availability standards for all Medical providers. Below is a list of some of the standards that DHCS requires GCHP providers to meet.

## Specialty Care Physicians:

- **Routine Specialty Care Appointments** -- Timeframes for access to routine specialty care should be dependent upon diagnosis and the urgency of the condition. However, appointments should be available within **15 business days** of a member's request for an appointment.
- **First Prenatal Visit** --The first prenatal visit must be scheduled within **two weeks** of a member's request.
- **Urgent Care Appointments** -- Medically indicated urgent appointments should be made the **same day or within 24 hours** of the member's call for an appointment. The request for services should be evaluated and the urgency assessed to determine what the medical problem is and the need for urgent treatment. Depending upon the nature of the medical problem, the member should be triaged to the most appropriate care site.

# Access & Availability Standards (cont.)

## **After-Hours Calls:**

When members call provider offices after hours, they should be advised by a recorded outgoing message that if the situation is a true medical emergency, the member should hang up and dial 911 or go to the nearest hospital. This advice should be recorded in at least English and Spanish and possibly other languages if the provider has a large amount of routinely cared for members who speak some other language.

## **Methods to help improve Access and Availability to members can include, but not limited to:**

- Appointment availability with other contracted, in-area providers within the same office or different location
- Appointment availability with a contracted, in-area mid-level practitioner within the same office or different location
- Weekend appointment availability when available
- Telehealth appointments
- Cancelled appointment availability

# Provider Corrective Action Plans

- Department of Health Care Services (DHCS) performs quarterly audits of GCHP's provider network for access and availability standards and reports any deficiencies found during the audit. Once the feedback is obtained, GCHP will issue a letter outlining the deficiencies to the provider along with a Corrective Action Plan (CAP) form.
- GCHP has contracted with an outside vendor to conduct annual surveys for provider satisfaction and access and availability audits. Based on the results for access and availability results, GCHP will also issue letters outlining deficiencies to providers with a CAP form.
- Providers will have 30 days to respond to the CAP letter with remediation steps to correct any deficiencies.







# Requests For Authorization

Leslee Whaley, RN Utilization Manager

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# Requests for Authorization

## Portal Submissions

Please include Requesting Provider, Servicing Provider/Facility, CPT codes, quantity and dates of service for all portal requests.

- For CPT codes, do not enter the same code on more than one line - increase the quantity to 2 if needed, for example need right and left
- Enter contact name/number and fax number in a claim note

## DME/Prosthetics/Orthotics, Home Health, etc.

GCHP recommends that the prescribing provider send the Rx with the ICD-10 dx code to the rendering vendor/provider. The rendering vendor/provider can submit the request for authorization to GCHP with the appropriate codes and quantities.

# Requests for Authorization

## Requests & Referrals

- Please use the following definition to determine when to submit a request or referral as expedited:  
A request that may involve an imminent and serious threat to the health of a member, including but not limited to, severe pain or potential loss of life, limb or major bodily function.
- When referring to an Out of Area Specialist, please be specific with which specialty, the reason member needs to see the specialist and if local care was explored.
- Remember to include pertinent clinical documentation with all requests.



# Health Education, Cultural & Linguistic Services Update

Carmen Moran, Senior Health  
Navigator/Educator

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# Health Education, Cultural and Linguistic Services (HECL) Overview

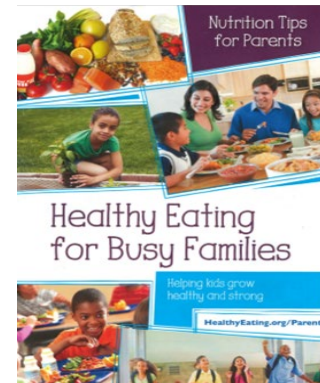
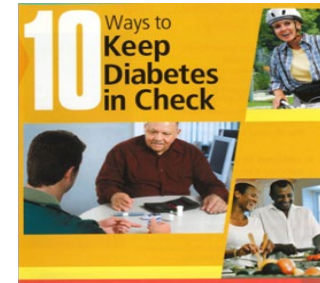
- ❑ Gold Coast Health Plan (GCHP) implements HECL requirements set by the Department of Health Care Services (DHCS) by:
  - Delivering culturally and linguistically appropriate health care services to our diverse membership.
  - Ensuring effective communication with members through language assistance services, available 24 hours a day, 7 days a week.
  - Ensuring all bilingual staff meet the bilingual fluency exam and shall be trained to meet the needs of members.
  - Providing plain language for all member informing materials and ensure that written materials are at 6<sup>th</sup> grade reading level or below.
  - Ensuring that materials are available to members in English and Spanish, including alternative formats upon request.

Note: GCHP discourages the use of family members or minors acting as interpreters. Language assistance services are available to members at no cost.



# Health Education

- ❑ [Health Education Request Form](#)
- ❑ GCHP Health Education Webpage: [www.goldcoasthealthplan.org/health-resources/health-education](http://www.goldcoasthealthplan.org/health-resources/health-education)
- ❑ GCHP Health Library – Healthwise: [www.healthwise.net/gchp](http://www.healthwise.net/gchp)
- ❑ Contact the Health Education Department:
  - Phone: **805-437-5718** / TTY: **711**
  - Hours: Monday – Friday, 8 a.m. – 5 p.m. (except holidays)
  - Email: [\*\*HealthEducation@goldchp.org\*\*](mailto:HealthEducation@goldchp.org)



# Language Assistance and Auxiliary Services

- ❑ Submit [language assistance and auxiliary services request form](#) at least 5-7 days in advance. Services include, but not limited to:
  - In-Person Interpreter
  - Sign Language Interpreter
  - Telephone Interpreter
  - Translation Services
  - Alternative Format such as Braille, audio format, large print, data CD, and other auxiliary aids and services that may be appropriate
  
- ❑ To cancel or reschedule, please notify GCHP at least 25 hours in advance.
  
- ❑ Submit requests and/or cancelation notices to [CulturalLinguistics@goldchp.org](mailto:CulturalLinguistics@goldchp.org).
  
- ❑ Contact Cultural and Linguistics Services:
  - Phone: **805-437-5603**/ TTY: **711**
  - Hours: Monday – Friday, 8 a.m. – 5 p.m. (except holidays)
  - Email: [CulturalLinguistics@goldchp.org](mailto:CulturalLinguistics@goldchp.org)

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**GCHP OFFICE USE ONLY**  
Date Received: \_\_\_\_\_  
Date Completed: \_\_\_\_\_  
Tracking No.: \_\_\_\_\_

**CULTURAL AND LINGUISTIC SERVICES**  
Language Assistance and Auxiliary Services Request Form

**REQUESTS FOR SERVICES REQUIRE 5-7 BUSINESS DAYS ADVANCE NOTICE.**

Is this an urgent request?  Yes  No

**Please select all that apply:**

Oral Interpreter (In-Person) Request     Sign-Language Interpreter Request     Virtual (Telehealth) Interpreter Request  
 Telephone Interpreter Request     Translation (Written) Request  
 Other (Alternative Format, etc.): \_\_\_\_\_

**REQUESTOR INFORMATION**

Date Needed:	Appointment Start Time (if applicable): <input type="checkbox"/> AM <input type="checkbox"/> PM	Appointment End Time (if applicable): <input type="checkbox"/> AM <input type="checkbox"/> PM
Name of Requester:	Phone Number:	
Provider Name:		
Clinic Name:	Fax Number:	
Email (Interpreter contribution will be emailed - Please PRINT CLEARLY):		

**MEMBER INFORMATION**

Member Name:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non Binary
Medi-Cal ID Number (REQUIRED):	Date of Birth:
Primary Care Provider:	
Type of Appointment:	

711 East Daily Drive, Suite 106, Camarillo, CA 93010 | 1-888-301-1228 | [www.goldcoasthealthplan.org](http://www.goldcoasthealthplan.org)

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# Enhanced Care Management & Community Supports

David Tovar, Incentive Strategy Manager

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# What is Enhanced Care Management (ECM)?



**Outreach and Engagement**



**Comprehensive Assessment and Care Management Plan**



**Enhanced Coordination of Care**



**Coordination of and Referral to Community and Social Support Services**



**Member and Family Supports**













**Health Promotion**



**Comprehensive Transitional Care**



# ECM Populations of Focus

ECM Population of Focus (POFs)		Adults	Children & Youth
	1 Individuals Experiencing Homelessness	✓	✓
	2 Individuals At Risk for Avoidable Hospital or ED Utilization (Formerly "High Utilizers")	✓	✓
	3 Individuals with Serious Mental Health and/or SUD Needs	✓	✓
	4 Individuals Transitioning from Incarceration	✓	✓
	5 Adults Living in the Community and At Risk for LTC Institutionalization	✓	
	6 Adult Nursing Facility Residents Transitioning to the Community	✓	
	7 Children and Youth Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition		✓
	8 Children and Youth Involved in Child Welfare		✓
	9 Individuals with I/DD	✓	✓
	10 Pregnant and Postpartum Individuals; Birth Equity Population of Focus	✓	✓





# What are Community Supports (CS)?

- CS are another component of CalAIM that focuses on addressing the social determinants of health of GCHP's membership, including those who had received services via Whole Person Care.
- There are a menu of 14 services that DHCS has approved, of which GCHP has launched 12, including housing support, recuperative care, medically supportive food, asthma remediation and other community transition services.
- Like ECM, CS focuses on serving those individuals with complex physical, behavioral, developmental and social needs.
- CS are medically appropriate, cost-effective alternative services that are provided as a substitute for more costly services or settings, such as hospitalization, SNF admissions, or ED use.

# Community Supports Services

## Pre-Approved DHCS Community Supports include:

- » Housing Transition Navigation Services
- » Housing Deposits
- » Housing Tenancy and Sustaining Services
- » Short-Term Post-Hospitalization Housing
- » Recuperative Care (Medical Respite)
- » Respite Services
- » Day Habilitation Programs ☆
- » Nursing Facility Transition/Diversion to Assisted Living Facilities
- » Community Transition Services/Nursing Facility Transition to a Home
- » Personal Care and Homemaker Services
- » Environmental Accessibility Adaptations (Home Modifications)
- » Meals/Medically-Tailored Meals or Medically-Supportive Foods
- » Sobering Centers ☆
- » Asthma Remediation

# Referrals to ECM and CS

## No Wrong Door

- ❖ Anyone can submit a referral
- ❖ Members can call Member Services to request services
- ❖ Referrals to Member Services, ECM/CS Team, or directly to provider
- ❖ Hospitals can call ECM/CS team for Recuperative Care authorization requests

## Referral and Authorization Forms

<https://www.goldcoasthealthplan.org/health-resources/calaim/>

## GCHP ECM CM team

(805) 437-5911 or [calaim@goldchp.org](mailto:calaim@goldchp.org)

## Member Services (back of GCHP card)

(888) 301-1228

## GCHP's ECM & CS Providers

- ❖ Among Friends (ECM)  
(805) 385-7244
- ❖ Clinicas Del Camino Real Inc. (ECM)  
(800) 655-2700
- ❖ Community Memorial Health System (ECM)  
(805)948-4155
- ❖ Oxnard Family Circle Adult Day Health (ECM)  
(805) 385-4180
- ❖ Ventura County Health Care Agency  
(ECM & Community Supports)  
(805) 339-1122

# Additional Information and Resources

- [Gold Coast Health Plans website](#)
- [PATH-CITED funding – through Department of Health Care Services](#)
- [Medi-Cal ECM Policy Guide](#)
- [Medi-Cal Community Supports Policy Guide](#)
- [Non-Binding ILOS Pricing Guide- for Community Supports](#)
- [California Health Foundation- Resources for New CalAIM Providers](#)
- [DHCS- Community Supports Member Sharing Guidance](#)



# Contact Information & Points of Contact

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# Changes, Updates or New Contact Information

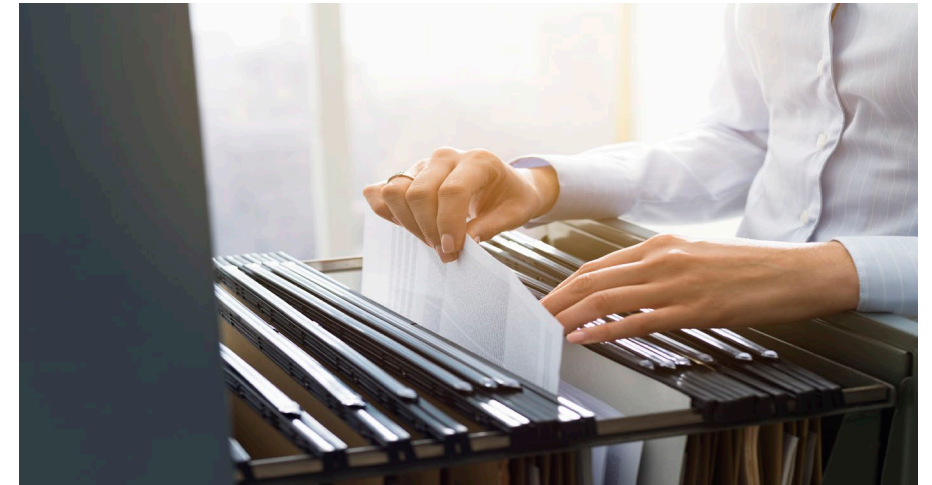
Help us keep up to date information with current email address, phone numbers within your company for administrative staff, grievance and appeals and billing department to our email address at

[Providerrelations@Goldchp.org](mailto:Providerrelations@Goldchp.org)

When notifying GCHP of demographic changes, please utilize our online Provider Information Update Form (PIUF).

- Examples of changes include:
  - Change of Ownership
- Address
  - Phone #
  - Payment address
  - National Provider Identifier (NPI)
  - Tax ID

The form can be found on our website <https://www.goldcoasthealthplan.org/for-providers/provider-relations/>



# Points of Contact at GCHP

## HELPING YOU TO NAVIGATE VENTURA COUNTY'S GOLD COAST HEALTH PLAN

For help with:	GCHP point of contact	Contact Information
1. Provider Questions with GCHP	Provider Network Operations	providerrelations@goldchp.org
2. Provider Questions with GCHP- CalAim	Provider Network Operations	calaimpr@goldchp.org
3. Information on upcoming CalAIM webinars	Communications	Communications@goldchp.org
4. Provider Contracting	Provider Network Operations	providercontracting@goldchp.org
5. Payment questions	Operations	Phone: 888-301-1228
6. Member eligibility	Operations	Phone: 888-301-1228
7. Member referrals	Operations	Phone: 888-301-1228
8. Provider payment questions	Operations	Phone: 888-301-1228

# Gold Coast Health Plan Mailing Address



Gold Coast Health Plan  
Attn: Claims  
P.O. Box 9152  
Oxnard, CA 93031-9152

Gold Coast Health Plan  
Attn: Correspondence  
P.O. Box 9153  
Oxnard, CA 93031-9153

Gold Coast Health Plan  
Attn: Grievances  
P.O. Box 9176  
Oxnard, CA 93031-9176



Questions?