



CALIFORNIA HEALTH & WELLNESS PLAN

PROVIDER
PULSE

SUMMER 2021



Welcome to the summer 2021 issue of the California Health & Wellness Plan Provider Pulse newsletter!

As 2021 progresses, we want to extend a heartfelt thank YOU for your continued partnership! We appreciate your dedication and hard work as you provide quality care to members in our local communities.

In this issue of *Provider Pulse*, see how we've continued to respond to your input to update teams and processes. Also, learn how we're engaging to help you, your patients and your community.

What you'll find in this issue:

- **Meet Health Net's* new regional Medi-Cal leadership team.**
- **Updated incentive program** for value-based payments.
- **Improved Prop 56 payment** process.
- **Population health updates** on adverse childhood experiences (ACEs) and pre-exposure prophylaxis (PrEP).
- **Supporting our communities** during COVID-19 and significant grant funding efforts.

— Your California Health & Wellness Plan Provider Relations team

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SATISFACTION Highlights

OPERATIONAL EXCELLENCE

Health Net Names New Leadership Team to Help Improve Health Outcomes, Address Health Equity for Medi-Cal Members across the State

Health Net, one of California’s longest-serving Medi-Cal partners, recently announced it has named a new regional leadership team, which aims to close care gaps, improve health outcomes and address health equity for the health plan’s more than 2 million Medi-Cal members across the state.

For decades, Health Net has worked hand-in-hand with California to build the state’s Medi-Cal program. Today, more than two-thirds of Health Net’s members are Medi-Cal enrollees, which include low-income individuals, families with children, seniors and persons with disabilities, among others.

“At Health Net, we believe health care is best delivered locally,” said **Brian Ternan, President and CEO of Health Net**. “To best serve our Medi-Cal members and deliver on our mission to improve the health of our local communities, we are updating our leadership structure to ensure every community we serve has regional leadership and improved access to high-quality care and services.”

ENHANCED MEDI-CAL REGIONAL LEADERSHIP TEAM STRUCTURE

Martha Santana-Chin will continue to serve as Health Net’s Medi-Cal president, providing executive oversight to Health Net’s Medi-Cal program. Santana-Chin has more than three decades of health care leadership experience working with independent physician practices and hospitals, federally qualified health centers (FQHCs) and health plans, serving Medi-Cal and low-income communities. Santana-Chin, who often shares her story of growing up in extreme poverty and was the first in her family to pursue higher education, prides herself on understanding first-hand the struggles that many Medi-Cal enrollees face – from food insecurity and transportation issues to homelessness and racial inequities, among other social determinants of health.

“Martha’s career exemplifies a commitment to advancing health equity and serving our most vulnerable populations by working with providers at the local level,” said Ternan.

(continued)



“As California envisions the future of Medi-Cal under CalAIM, Martha and her team bring experience, relationships, understanding and national best practices to help transform care delivery and enhance our state’s health care safety net.”

– Brian Ternan, president and CEO of Health Net and CHWP

Health Net also announced the following leaders to oversee the specified geographic regions:

- **Karen Richmond**, vice president, will oversee Los Angeles, Riverside and San Bernardino counties. For more than three decades, Richmond has held leadership roles at Southern California government-funded managed care plans and provider organizations, including responsibility for Medicare-Medicaid Dual Eligibles/Cal MediConnect and improving Healthcare Effectiveness Data and Information Set (HEDIS®) and Centers for Medicare & Medicaid Services Star quality scores.
- **Kathleen Lang**, vice president, will oversee San Diego and Imperial counties. Lang has served in health care quality, programmatic and operations roles since 2001. Previously, she held leadership roles at the Imperial County Behavioral Health Services and Public Health Departments and County Executive Office before joining California Health & Wellness Plan and Health Net Medicaid.
- **Nai Kasick**, vice president, will oversee the Central Valley. Kasick has more than 20 years as a health care executive serving low-income or underemployed culturally and linguistically diverse beneficiaries. Previously, she served as the senior director of health services at the nation's largest public health care organization. Her proudest professional accomplishment includes securing the prestigious National Committee for Quality Assurance Multicultural Health Care Distinction.
- **Amber Kemp**, vice president, will oversee Northern California. Kemp has more than a decade of leadership experience in developing and operationalizing Medicaid and Covered California policy. Her most recent leadership roles included serving as vice president, State Medicaid Policy, for the California Association of Health Plans; vice president, Health Care Coverage, with the California Hospital Association; and roles with the California Department of Health Care Services director's office and the Board of Equalization under member Betty T. Yee.
- **Harout Torosian**, senior director, will oversee Fresno, Kings and Madera counties. Born and raised in Fresno, Torosian is an experienced health care leader with nearly 20 years of experience in the health care and pharmaceutical industries.

In addition to the new regional structure, Health Net announced the appointment of **Dr. Pooja Mittal** as its health equity lead. Through this role, Mittal will oversee health equity strategy and execution for Health Net's entire Medi-Cal population, with a focus on eliminating care gaps due to structural racism and serving underrepresented communities.



Updated Provider Incentive Programs: Value-Based Payments

Our Medi-Cal incentive programs continue to reward our primary care physicians (PCPs), clinics and independent practice associations who partner with us to improve quality outcomes and access to care for members. We are excited to share program updates and successes!



Key Updates

- **Cozeva®:** As of the end of 2020, 78% of eligible providers have started using this tool for better tracking clinical quality measures and increase payment frequency from biyearly check payments to quarterly e-payments for providers.
- **COVID-19 response:** We have created an alternative model for MY¹ 2020 to assist providers who may have decreased utilization due to the COVID-19 pandemic.

	HEDIS Improvement Program (HIP)	HEDIS Clinic Improvement Program (C-HIP)
Description	PCPs are awarded for care gaps closed in 17 different HEDIS measures.	FQHCs/RHCs ² /IHS ³ providers are awarded for meeting the MPL ⁴ and having a certain % of improvement (1% for providers meeting MPL and 2% for providers below MPL) in 17 different HEDIS measures.
Who	Individual PCPs and non-safety net clinics (4500 participating Health Net and CHWP PCPs/clinics)	FQHC/RHC/IHS safety net clinics (1400 participating Health Net and CHWP clinics)
Where	All CHWP counties	All CHWP counties
Rewards available for participating providers	Total rewards paid: \$458,000 (MY 2019) Average rewards (MY 2020 interim period): <ul style="list-style-type: none"> • CHWP - \$5,400. Percentage of participating providers earning rewards: 86%	Total rewards paid: \$2.9 million (MY 2019) Average rewards (MY 2020 interim period): <ul style="list-style-type: none"> • CHWP - \$12,665. Percentage of participating providers earning rewards: 90%
Examples of program success	Increases in care gap closures (MY 2019-2020 interim period): <ul style="list-style-type: none"> • Breast Cancer Screening – 46% • Cervical Cancer Screening – 146% • Comprehensive Diabetes Care HbA1c Test – 112% 	32% of eligible providers earned an advance payment for meeting 50th percentile and improvement goals while maintaining access to care for members (MY 2019-2020)

¹Measurement year

²Rural health clinics

³Indian Health Service

⁴Minimum performance level

Improved Process for Prop 56 Payments

NEW PAYMENT PROCESS NOW INCLUDES AN RA

More good news! For Medi-Cal, we've set up a new process so payments can be made to providers for capitated encounters and to providers who have not submitted a current W-9 form. This new process will include a remittance advice (RA) sent with your payment.

What's on the RA

The RA you receive for supplemental or add-on payments for 2017–2020 will give summary information on which encounters are included in the payment. This change will help resolve issues with supplemental payments for fee-for-service claims.

You will receive the RAs by the same method you receive payments – paper or electronic.

What this means for you

- W-9s will no longer be needed.
- An automated process issues payments and includes an RA with each payment.
- If providers have questions or would like to file an appeal, the RAs include whom to contact with questions.

Services eligible for add-on payments

The services that qualify for Prop 56, or programs that have add-on payments include:

- Physician services.
- Sensitive services (Hyde Amendment).
- Developmental screening.
- Family planning.

W-9 still required for value-based payments

This new process does not include value-based payments (VBPs). Providers must still submit a current W-9 form to receive VBPs from capitated encounters.



Health Net Ranks Highest in Customer Service Among Health Insurers

Health Net ranks the highest in customer service among Health Insurers in Forrester's proprietary 2021 U.S. Customer Experience Index (CX Index™) survey. The ranking was based on responses from more than 85,000 U.S. survey respondents from 13 U.S. industries, including health care plans.

"With decades of experience caring for California's most vulnerable residents, we've worked hand-in-hand with the state to serve those who depend on the health care safety net the most," said **Brian Ternan, president and CEO of Health Net of California and CHWP.** "This award validates the hard work we've put into putting our customers first. When it comes to meeting the needs of our members, we know one size does not fit all. That's why our teams live in and reflect the diversity of the communities that we serve, and it's one of the ways we strive to always provide a best-in-class customer care experience for all our members."

Forrester's CX Index score measures how a company delivers customer experiences that create and sustain loyalty. Conducted for the seventh year in a row, Forrester's 2021 CX Index results are benchmarked on a survey of 85,073 U.S. customers across 220 brands and 13 industries. CX leaders grow revenue faster, drive higher brand preference, and can charge more for their products. Additionally, CX Index helps brands identify the key drivers of a positive CX for their customers to prioritize efforts. Even a minor improvement to a brand's customer experience quality can add tens of millions of dollars of revenue by reducing customer churn and increasing share of wallet. Superior CX leads to reduced service costs and lowers the cost of customer acquisition through word of mouth.

"The past year has revealed how brands that keep their customers at the center of all they do can continue to meet evolving customer needs even in a crisis," said **Michelle Yaiser, VP of CX Analytics at Forrester.** "The brands that adapted how they engaged with customers, while continuing to make them feel good about their interactions, saw higher CX Index scores, increased customer loyalty and had a larger group of devoted customers."

Forrester's CX Index gives businesses a deep and actionable understanding of the quality of their customers' experiences, competitive benchmark data so that business and technology leaders know how they stack up against their peers, and the ability to model the improvements that will have the biggest impact on revenue.

POPULATION

HEALTH in Focus: ACEs, PrEP and COVID-19!

LEARN HOW CHWP CONTINUES WORKING TO MAKE A DIFFERENCE BY ADDRESSING THESE KEY AREAS

Addressing ACEs to Improve Health Outcomes

Our wraparound approach supports care where kids need it – at home, in schools and at the doctor’s office. It’s why we invest in preventative programs, like screenings and programs for ACEs and promoting trauma-informed care for our members and providers. By screening for ACEs, providers can better assess if a patient is at an increased health risk due to a toxic stress response. Since January 2020, we have launched a range of initiatives to address ACEs for the diverse communities that we serve.

These activities include:



Conducting a series of trainings for providers, staff and community. So far, we have conducted 55 trainings educating 1,738 participants on topics, such as ACEs 101, Trauma-Informed Care, Social Determinants of Health, Cultural Competence and Motivational Interviewing.



Launching a provider resiliency program through “Resilience Thursday,” with 27 drop-in sessions reaching 269 providers.



Initiating a member communications campaign to educate members on ACEs, reduce disparities and increase access to resources.



Producing member materials – in English and Spanish – on Understanding ACEs, Parenting and ACEs and Lowering Toxic Stress in Children and Adults.



Sponsoring ACEs-related conferences, including ETR’s Youth Tech Health (YTH) Live conference in August 2020 and the Rural Northern State ACEs Summit in September 2020. California Surgeon General Dr. Nadine Burke Harris was a keynote speaker at both events.



MEMBER SUCCESS STORY

A member is grateful for help with vaccine questions, thanks to our clinical pharmacy team

A member with diabetes, high blood pressure and COPD received a COVID-19 vaccine about one month before contacting us. The member inquired why the vaccine was on hold and about the need for a booster. The member also asked when it was safe to get a shingles vaccine.

Our clinical pharmacist was able to help. The pharmacist:

- Reviewed all of the member’s medications, as well as guideline recommendations for the member’s blood pressure and fasting blood sugar.
- Counseled on potential side effects of the vaccine and explained that it was a one-dose series vaccine that, as of that time, didn’t require a booster.
- Reviewed differences between the three vaccines then in use.
- Counseled on the very small percentage of individuals who had a reaction after they got the same vaccine and that it was resumed.
- Advised the member it was okay to get the shingles vaccine, as more than two weeks passed since the member got the COVID-19 vaccine.

The member was very grateful for the information about COVID-19 vaccines. The member also felt reassured after having received the vaccine that had been on hold.



HIV Prevention: PrEP Facts

JULY IS NATIONAL HIV AWARENESS MONTH

What is PrEP?

Pre-exposure prophylaxis (PrEP) is a safe and effective way to prevent the transmission of HIV in adherent at-risk adults.

U.S. Food and Drug Administration-approved HIV PrEP formulations include once-daily Descovy® (tenofovir AF-emtricitabine) and Truvada® (tenofovir DF-emtricitabine). The newer formulation, Descovy, reduces the risk of long-term renal and bone injury.

In 2018, Centers for Disease Control and Prevention (CDC) studies indicated only 18% of persons in the U.S. at risk of contracting HIV were prescribed PrEP.⁵

HIV disproportionately affects Black/African Americans and Hispanics/Latinos. Other risk factors for HIV include men who have sex with men (MSM), transgender women who have sex with men and people who inject drugs (PWID).⁶

Keep in mind:

- The 2017 U.S. Public Health Service HIV PrEP Clinical Practice Guidelines do not support on-demand PrEP dosing.⁵
- PrEP prescribed to HIV-negative patients as a 90-day supply facilitates adherence.
- In addition to baseline labs, monitoring for PrEP includes HIV testing every three months, pregnancy testing every three months, renal function labs every three to six months, and screening for sexually transmitted infections every three to six months.⁵
- HIV-negative persons diagnosed with chronic hepatitis B (HBV) mono-infection may safely take PrEP. However, discontinuation of PrEP in such persons may result in HBV reactivation and hepatitis flare-ups.⁵
- Perform HIV testing in persons who wish to discontinue PrEP and electronically document the reason for discontinuation.
- COVID-19 vaccination is recommended for all persons taking PrEP. There is a misconception that PrEP can prevent COVID-19 infection and/or facilitate recovery. However, there are no studies to support this assertion.

In 2018, CDC studies indicated only 18% of persons in the U.S. at risk of contracting HIV were prescribed PrEP.⁵

⁵Spach DH, Kalapila AG, and Farley J E. (2020, August 18). *Core Concepts - Preexposure Prophylaxis (PrEP) - Prevention of HIV - National HIV Curriculum*. National HIV Curriculum. <https://www.hiv.uw.edu/go/prevention/preexposure-prophylaxis-prep/core-concept/all#racial-gender-disparities-prep-use>.

⁶HIV.gov. Date last updated: May 27, 2020. "Who Is at Risk for HIV?" HIV.gov, 8 Apr. 2021, www.hiv.gov/hiv-basics/overview/about-hiv-and-aids/who-is-at-risk-for-hiv#:~:text=By%20race%2Fethnicity%2C%20Blacks%2F,significant%20risk%20for%20getting%20HIV.

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FIGHTING COVID-19

COVID-19 Vaccination Outreach

We've implemented an outreach plan to contact your patients with information about scheduling COVID-19 vaccine appointments.

Health Net outreach to your patients includes:

Method	Frequency
Text	A series of text messages, once every two weeks
Email	One email
Phone	Live calls by Health Net staff to educate and connect members to vaccine appointments
Interactive voice response	Recorded message when patients call the Health Net Member Services Department



CHWP'S PARTNERSHIP WITH CONSEJOSANO

Health Net has partnered with ConsejoSano to deploy culturally relevant two-way text messaging and live outbound phone calls in 27 different languages to high-risk members. These messages provided your patients with information about:

- COVID-19 vaccines and other COVID-related information on healthnet.com/COVID19.
- How to schedule a vaccine appointment through **myturn.ca.gov**, **pharmacies**, **local health departments** or **participating provider offices**.



ENGAGING Our COMMUNITIES

WE SUPPORT YOU, YOUR COMMUNITY AND YOUR PATIENTS!

Our partners know their communities best, which is why we work hand-in-hand with local partners – county agencies, community clinics, hospitals and our education and justice system – to transform communities by developing and funding localized programs and solutions that improve health one person at a time.

Read on to learn more!

STRATEGIC GIVING AND HEALTH EQUITY INNOVATION

COVID-19 Relief Resources in Northern California

To increase access to quality care for California's most vulnerable patients during the pandemic, CHWP awarded Ampla Health a \$70,000 grant to help enroll and educate residents in Medi-Cal managed care in Butte, Colusa, Glenn, Sutter, Tehama and Yuba counties. Ampla Health is one of 24 organizations statewide that received funding totaling \$1.95 million as part of CHWP's broader commitment to support communities during the national pandemic.

"With California Health & Wellness' support, Ampla Health is able to strengthen its efforts to reach at-risk members of our community," said Benjamin H. Flores, MPH, president and CEO of Ampla Health.

As one of the state's largest and most experienced managed care plans, CHWP is committed to ensuring underserved residents have access to quality care. By increasing Medi-Cal enrollment, education and retention support, providers and community organizations are able to better care for those most impacted by the ongoing pandemic.



Medi-Cal Providers Expand Telehealth Services Thanks to Grant

In response to COVID-19, Health Net awarded 138 grants, totaling \$13.4 million, to support the expansion of telehealth services for Medi-Cal providers statewide. The largest cash grant dedicated to this cause by a health plan in California, the funding helped build or expand telehealth practices, including live video visits, e-consultations and telepsychiatry, which emerged as key tools in providing safe access and continuity of care for patients at home during the pandemic.

The 138 grantees spanned California from the rural north to the urban south, and include independent provider practices, rural health centers, community clinics, Indian health centers and more – many of whom faced financial strain amid the pandemic. Nearly 20% of grantees reported having no existing telehealth services at the time of their application.

Local recipients of telehealth grants included:

- Ampla Health
- Barton Healthcare System
- Cares Community Health
- Chapa-De Indian Health Program
- El Dorado County Community Health
- Feather River Tribal Health
- Greenville Rancheria
- M A C T Health Board, Inc.
- Marshall Hospital Auxiliary
- Peach Tree Healthcare
- ResolutionCare, PC
- Rideout Memorial Hospital
- Sierra Family Medical Clinic
- WellSpace Health
- Western Sierra Medical Clinic

CHWP and Physicians for a Healthy California Launch Cultural Competence Education Series for Providers

With the largest cultural and linguistic team, and a workforce that lives in and mirrors our communities' diversity, CHWP is committed to matching and meeting our members' backgrounds, unique abilities and disabilities.

CHWP and Physicians for a Healthy California (PHC) have launched a comprehensive, seven-part education series for California providers focusing on how to deliver culturally competent care in diverse communities. The series will better equip providers to overcome health disparities.

"A key component to new care delivery models is the ability to engage and educate patients about their health status," **says Dr. Ramiro Zuniga, vice president, medical director.** "While doing this is challenging with all patients, for diverse patient populations it can be even more difficult due to language barriers, cultural differences in communication styles and other factors."

CHWP's Health Disparity team developed the provider education series. It will cover topics including:

- ✓ ACEs
- ✓ Childhood immunizations
- ✓ Women's preventive care
- ✓ Diabetes
- ✓ Developmental and physical disabilities
- ✓ BIPOC and LGBTQ health care



United Health Centers of the San Joaquin Valley Receives New Funding from Health Net

To increase access to quality care for California's most vulnerable patients during the pandemic, Health Net awarded United Health Centers of the San Joaquin Valley (United Health Centers) an \$80,000 grant to help enroll and educate Central Valley residents in Medi-Cal managed care.

Part of Health Net's broader commitment to support communities during the national pandemic, United Health Centers is one of 24 organizations statewide that received funding totaling \$1.95 million dedicated to keeping the safety net strong for those most at risk.

"As a Federally Qualified Health Center, improving the quality of life and making health care more accessible in the communities we serve is our core goal," said Colleen Curtis, president and CEO of United Health Centers

of the San Joaquin Valley. "We are grateful for Health Net's support, which will help us continue to provide accessible, comprehensive and quality health care to some of the most at-risk patients in the Central Valley with compassion and respect."

As California's longest serving and most experienced Medi-Cal partner, Health Net is committed to ensuring underserved residents have access to quality care. By increasing Medi-Cal enrollment, education and retention support, providers and community organizations are able to better care for those affected by the pandemic.

"This grant will help enroll new Medi-Cal recipients using culturally competent social media and grassroots outreach to ensure all eligible residents can access and receive quality care," said Tulare County Supervisor Eddie Valero.

"I commend Health Net's commitment to the health of our county by assisting vulnerable populations gain access and navigate the health care system."

Data shows that a large number of Californians who are eligible for Medi-Cal aren't applying for benefits. You wouldn't expect that in the midst of a pandemic," said Brian Ternan, president and CEO of Health Net of California and CHWP. "Our community partners will use these grants to find and enroll newly eligible people. With Medi-Cal coverage, California's most vulnerable populations can receive the quality health care they deserve."

Health Net Invests \$26 Million to Oversee, Monitor and Implement Encounter Data Improvement Efforts Across California

First-of-its-kind investment will standardize and enhance collection of patient data, provide insights on population health trends and increase quality of care.

In March, Health Net announced a \$26 million investment to improve the collection and reporting of patient encounter data — furthering its commitment and partnership with the state to reduce disparities and improve quality of care for vulnerable populations in California. With more than 13 million (nearly one in three) Californians currently enrolled in Medi-Cal, this initiative is a key to understanding how underserved communities are navigating and accessing care statewide.

Health Net has committed a total of \$50 million to fund a multi-year, multi-phased Encounter Data Improvement Program (EDIP). Envisioned and developed in collaboration with the Department of Managed Health Care, the program is designed to identify and overcome barriers to the timely submission of complete and accurate patient health data across business lines — with an initial focus on the state's Medi-Cal providers.

“To continue to improve the state's Medi-Cal delivery system and bridge the divide in access and quality of health care, we need accurate population health data and the insights that come with it,” said **Brian Ternan, president and CEO of Health Net and CHWP**. “Through our improvement program, Health Net has collaborated with numerous stakeholders — including regulators, providers and plans — to identify challenges to encounter data collection and inform real solutions. Establishing a new,

statewide entity to oversee how this crucial data is accumulated, reported and utilized arose as a clear recommendation we are proud to make a reality.”

Health Net has selected the Integrated Healthcare Association (IHA), a non-profit with more than 25 years of experience in health care and proven expertise in aligning the industry to create solutions for better care, to oversee, monitor and implement encounter data improvement efforts across California. IHA was selected after the issuance of a statewide RFP, securing a \$26 million grant out of Health Net's total \$50 million budget for this initiative — an unprecedented investment to tackle this system-wide challenge that has impacted providers, patients and plans.

“This investment in California's health care delivery system will lead to improvements in the overall quality of care and affordability of health care,” said **Mary Watanabe, director of the Department of Managed Health Care**. “Complete, timely and accurate encounter data is critical to assessing population health, ensuring health equity and ultimately to understanding health care costs. I am looking forward to seeing the real-world solutions brought on by this industry-led collaboration.”

“We are excited to collaborate with leaders from Health Net and other industry partners to improve the collection and utilization of encounter data across all lines of business, with

a specific emphasis on Medi-Cal,” said **Jeff Rideout, M.D., president and CEO of IHA**. “IHA's mission is exclusively about finding industry wide solutions to complex data problems that can't easily be solved by even the largest individual organizations. There is no question that solving the statewide encounter data challenges is a necessary condition to ensuring greater health equity and affordability in California.”

View the full press release on the Health Net website at www.healthnet.com/content/healthnet/en_us/news-center/news-releases/2021-03-10-encounter-data-improvement-program-improving-medi-cal-care-and-reducing-health-disparities.html.





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