



**Gold Coast  
Health Plan**<sup>SM</sup>  
A Public Entity

# Provider Operations Bulletin

DECEMBER 2024

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

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SECTION 1:

# Holiday Closures

Gold Coast Health Plan (GCHP) will be closed Christmas Day (Wednesday, Dec. 25, 2024) and New Year’s Day (Wednesday, Jan. 1, 2025). Regular business hours will resume on the Thursday after each holiday.

## 2025 First Quarter Holidays

GCHP will be closed on Monday, Jan. 20, 2025, in observance of Martin Luther King Jr. Day and Monday, Feb. 17, 2025, in observance of Presidents Day.



## SECTION 2:

# Technical Assistance Bootcamps for New California Advancing and Innovating Medi-Cal (CalAIM) Providers

To support some of California's most vulnerable populations, the state Department of Health Care Services (DHCS) implemented the California Advancing and Innovating Medi-Cal (CalAIM) program in 2022. The CalAIM program was designed to improve the health and well-being of Medi-Cal members beyond traditional medical services, and introduced a new benefit, Enhanced Care Management (ECM), and new services called Community Supports (CS). To learn more about ECM and CS services, visit GCHP's [website](#) or view the GCHP [Provider Manual](#).

GCHP's network of ECM and CS providers continues to expand. To ensure a smooth onboarding process, GCHP offers customized Provider Bootcamp trainings in addition to the required new provider orientation trainings. Bootcamp trainings are technical assistance webinars for CalAIM, Community Health Workers (CHW) and Doula providers, and include an in-depth overview of Care Management, Claims, and IT data sharing.

For upcoming CalAIM Bootcamp dates, general information, or additional inquiries, please refer to GCHP's points of contacts:

| For help with:                   | GCHP Point of Contact                          | GCHP Phone                             | GCHP Email   |
|----------------------------------|--|--|--|
| Upcoming CalAIM Bootcamps        | Provider Network Operations                    |  | <a href="mailto:CalAIMpr@goldchp.org">CalAIMpr@goldchp.org</a> or <a href="mailto:providercontracting@goldchp.org">providercontracting@goldchp.org</a> |
| Application or contract status   | Provider Network Operations                    |  | <a href="mailto:CalAIMpr@goldchp.org">CalAIMpr@goldchp.org</a>   |
| Care Management questions        | Care Management                                |  | <a href="mailto:CalAIM@goldchp.org">CalAIM@goldchp.org</a>   |
| ECM for Justice Involved Members | Mike Arias, RN, Clinical Care Manager          | 1-805-437-5888                         | <a href="mailto:CalAIM@goldchp.org">CalAIM@goldchp.org</a>   |
| ECM and CS clinical questions    | Eileen Egbo, Manager, Clinical Care Management | 1-805-437-5767                         | <a href="mailto:Eegbo@goldchp.org">Eegbo@goldchp.org</a>   |
| Technical Requirements           | IT Service Desk Support                        | 1-805-437-5699, (M-F 8 a.m. to 5 p.m.) | <a href="mailto:IT_servicedesk_support@goldchp.org">IT_servicedesk_support@goldchp.org</a>   |
| Member Eligibility and Referrals | Customer Service                               | 1-888-301-1228                         |  |
| Payment / Claims questions       | Customer Service                               | 1-888-301-1228                         |  |

## SECTION 3:

# New Gold Coast Health Plan Web Directory Enhancements

We are excited to announce updates to the Gold Coast Health Plan (GCHP) online Provider Directory, designed to make it easier for our members to find and select in-network providers. Key updates and features include:

- **Online Provider Search Tool:** The GCHP provider directory is now fully accessible online with the following search options:
  - » **Search** by provider type, specialty, provider name, or location.
  - » **Search** by location type, facility name, group, city or zip.
  - » **View Provider Details** by clicking on the provider's name.
  - » **Get Directions** with interactive maps from search results.
  - » **Weekly Updates** ensure the accuracy of provider information.
- **Mental Health Providers:** GCHP partners with Carelon Behavioral Health for mental health services. Use their [online tool](#) to find covered mental health providers.

These updates became effective Nov. 4, 2024, and are designed to help GCHP members easily access the care they need. We encourage you to direct members to our updated online directory for the most accurate and up-to-date provider information.

## SECTION 4:

# New Access and Availability Standards Webpage

Gold Coast Health Plan (GCHP) is proud to announce the roll-out of our new [Access & Availability Standards webpage](#). This webpage provides information on the access and availability standards set forth by the state Department of Health Care Service (DHCS) for all Medi-Cal providers.

Per regulation, GCHP is required to ensure network providers offer timely access to care for members within regulatory standards. With this new webpage, these standards are readily available for provider and clinic staff reference.

The page also includes in depth information about the annual GCHP Access and Availability Surveys. You can now learn more about what questions may be asked and the appropriate responses to pass the survey.

Please take an opportunity to visit the Access & Availability Standards webpage, located under For Providers > Access & Availability Standards.

Choose language 1.888.301.1228 24/7 Advice Nurse Line: 1.877.431.1700 Mental Health: 1.855.765.9702 Search

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FOR MEMBERS FOR PROVIDERS HEALTH RESOURCES COMMUNITY ABOUT US CAREERS CONTACT US

## Access and Availability Standards

Gold Coast Health Plan (GCHP) is responsible for maintaining an adequate provider network, ensuring that members have access to care and receive timely care as appropriate for their condition, 24 hours a day, seven days a week. Safeguarding member access to care helps members stay healthy and avoid additional costly care.

The access and availability standards found on this page are set forth by the state Department of Health Care Services (DHCS) for all Medi-Cal providers. Medi-Cal health plans are mandated to conduct yearly provider surveys to a sampling of our contracted providers. This helps identify the level of member access and availability and determine whether our network meets the timely access standards. It is crucial that GCHP members can access medical help during normal working hours, as well as after hours.

Below is a list of some of the detailed standards that DHCS requires GCHP providers to meet.

- Primary Care Providers (PCP)
- Specialty Care Providers (SPC)
- First Prenatal Appointment
- Urgent Care Appointments
- After-Hours Calls
- Access and Availability Surveys
- Appointment Access Standards for Medi-Cal

If you have any questions or concerns, or are experiencing challenges meeting any of these requirements, email GCHP's Provider Relations Team at [ProviderRelations@goldchp.org](mailto:ProviderRelations@goldchp.org).

**Contact us**

1.888.301.1228

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

Gold Coast Health Plan  
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711 E. Dally Drive, Suite 106  
Camarillo, CA 93010  
Map and driving directions

Site map | Privacy policy  
Terms & conditions for cell phone carriers

**SECTION 5:**

# Updates to the Gold Coast Health Plan Prior Authorization List

Gold Coast Health Plan (GCHP) continues to evaluate and monitor the services that require authorization. As a result, the Prior Authorization (PA) list has been updated to remove the following service from requiring a PA:

- CPT code 71271: Computed tomography, thorax, low dose for lung cancer screening without contrast material(s)

The update will be effective Feb. 1, 2025. An updated PA list reflecting this change is scheduled to be posted to the GCHP website by Feb. 1, 2025.

## SECTION 6:

# Prenatal and Postpartum Care

It is integral to a healthy pregnancy that members begin prenatal care as soon as possible. To help your patients establish care, you can refer them to an OB or assist them in scheduling their prenatal visits with your practice as soon as you become aware they are pregnant.

The American College of Obstetricians and Gynecologists (ACOG) recommends monthly prenatal visits up to 28 weeks of pregnancy and more frequent prenatal visits thereafter. Throughout a member's pregnancy, they should receive the following:

- An initial comprehensive risk assessment that complies with Comprehensive Perinatal Service Program (CPSP) standards.
- Recommended vaccines, including Tdap, flu, RSV, and COVID-19 to protect the pregnant member and provide passive immunity to the fetus.

Providers should also emphasize the importance of routine post-partum care within six weeks after delivery. The postpartum visit serves to ensure emotional well-being, physical recovery, and is an opportunity to discuss important topics, such as infant care and feeding, contraception and birth spacing, sleep habits, and chronic condition management.

Prenatal care does not require prior authorization for basic obstetrical care, nutrition, health education and social support needs.

## Prenatal and Postpartum Measurement Year (MY) 2024 Managed Care Accountability Set (MCAS) Measures

[Timeliness of Prenatal and Postpartum Care](#) measures are both included in the Measurement Year (MY) 2024 Managed Care Accountability Set (MCAS). The measures reflect the following care:

- Timeliness of prenatal care: The percentage of women who received a prenatal care visit during the first trimester, on or before the enrollment start date, or within the first 42 days of enrollment with GCHP.
- Postpartum care: The percentage of women who had a postpartum visit between seven to 84 days after delivery.

[Prenatal Immunization Status](#) is also included in the MCAS for MY 2024. This measures the percentage of pregnant members who received influenza and Tdap vaccinations prior to their delivery.

For more information about these measures, visit the [Managed Care Accountability Set \(MCAS\) Measures page](#) on the GCHP website.

## Connecting Members with Resources

GCHP members can receive information and resources to help them understand what to expect throughout their pregnancy journey, including recognizing common changes during pregnancy, identifying warning signs and complications, and keeping up with routine screenings and immunizations.

For additional support in managing prenatal and postpartum care, refer members to GCHP's Health Education Department by completing and submitting the [Health Education Referral Form](#).

## Pregnancy and Postpartum Resources

- [Pregnancy and New Parent e-newsletter](#)
- [First 5 Parent Kit and Pregnancy or Postpartum Packet](#): Women, Infants, and Children (WIC) information, car seats and safety, breastfeeding, and more.
- [Healthwise Health Library](#): Virtual health library to learn about a wide range of topics like healthy eating, exercise, breastfeeding, infant care and more!

GCHP's Health Education Department also offers community workshops on a wide range of topics, including prenatal and postpartum care, well-care visits, and more. Schedule a workshop at your clinic by emailing [HealthEducation@goldchp.org](mailto:HealthEducation@goldchp.org) or calling 1-805-437-5961, Monday through Friday, 8 a.m. to 5 p.m. (except holidays).

## SECTION 7:

# Importance of Child Developmental Screenings at 9, 18, and 30 Months of Age

Identifying children with a developmental or behavioral delay is an essential step toward ensuring that all children can reach their optimal health and wellness. Health care providers play a critical role in monitoring children's development and identifying problems as early as possible so appropriate interventions and services can be provided. The [American Academy of Pediatrics \(AAP\) Bright Futures™ Periodicity Schedule](#) recommends health care providers complete in-depth developmental and behavioral screenings at 9, 18 and 30 months of age using a standardized screening tool, such as the Ages & Stages Questionnaire (ASQ) or Parents' Evaluation of Developmental Status (PEDS). The screening tools include standardized questions that are answered by a parent or guardian and scored by the health care provider to evaluate if a child's motor, language, cognitive, social, and emotional development are on track for their age.

## Utilization of Developmental Screenings in Ventura County Medi-Cal Children

All children enrolled in Medi-Cal are entitled to receive developmental screenings, as it is a required service under the [Medi-Cal for Kids & Teens](#) benefit.

Gold Coast Health Plan's (GCHP) rates for the Developmental Screening in the First Three Years of Life (DEV) measure improved in MY 2023, but the rates still indicate that less than half of children under 3 years of age are receiving timely developmental screenings.

| Age Group          | Measurement Year 2022 | Measurement Year 2023 | 2022-2023 Rate Change |
|--------------------|-----------------------|-----------------------|-----------------------|
| Age 1              | 34.08%                | 42.44%                | +8.36                 |
| Age 2              | 41.54%                | 51.80%                | +10.26                |
| Age 3              | 39.16%                | 46.73%                | +7.57                 |
| Total (Ages 1 – 3) | 38.95%                | 47.85%                | +8.90                 |

One in four children under 6 years of age are at risk for developmental, behavioral, or social delays, and many young children with delays miss the window of opportunity for early detection and intervention services, according to [Help Me Grow Ventura County](#).

## Medi-Cal Billing for Developmental Screenings

- CPT code 96110 (developmental screening, with scoring and documentation, per standardized instrument) is reimbursable at ages specified in the Bright Futures / AAP Periodicity Schedule (9, 18 and 30 months) and when medically indicated. The frequency limit for general developmental screening is twice a year for children ages 0 to 5. To view the Medi-Cal billing guidelines for Developmental Screenings, [click here](#).
- Developmental screenings can be scored by any qualified clinic staff (e.g., doctor, nurse, medical assistant).
- A valid screening tool that tests for all four developmental domains (motor, language, cognitive and social / emotional) and meets the Centers for Medicare & Medicaid Services (CMS) Child Core Set developmental screening criteria must be used. For a list of screening tools, [click here](#).

## Provider Training

Help Me Grow Ventura County assists with training providers on developmental screening tools, including how to set up screening protocols, information about child development, parenting tips, and support for linking families to community resources. For more information, [click here](#).



## DEVELOPMENTAL SCREENING

### 3 before 3!

#### The AAP/Bright Futures periodicity schedule recommends:

- A general developmental screening at 9, 18, and 30 months
- An autism-specific screening at 18- and 24-months
- Developmental surveillance at every well-child visit

Screening for all!  
Help children  
grow & thrive.

### Bill for it

#### A general developmental screening is eligible for payment:

- Use a standardized tool
- "Unbundle it!" from the well-child visit
- Use CPT code 96110 without the modifier KX

### Technical assistance and training is available

Visit: [HelpMeGrowVC.org](https://www.HelpMeGrowVC.org)

Online ASQ training here



## Additional Resources on Developmental Screening & Provider Training

- [American Academy of Pediatrics](https://www.aap.org/)
- [Centers for Disease Control and Prevention \(CDC\)](https://www.cdc.gov/)

## Resources for Parents

Actively involving parents in a child's development can help build the provider-patient relationship and ensure parents understand the importance of continually monitoring their child's growth. The CDC offers positive parenting tips with information about developmental milestones, available in [English](#) and [Spanish](#).

Thank you for continuing to serve our community and for providing excellent care to our members. If you have any questions, please contact the Quality Improvement Department at [QualityImprovement@goldchp.org](mailto:QualityImprovement@goldchp.org).

## SECTION 8:

# Blood Pressure Cuffs: A Gold Coast Health Plan (GCHP) Covered Benefit



Gold Coast Health Plan (GCHP) monitors blood pressure (BP) control in members diagnosed with hypertension through the Controlling High Blood Pressure (CBP) measure, which evaluates if a member's last BP during the measurement year (MY) was < 140/90 mm Hg. The table below displays GCHP's CBP rates between MYs 2019 to 2023 compared to national Medicaid Percentile Rank. This shows that GCHP's rates have been trending in the 50<sup>th</sup> percentile, except for in MY 2020 when the CBP rate declined due to the COVID-19 pandemic.

| Measurement Year   | 2019             | 2020             | 2021             | 2022             | 2023             |
|--------------------|------------------|------------------|------------------|------------------|------------------|
| CBP Rate           | 61.07%           | 54.26%           | 55.96%           | 60.34%           | 62.29%           |
| CBP Medicaid Rank* | 50 <sup>th</sup> | 25 <sup>th</sup> | 50 <sup>th</sup> | 50 <sup>th</sup> | 50 <sup>th</sup> |

\* National Medicaid Percentile Rank

Improving BP control helps prevent heart disease, cerebrovascular accidents, kidney damage, vision loss, and many other health issues. GCHP members can learn to monitor and track their BP at home, which can help increase engagement in their care and compliance with diet, exercise and medication management. Free health education (HE) materials and resources in English and Spanish are available to members. Resources include:

- [GCHP HE Webpage](#)
- [HE Referral Form](#)
- [My Blood Pressure Check Up Flyer](#)
- [Chronic Disease Self-Management Program \(CDSMP\)](#)
- [Healthwise Health Library](#)

## 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.

## Mi chequeo de presión arterial

Gold Coast Health Plan (GCHP) valora su salud. Una de las maneras en las que puede cuidar su salud es realizándose chequeos de la presión arterial de rutina en la oficina de su doctor. Con frecuencia, la presión arterial alta no produce síntomas, por lo que las pruebas de rutina son la única forma de detectarla.

Esta tabla puede ayudarlo a llevar un control de sus niveles de presión arterial alta y de las fechas de otras pruebas que su doctor puede ordenar. Una vez haya completado este formulario, guárdelo para sus registros.

| Pruebas y exámenes             | Frecuencia   | Fechas de las pruebas | Resultados |
|--------------------------------|--|-----------------------|------------|
| Chequeo de la presión arterial | Chequeo de la presión arterial según sea necesario. Si es alto, hable con su doctor. |                       |            |
| Chequeo del colesterol         | Anualmente o según lo ordene su doctor.  |                       |            |
| Examen de salud                | Según lo recomendado por su doctor.  |                       |            |

El rango de presión arterial menor que 120 sistólica y 80 diastólica se considera normal. Hable con su doctor si sus valores de la presión arterial son mayores de este rango.

**También puede cuidar su salud al:**

- Mantener un peso saludable.
- Hacer ejercicio con regularidad y mantenerse activo.
- Comer más frutas, vegetales y granos enteros.
- Consumir menos alimentos con alto contenido de sal y grasas.
- Elegir pescado o pollo sin piel con más frecuencia que la carne roja.
- Comer menos galletas, pasteles y otros productos horneados.
- No fumar ni consumir alcohol.
- Dormir suficiente.

Fuente: Centros para el Control y la Prevención de Enfermedades (CDC, por sus siglas en inglés)

Pregúntele a su doctor si también debería medir su presión arterial en casa. Su doctor puede darle una receta para un aparato para medir la presión arterial. Si tiene alguna pregunta sobre su salud, llame a la línea de asesoría de enfermeras disponible las 24 horas al 1-877-431-1700 (TTY: 711). Para obtener más información, llame al Departamento de Educación para la Salud de GCHP al 1-805-437-5718, de lunes a viernes, de 8 a.m. a 5 p.m. Si usa un TTY, llame al 711.

Blood pressure monitors are a covered benefit for GCHP members. The monitors can be supplied by local pharmacies or durable medical equipment (DME) benefit suppliers with a prescription. Members can either pick up their BP monitor from the pharmacy or have it delivered to their home address. The GCHP benefit covers one new home BP monitor every five years. Pharmacies and DME suppliers should submit a medical claim and use HCPCS Code A4670 (automatic blood pressure monitor).

Monitoring BP during telehealth visits is an important component of managing patients with hypertension. BP results reported by members during telehealth visits can be captured for use in the CBP measure. However, medical records evaluated during MY 2023 showed that member-reported BPs were often missed during telehealth visits. Be sure to collect BPs reported by GCHP members using an automated BP monitor and inform members about the BP monitor benefit during their next telehealth visit.

GCHP has developed a [Blood Pressure Tool Kit](#) that includes resources and educational materials for providers and members, including:

- Guidance on the blood pressure monitor benefits through Medi-Cal Rx and Durable Medical Equipment and how to order them for your patients.
- Collecting BPs during telehealth visits.
- Member education guides on how to correctly check blood pressure.

## SECTION 9:

# Cultural and Linguistic Services

## Access to Language Assistance Services

Gold Coast Health Plan (GCHP) provides language assistance services 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 Language Assistance Services provides and facilitates interpreting and translation services at no cost to members.

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

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

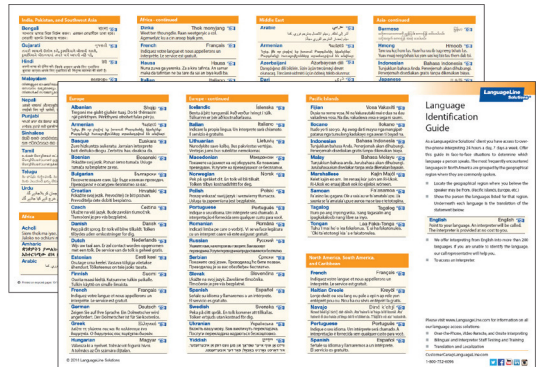
Below are some valuable language identification and awareness tools for members. We recommend keeping these resources in visible areas for staff to show members when they need help identifying their preferred language or communication method.

### 1. Language ID Guide:

Contain 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.



For questions or additional resources, visit the GCHP [website](https://www.goldcoasthealthplan.org) or 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](mailto:CulturalLinguistics@goldchp.org).

| Language ID Poster and Desktop Display   |          | Interpretation Services Available  |             |
|--|----------|--|-------------|
| English Translation: Point to your language. An interpreter will be called. The interpreter is provided at no cost to you. |          | English Translation: Point to your language. An interpreter will be called. The interpreter is provided at no cost to you. |             |
| American Sign Language   | ASL      | Korean   | 한국어         |
| Arabic   | العربية  | Mandarin   | 普通话         |
| Bengali  | বাংলা    | Nepali   | नेपाली      |
| Burmese  | မြန်မာ   | Polish   | Polski      |
| Cantonese  | 廣東話      | Portuguese   | Português   |
| Farsi  | فارسی    | Punjabi  | ਪੰਜਾਬੀ      |
| French   | Français | Romanian   | Română      |
| Haitian Creole   | Kreyòl   | Russian  | Русский     |
| Hindi  | हिन्दी   | Somali   | Af Soomaali |
| Hmong  | Hmong    | Spanish  | Español     |
| Italian  | Italiano | Tagalog  | Tagalog     |
| Japanese   | 日本語      | Vietnamese   | Tiếng Việt  |

## SECTION 10:

# 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.

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](mailto:HealthEducation@goldchp.org).

## Discussing Sexual Health to Empower Your Patients

It is recommended that providers begin talking with patients about their sexual health starting as early as 12 years of age. By viewing this conversation as a part of an adolescent's routine care, providers can normalize this discussion for them and the patient. It can be as simple as asking the patient if they are sexually active.

The Centers for Disease Control and Prevention (CDC) provides a [guide](#) to help providers start and continue the conversation about sexual health with your young patients.

The CDC offers facts sheets [about chlamydia](#) and other [STIs](#) in both English and Spanish. Members can also visit the [GCHP Health Library](#) to learn about STIs, sexual health, and much more!



## Eating Healthy During the Holidays

As the end of the year approaches, we attend many holiday gatherings with friends and family. Many of these involve delicious meals and desserts, which can make it hard to eat healthy during this time of year.

Providers and members can find out more about healthy eating and staying active by visiting the [GCHP Health Library](#), [Centers for Disease Control and Prevention \(CDC\)](#), or [MyPlate](#).



## Managing Stress During the Holidays


The holidays can bring a lot of cheer, but it is also a very busy time and can become stressful as many people prepare for the season.

Providers are encouraged to inform members of [GCHP's Mental Health Service](#) offered by our partner Carelon Behavioral Health. To learn more about outpatient mental health services covered by GCHP, members and providers can call Carelon Behavioral Health at 1-855-765-9702, Monday through Friday, 8:30 a.m. to 5 p.m. If you use a TTY, call 1-800-735-2929.

## Health Education

For more information, including referring members or requesting health education materials, please contact GCHP Health Education, Cultural and Linguistic Services at 1-805-437-5961, Monday to Friday, 8 a.m. to 5 p.m. (except holidays). For TTY, use 711.

You can complete the [Health Education Referral Form](#) to refer members. To receive materials, email [HealthEducation@goldchp.org](mailto:HealthEducation@goldchp.org). Both providers and members can visit GCHP [Health Education Webpage](#) to find out more.

|   |                        | Integrity • Accountability • Collaboration • Trust • Respect  |               |
|--|------------------------|---|---------------|
| <b>HEALTH EDUCATION REFERRAL FORM</b><br><small>Please send via fax to 1-805-248-7481 or email to <a href="mailto:HealthEducation@goldchp.org">HealthEducation@goldchp.org</a></small> |                        |   |               |
| <b>MEMBER INFORMATION</b>  |                        |   |               |
| Member Last Name   | First Name             | MI  | Date of Birth |
| Member ID Number   | Address                | City  | State Zip     |
| Primary Phone Number   | Secondary Phone Number |   |               |
| <b>REFERRAL INFORMATION</b>  |                        |   |               |
| Name of Treating Physician   | Phone Number           | Fax Number  |               |
| Name of Primary Care Provider (PCP)  | Phone Number           | Fax Number  |               |
| <b>REASON(S) FOR REFERRAL TO GOLD COAST HEALTH PLAN HEALTH EDUCATOR</b>  |                        |   |               |
| <input type="checkbox"/> Diabetes<br><input type="checkbox"/> Asthma<br><input type="checkbox"/> Morbid Obesity Adult (18+)  |                        | <input type="checkbox"/> Psychosocial factors presenting barriers to care<br><input type="checkbox"/> Depression<br><input type="checkbox"/> Health Navigator Program |               |
| <input type="checkbox"/> Morbid Obesity (Age 0-17)<br><input type="checkbox"/> High Risk Obstetrics (Prenatal)   |                        | <input type="checkbox"/> Chronic Disease Self-Management Program (CDSMP)<br><input type="checkbox"/> Other _____  |               |
| <b>CLINICAL INFORMATION</b> (To be completed by treating physician or office staff)  |                        |   |               |
|  |                        |   |               |
| Name and Title of Person Completing Form   |                        | Phone Number  | Date          |
| <small>711 East Daily Drive, Suite 106, Camarillo, CA 93010   1-888-301-1228   <a href="http://www.goldcoasthealthplan.org">www.goldcoasthealthplan.org</a></small>                    |                        |   |               |
| <small>Rev. 6/2023</small>   |                        |   |               |

## SECTION 11:

# Medi-Cal Rx Updates

## Gold Coast Health Plan (GCHP) Website and Pharmacy Newsletter

Gold Coast Health Plan (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 the newsletter.

## Pediatric Integration of Members 21 Years of Age and Younger

Beginning Jan. 31, 2025, Medi-Cal Rx will implement claim utilization management (UM) edits and prior authorization (PA) requirements for pediatric members 21 years of age and younger. This will include new start claims and continuation of therapy claims. Medications and products for pediatric members that have been processing without a PA may require a PA starting Jan. 31, 2025, based on the coverage status by Medi-Cal Rx. For more information on claims and PA request requirements, refer to the [Medi-Cal Rx Provider Manual](#) and [Medi-Cal Rx Contract Drugs & Covered Products List](#).

As Pediatric Integration implementation approaches, a detailed list of exclusions will be available on the [Medi-Cal Rx Approved National Drug Codes \(NDC\) List](#) (this document may automatically download to your computer.) The NDC list also identifies which medications will require PA. For more information regarding Pediatric Integration, navigate to the [Education & Outreach](#) page on the [Medi-Cal Rx Web Portal](#) and select the Pediatric Integration tab.

Effective Jan. 31, 2025, prescribers may submit PA requests up to 100 days prior to the effective date of the prescription or prescription renewal, except in cases where the member is younger than 1 year of age. Due to potentially rapid changes in an infant's health status, PA requests for medications, enteral nutrition products, and medical supplies for children younger than 1 year of age should be submitted with the prescription.

For any questions about a pharmacy claim, contact the Medi-Cal Rx Customer Service Center, 1-800-977-2273, available 24 hours a day, seven days a week, 365 days per year.

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

Please check the [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 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](#).

## Changes to the Medi-Cal Rx Pharmacy Reimbursable Physician Administered Drugs

The below changes have been made to the [Medi-Cal Rx Pharmacy Reimbursable Physician Administered Drugs](#):

| Drug Name  | Description   | Effective Date |
|--|---|----------------|
| Aripiprazole Extended-Release Long-Acting Injectable Suspension          | Prior Authorization (PA) requirement removed.                     | Oct. 1, 2024   |
| Aripiprazole Lauroxil Extended-Release Long-Acting Injectable Suspension | PA requirement removed.   | Oct. 1, 2024   |
| Fluphenazine Decanoate   | Added to the Pharmacy Reimbursement Physician Administered Drugs. | Oct. 1, 2024   |
| Haloperidol Decanoate  | Added to the Pharmacy Reimbursement Physician Administered Drugs. | Oct. 1, 2024   |
| Olanzapine   | PA requirement removed.   | Oct. 1, 2024   |

| Drug Name  | Description             | Effective Date |
|--|-------------------------|----------------|
| Olanzapine Pamoate                                 | PA requirement removed. | Oct. 1, 2024   |
| Paliperidone Palmitate                             | PA requirement removed. | Oct. 1, 2024   |
| Risperidone Extended-Release Injection             | PA requirement removed. | Oct. 1, 2024   |
| Risperidone Extended-Release Injectable Suspension | PA requirement removed. | Oct. 1, 2024   |
| Risperidone Long-Acting Injection                  | PA requirement removed. | Oct. 1, 2024   |

## Changes to the Medi-Cal Rx Family Planning, Access, Care and Treatment Pharmacy Formulary

The below changes have been made to the [Medi-Cal Rx Family Planning, Access, Care, and Treatment Pharmacy Formulary](#):

| Drug Name                                 | Description  | Effective Date |
|---|--|----------------|
| Segesterone Acetate and Ethinyl Estradiol | Additional labeler code (68308) restriction added. | Oct. 1, 2024   |

## Changes to the Medi-Cal Rx Contracted Drugs List – Over-the-Counter

The below changes have been made to the [Medi-Cal Rx Contract Drugs List – Over-the-Counter](#):

| Drug Name                      | Description              | Effective Date |
|--------------------------------|--------------------------|----------------|
| Cetirizine HCL                 | Age restriction removed. | Oct. 1, 2024   |
| Fexofenadine                   | Age restriction removed. | Oct. 1, 2024   |
| Levocetirizine Dihydrochloride | Age restriction removed. | Oct. 1, 2024   |
| Loratadine                     | Age restriction removed. | Oct. 1, 2024   |

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

Medi-Cal Rx has started 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 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 the 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](#) to be sure that you are up to date on the changes.

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](#), [Contract Drugs List \(CDL\)](#), [Medi-Cal Rx Provider Manual](#) and other helpful information. Please make sure to bookmark this website and sign up for the [Medi-Cal Rx Subscription Services \(MCRxSS\)](#).

For assistance regarding a pharmacy claim or prior authorization, 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, please [click here](#).

## Drug Use Review (DUR) Educational Articles

This educational intervention component of Drug Use Review (DUR) is to improve the quality and cost-effectiveness of prescribing and dispensing practices for Medi-Cal recipients. Educational interventions include ongoing dissemination of information through the Medi-Cal provider bulletin process about clinically important, drug-specific therapy problems.

*Disclaimer: These articles are the result of analyses carried out by the Global Medi-Cal DUR Program and are not official policies of the state Department of Health Care Services (DHCS).*

The following educational articles were recently posted:

- [Drug-Drug Interaction: Amlodipine with Simvastatin or Lovastatin](#)

These articles and copies of previous newsletters are available on the GCHP [website](#).

## COVID-19 Updates

- FDA approved and authorized updated 2024-2025 COVID-19 vaccines.
- ACIP and CDC now recommend a second dose of 2024-2025 COVID-19 vaccine six months after their first dose to people.
  - » Ages 65 years and older.
  - » Ages 6 months and older who are moderately or severely immunocompromised.
    - › Additional doses\* (i.e., three or more) or 2024-2025 COVID-19 vaccine may be given to immunocompromised people 6 months and older under shared clinical decision making. *\*Minimum interval two months.*
- COVID-19, flu and RSV vaccines may be administered at the same time. There is no minimum waiting period between vaccines.
- California Department of Public Health (CDPH), Immunization Branch has updated [COVID-19 Provider FAQs](#). Please refer to the link for most up-to-date COVID-19 information.
- For current information regarding Medi-Cal's COVID-19 response, check the [COVID-19 Medi-Cal Response page](#).
- COVID-19 vaccines, over-the-counter (OTC) [COVID-19 antigen test kits](#) up to two kits (or four tests) per 30 days and treatment are still covered benefits under Medi-Cal Rx. For more information, please check the [Medi-Cal Rx Contract Drugs List](#) to see what is covered.
- As of Nov. 29, 2023, COVID-19 vaccines are 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.

## 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 are 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 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 (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. 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 the state Department of Health Care Services (DHCS) and the Pharmacy & Therapeutics (P&T) Committee, updates the Physician Administered Drugs (PAD) list quarterly. This notice is to inform you of the approved changes from May 16, 2024, and Aug. 15, 2024, P&T committee meetings, which will be effective March 1, 2025.

The current PAD list is posted on GCHP website, [Medical Drug Benefit for Providers](#). The updated PAD list with the changes below and the clinical guidelines will be posted on GCHP website, [Medical Drug Benefit for Providers](#) by March 1, 2025.

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

| HCPCS | Generic Name  | Brand Name   | Changes |
|-------|---|--------------|---------|
| J9035 | Bevacizumab   | Avastin      | Removed |
| J0491 | Anifrolumab   | Saphnelo     | Added   |
| J0485 | Belatacept  | Nulojix      | Added   |
| J0565 | Bezlotoxumab  | Zinplava     | Added   |
| J0584 | Burosumab   | Crysvita     | Added   |
| J0638 | Canakinumab   | Ilaris       | Added   |
| J0717 | Certolizumab pegol                                    | Cimzia       | Added   |
| J1096 | Dexamethasone Ophthalmic insert                       | Dextenza     | Added   |
| J1300 | Eculizumab  | Soliris      | Added   |
| J3032 | Eptinezumab   | Vyepti       | Added   |
| J1305 | Evinacumab  | Evkeeza      | Added   |
| J7313 | Fluocinolone intravitreal implant                     | Iluvien      | Added   |
| J7314 | Fluocinolone intravitreal implant                     | Yutiq        | Added   |
| J1602 | Golimumab   | Simponi Aria | Added   |
| J7318 | Hyaluronic acid derivative, intra-articular injection | Durolane     | Added   |
| J7322 | Hyaluronic acid derivative, intra-articular injection | Hymovis      | Added   |
| J7327 | Hyaluronic acid derivative, intra-articular injection | Monovisc     | Added   |
| J7328 | Hyaluronic acid derivative, intra-articular injection | Gelsyn-3     | Added   |
| J7329 | Hyaluronic acid derivative, intra-articular injection | TriVisc      | Added   |
| J7331 | Hyaluronic acid derivative, intra-articular injection | Synjoynt     | Added   |
| J7332 | Hyaluronic acid derivative, intra-articular injection | Triluron     | Added   |
| J7320 | Hyaluronic acid derivative, intra-articular injection | GenVisc 850  | Added   |
| J1745 | Infliximab  | Remicade     | Added   |
| Q5104 | Infliximab-abda                                       | Renflexis    | Added   |
| Q5121 | Infliximab-axxq                                       | Avsola       | Added   |
| Q5103 | Infliximab-dyyb                                       | Inflectra    | Added   |
| Q5109 | Infliximab-qbtx                                       | Ixifi        | Added   |
| J2181 | Mepolizumab   | Nucala       | Added   |
| J2323 | Natalizumab   | Tysabri      | Added   |
| J2350 | Ocrelizumab   | Ocrevus      | Added   |
| Q9093 | Ranibizumab   | Susvimo      | Added   |
| J2249 | Reslizumab  | Cinqair      | Added   |
| J2327 | Risankizumab  | Skyrizi      | Added   |

| HPCPS | Generic Name                 | Brand Name | Changes |
|-------|------------------------------|------------|---------|
| J3111 | Romosozumab                  | Evenity    | Added   |
| J1747 | Spesolimab                   | Spevigo    | Added   |
| J3241 | Teprotumumab                 | Tepezza    | Added   |
| J2356 | Tezepelumab                  | Tezspire   | Added   |
| J3299 | Triamcinolone suprachoroidal | Xipere     | Added   |
| J2329 | Ublituximab                  | Briumvi    | Added   |
| J3358 | Ustekinumab                  | Stelara    | Added   |
| J3380 | Vedolizumab                  | Entyvio    | Added   |

*Removed – The medication is removed from the PAD list and PA is not needed.*

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

## The Risks of Overutilization of Short Acting Beta Agonist (SABA) for Asthma

- [2023 Global Initiative for Asthma \(GINA\)](#) guideline does not recommend Short Acting Beta Agonist (SABA) (i.e., albuterol MDI) as the only treatment of asthma.
- SABA-only treatment is associated with increased risk of exacerbations and lower lung function, and of asthma-related death.
- Regular use of SABA increases allergic responses and airway inflammation and reduces the bronchodilator response to SABA when it is needed.
- Overuse of SABA (e.g., > 3 x 200-dose canisters in a year) increases the risk of asthma exacerbations. Dispensing of > 12 SABA canisters in a year is associated with increased risk of asthma-related death. Home use of nebulized SABA is also associated with an increased risk of asthma death.
- Low-dose ICS-formoterol (i.e., Symbicort) is the preferred reliever because it reduces the risk of severe exacerbation compared to SABA.
  - » For as-needed use, one inhalation of ICS-formoterol for symptom relief or before exercise or allergen exposure instead of SABA.
  - » ICS-formoterol should not be used as a reliever by patients who are taking a different maintenance ICS-LABA.



**Gold Coast  
Health Plan**<sup>SM</sup>  
A Public Entity

## Provider Operations Bulletin

DECEMBER 2024

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