

The Ventura County Health Care Plan (VCHCP) understands that providers often need to contact the Health Plan outside of regular business hours. VCHCP always has someone on-call to speak with you. For urgent prior authorizations, information on contracted tertiary hospitals, coordination of hospital-to-hospital transfers (including air transports) or other urgent Health Plan related matters, please contact VCHCP 24-hours per day, 7 days a week at (805) 981-5050 or toll free at (800) 600-8247 and our answering service will contact an on-call clinical staff member to help you.



WINTER ISSUE | DECEMBER 2022

CONTACT INFORMATION

Provider Services Email:

VCHCP.ProviderServices@ventura.org (Email is responded to Monday - Friday, 8:30 a.m. - 4:30 p.m.)

VENTURA COUNTY HEALTH CARE PLAN

24-hour Administrator access for emergency provider at: (805) 981-5050 or (800) 600-8247

REGULAR BUSINESS HOURS ARE:

Monday - Friday, 8:30 a.m. to 4:30 p.m.

- vchealthcareplan.org
- Phone: (805) 981-5050
- Toll-free: (800) 600-8247
- FAX: (805) 981-5051
- Language Line Services: Phone: (805) 981-5050

Toll-free: (800) 600-8247

- TDD to Voice: (800) 735-2929
- Voice to TDD: (800) 735-2922
- Pharmacy Help: (800) 811-0293 or express-scripts.com
- Behavioral Health/Life Strategies: (24-hour assistance)

(800) 851-7407 or

liveandworkwell.com

- Nurse Advice Line: (800) 334-9023
- Teladoc: (800) 835-2362

VCHCP UTILIZATION **MANAGEMENT STAFF**

Regular Business Hours are: Monday - Friday, 8:30 a.m. to 4:30 p.m.

• Phone: (805) 981-5060

GRAPHIC DESIGN & PRINTING:

GSA Business Support/Creative Services

contents

3
3
3
4
4
4
5
5
5
5
6
6
7
7
7
8
9
9
.10
.10
.11
.11
.11
12
13
14
16
16
17
19

Provider Directory UPDATED



The printed Provider Directory is available on our website. Please keep in mind that the Provider Search Engine is still your best option as it is updated on a weekly basis.

To request a copy of the Provider Directory, please email Provider Services at <u>VCHCP</u>. <u>Provider Services@ventura.org</u> or visit the Plan's website at: <u>vchealthcareplan.org</u>.

CLICK ON: Find a ProviderCLICK ON: PDF Version of the Directory

Patient Emergency & Provider AFTER HOURS CONTACT

Ventura County Medical Center Emergency Room

300 Hillmont Ave., Ventura, CA 93003 (805) 652-6165 or (805) 652-6000

Santa Paula Hospital

A Campus of Ventura County Medical Center 825 N. 10th Street Santa Paula, CA 93060 (805) 933-8632 or (805) 933-8600

Ventura County Health Care Plan

on call Administrator available 24 hours per day for emergency Providers (805) 981-5050 or (800) 600-8247

THE NURSE ADVICE LINE I-800-334-9023

Available 24 hours a day, 7 days a week for Member questions regarding their medical status, about the health plan processes, or just general medical information.

There is also a link on the member website: wchealthcareplan.org/members/memberlndex.aspx that will take Members to a secured email where they may send an email directly to the advice line. The nurse advice line will respond within 24 hours.

To speak with VCHCP UM Staff, please call the Ventura County Health Care Plan at the numbers below:

QUESTIONS? CONTACT US: MONDAY - FRIDAY, 8:30 a.m. to 4:30 p.m.

Phone: **(805) 981-5050** or toll-free **(800) 600-8247** FAX **(805) 981-5051**, <u>vchealthcareplan.org</u>
Phone: **(805) 981-5050** or toll-free **(800) 600-8247**

FAX (805) 981-5051, vchealthcareplan.org
TDD to Voice: (800) 735-2929 Voice to TDD: (800) 735-2922
Ventura County Health Care Plan 24-hour Administrator
access for emergency providers: (805) 981-5050 or
(800) 600-8247

Language Assistance - Language Line Services: Phone (805) 981-5050 or toll-free (800) 600-8247

TIMELY ACCESS REQUIREMENTS

VCHCP adheres to patient care access and availability standards as required by the Department of Managed Health Care (DMHC). The DMHC implemented these standards to ensure that members can get an appointment for care on a timely basis, can reach a provider over the phone and can access interpreter services, if needed. Contracted providers are expected to comply with these appointments, telephone access, practitioner availability and linguistic service standards. Standards include:

Type of Care	Wait Time or Availability
Emergency Services	Immediately, 24 hours a day, 7 days a week
Urgent Need - No Prior Authorization Required	Within 48 hours
Urgent Need - Requires Prior Authorization	Within 96 hours
Primary Care	Within 10 business days
Specialty Care	Within 15 business days
Ancillary services for diagnosis or treatment	Within 15 business days
Mental Health	Within 10 business days
Waiting time in provider office (to speak with a triage nurse)	30 Minutes
Ensure wait time for enrollees to speak with a qualified representative during business hours	Not to exceed 10 minutes



A sudden trip to the Emergency Room (ER)

can be difficult and often times results in a change in medication or treatment for your patients. After a visit to the ER, it is very important that members make an appointment to see their Primary Care Provider (PCP) and/or specialist when applicable, as soon as possible, or within 30 days. This visit is to update the PCP on what occurred that required the member to seek emergency treatment, update their medication routine, and to be referred for additional care if needed. Establishing and

keeping a good relationship between the PCP and patient is vital to their health and your ability to provide care to patients. If members find that making an appointment with their PCP or specialist after an ER visit is difficult and they can't be seen within 30 days, or if their ER visit was due to the inability to be seen by their PCP, they are asked to notify the Ventura County Health Care Plan Member Services Department at (805) 981-5050. Members are mailed Postcard reminders regarding appropriate use of ER services and the importance of following up with their PCP after the ER visit for continuity of care. The members' ability to access health care is important to us.

Electronic Claim Submission



PROVIDERS: You can transmit your CMS-1500 and UB-04 claims electronically to Ventura County Health Care Plan through Office Ally.

Office Ally offers the following services and benefits to Providers: No monthly fees, use your existing Practice Management Software, free set-up and training, 24/7 Customer Support, and other clearinghouse services.

Just think....no need for the "paper claim".

Within 24 hours, your File Summary is ready. This report will list the status of all your claims received by Office Ally. This acts as your receipt that your claims have been entered into their system.

The File Summary reports all claims you've sent and are processed correctly; as well as keeping track of rejected claims that you may need to resubmit for processing.

Ready to make a change for the better???

CONTACT OFFICE ALLY AT: (360) 975-7000 OR

officeally.com

You can also reach out to us at

VCHCP.ProviderServices@ventura.org for a copy of the

Provider Welcome Packet.

Dedicated Provider Services/Provider Relations Team

Please reach out to us if you need assistance with:

UPDATING OFFICE INFORMATION

- Adding/terminating a provider or location
- Open/Closed to new members
- Contact information
- Address change
- Tax ID change
- NPI change

PROVIDER DISPUTES PROVIDER MATERIALS

QUESTIONS?

Call: (805) 981-5050

or email:

VCHCP.ProviderServices@ventura.org

BREAST AND COLORECTAL

Cancer Screenings

EARLY DETECTION IS THE BEST PRACTICE AGAINST CANCER, ESPECIALLY COLORECTAL AND BREAST CANCER.

In an effort to increase awareness, VCHCP has sent postcards to all members who are due for their breast cancer or colorectal cancer screenings. The postcards were mailed in May and October. Our goal is to provide education to our members and encourage them to complete these important screenings. As a provider, you may receive telephone calls or have members bringing these postcards to their office visit. Please use this postcard as a tool to provide education and support.

If you have any questions or concerns, please contact Utilization
Management at (805) 981-5060

Did you know?

DIRECT SPECIALTY REFERRAL

- **Did you know** that the direct specialty referral allows contracted Primary Care Physicians to directly refer members to certain contracted specialty providers for an initial consult and appropriate follow up visits without requiring a Treatment Authorization Request (TAR) submission and prior authorization from the Health Plan?
- **Did you know** that specialists can perform certain procedures during the initial consultation and follow up visits without prior authorization from the Health Plan? Also, any follow up visits will not require prior authorization as long as the member has seen the specialist within a rolling year and the visit is for the original problem.

45 DAY PEND PROCESS

- Did you know that Utilization Management Department's Intake sends pend notes to requestor via Cerner (if VCMC provider) or place phone calls to requestor (if Non-VCMC provider)?
- Did you know that the Plan's Medical Director reviews all pend and denial letters/determinations for appropriateness prior to sending to providers?

MEDICAL POLICIES

 Did you know that the Plan's Medical Director continues to review existing medical policies and create new medical policies, if needed?

CLINICAL PRACTICE

Guidelines

VCHCP encourages its providers to practice evidence-based medicine. VCHCP has links to clinical practice guidelines available to address conditions frequently seen in patients at your practice. All clinical practice guidelines included have been reviewed and approved by the VCHCP Quality Assurance Committee.

Recommended Clinical Practice Guidelines and the Link for providers:

- Clinical Practice Guidelines
- Diabetes and Asthma Clinical Practice Guidelines
- Preventive Clinical Practice Guidelines
- Behavioral Health Best Practice Guidelines
- Major Depressive Disorder

Link:

vchealthcare plan.org/providers/medicalPolicies.aspx

You may obtain hard copies at no cost of the above listed Clinical Practice Guidelines by calling VCHCP at (805) 981-5050

Language Assistance Services

Good communication between patients and providers is important, and VCHCP has processes in place to ensure language assistance services are available to all VCHCP members.

Providers are expected to make sure that patient needs are met pertaining to language interpretation for non-English proficient patients. If the doctor and/or staff members are not medically fluent in the patient's preferred language, the physician's office should contact VCHCP in advance of such members' appointments to ensure that an interpreter is arranged for such members. VCHCP will then schedule an interpreter for the appointment.

For complete details on VCHCP's language assistant services, please refer to the Provider Operations Manual and the Language Assistance Program Description, which are available on the VCHCP website: vchealthcareplan.org

The 2022 Provider Satisfaction Survey was completed:

THANK YOU to the 74 respondents!

We at VCHCP heard your feedback and we have been working closely with Optum Behavioral Health (BH) to improve Medical and Behavioral Health Providers' communication and coordination of care.

n collaboration with Optum Behavioral Health, we have implemented actions to improve provider satisfaction on the timeliness of feedback/reports from behavioral health providers to the Plan's Primary Care Physicians (PCPs). These actions include but not limited to the following:

- Continued education of Behavioral Health Providers regarding coordination of care with primary care physicians to encourage members to complete the Release of Information (ROI) form. This will allow medical records to be shared with primary care physicians/medical providers.
- Shared members' primary care physicians/medical providers contact information to high volume mental health providers to encourage communication.
- Provided Medical-BH Toolkit website to primary care physicians/medical providers. This website contains BH screening tools and resources to help primary care physicians/medical providers identify tools that best fit their practice and patients.
- Encouraged members with mental health or substance abuse disorder diagnoses to follow up with their BH providers when discharged from the hospital or emergency room.
- Shared educational BH resources with primary care physicians/medical providers and behavioral care providers to encourage coordination of care:
 - o Optum Network Notes regarding the Important Information about Coordinating Care
 - o On-Demand Webcasts regarding Follow-Up after higher levels of care
 - o PCP/Pediatric Provider Questionnaire Surveys regarding Behavioral Health Treatment and Referrals
 - o Education on how to access behavioral health and substance abuse resources including Optum BH intake and referrals
 - o Member and Provider Newsletter articles on coordination of care

Our goal is to continue to improve communication and coordination between PCPs and Behavioral Health Providers. It is our hope that all these interventions will help to meet our goal. As a Health Plan, we are working diligently to improve PCP and BH communication for the satisfaction of providers and wellness of our members.

If you have any suggestions or comments to make this process better, please call our Medical Director at (805) 981-5060.

VCHCP 2022 AFFIRMATIVE STATEMENT REGARDING Utilization Related to Incentive*

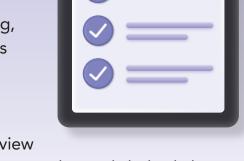
- UM decision making is based only on appropriateness of care and service and existence of coverage.
- The organization does not specifically reward practitioners or other individuals for issuing denials of coverage or care.
- Financial incentives for UM decision makers do not encourage decisions that may result in underutilization.
- VCHCP does not use incentives to encourage barriers to care and service.

- VCHCP does not make hiring, promotion or termination decisions based upon the likelihood or perceived likelihood that an individual will support or tend to support the denial of benefits.
- * Includes the following associates: medical and clinical directors, physicians, UM Directors and Managers, licensed UM staff including management personnel who supervise clinical staff and any Associate in any working capacity that may come in contact with members during their care continuum.

2021 Quality Improvement

Program Evaluation

Each year, the Health Plan evaluates its success in accomplishing identified goals for the prior year, including, but not limited to, its ability to meet regulatory standards specified by the Department of Managed Health Care (DMHC). For 2021, the Plan is pleased to share that it succeeded in achieving multiple identified goals despite the challenges that were faced during the pandemic. To view



the summary of our Quality Improvement Program Evaluation, please click this link: vchealthcareplan.org/members/docs/AnnualQualityAssuranceProgramOverview.pdf

Referral & Prior Authorization Process & Services Requiring Prior Authorization

Providers have the ability to review how and when to obtain referrals and authorization for specific services. They are directed to visit our website at vchealthcareplan.org, click on "Provider Connection", and then click on "Health Services Approval Process". This area offers links for providers to obtain specific information on the Plan's prior authorization process, what services require prior authorization, timelines, and direct referral information.

Link to the Health Services Approval Process: vchealthcareplan.org/providers/hsApprovalProcess.aspx

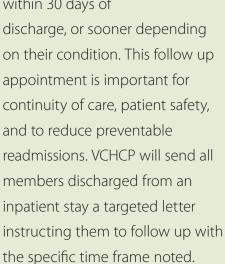


QUESTIONS? Call Member Services at (805) 981-5050

POST HOSPITAL DISCHARGE

Continuity of Care

When members are discharged from an inpatient hospital stay, they should follow up with their PCP or specialist within 30 days of



2021 HEDIS RESULTS & INTERVENTIONS

VCHCP continues to maintain high standards in Healthcare Effectiveness Data Information Set (HEDIS) Measures.

Examples of some of the measures include preventive screening for breast cancer, colorectal cancer, and cervical cancer; appropriate childhood immunizations; as well as decreasing or preventing complications in diseases such as diabetes and asthma. When these measures are met by members, disease and complications decrease.

The COVID-19 pandemic had an impact on VCHCP's 2021 HEDIS rates. In March 2020, several countywide restrictions including stay at home orders were in effect. It took time for members and providers to fully transition to telehealth and there remained a subset of services that required in person visits. In addition, reduced visits for preventive care due to many contributing factors such as stay at home orders, social distancing, discouragement of care for those without urgent need, reduced income, increased anxiety and depression and postponement of elective services.

2021 Accomplishments

- Improvement in weight assessment (documentation of body mass index), childhood immunizations, asthma medication ratio and timely postpartum care.
- VCHCP has a Diabetes Disease Management Program where our nurses perform health coaching calls when member risk is moderate and high. This means that your HgbA1c lab result is 8.0% and above. Our goal is to improve your health and it is important to call us back when our Health Coaching Nurse calls you because it is making a significant impact in your compliance with getting your HgbA1c testing done and decreasing your HgbA1c level and risk.

2022 Goals

- Breast cancer screening: All women aged 50-74 should receive a screening mammogram every two years (except for those with a history of mastectomy).
- Colorectal cancer screening: All men and women aged 50-75 should receive colorectal cancer screening. The frequency of the screening depends on the type of screening performed. For example, a colonoscopy every 10 years, or a sigmoidoscopy every 5 years, or a Fecal Occult Blood Test (stool test) annually.
- Postpartum Care: A new mom should have a postpartum visit within 7-84 days of delivery.
- Controlling High Blood Pressure: All members who have been diagnosed with hypertension should strive to have their blood pressure remain below 140/90.

• Continue to improve Comprehensive Diabetes Care.

2022 Areas for Improvement

- Breast Cancer Screening
- Colorectal Cancer Screening
- Prenatal and Postpartum Care
- Comprehensive Diabetes Care

2022 Planned Interventions include but not limited to the following:

- Continue outreach to you and to your doctor when you need preventive health screenings.
- Postcard reminder to members in need of breast cancer screenings twice a year.
- Health coaching calls to diabetics including mailed information and resources along with access to Health Coach Nurses.
- Follow up care letter reminder to all moms who delivered viable babies.
- Birthday Card with Care Gap information will be sent to you on your birthday month.

This is just a glance at the interventions continuously being performed by the VCHCP HEDIS team. When members fulfill these HEDIS measures, they are partnering with their Primary Care Physicians to improve their health or maintain good health. If you have any questions about the services, you may be in need of, please contact your primary care physician. If you have questions about HEDIS, please contact VCHCP at (805) 981 5060.

Helpful Documentation Tips for PCPs

Overuse/ Appropriateness of HEDIS Measures

URI - Appropriate Treatment for Upper Respiratory Infection

HEDIS MEASURE DEFINITION: Members age 3 months and older with a diagnosis of upper respiratory infection (URI) and that did NOT result in an antibiotic dispensing event.

What You Can Do: Do not prescribe antibiotics for URI treatment. Document and submit appropriate diagnosis on claims if more than one diagnosis is appropriate. A competing diagnosis of pharyngitis or other infection on the same date or 3 days after will exclude the member.

CWP - Appropriate Testing for Pharyngitis

HEDIS MEASURE DEFINITION: Members age 3 months and older with a diagnosis of acute bronchitis/bronchiolitis that did not results in an antibiotic dispensing event.

This measure used to be for adults only and now includes everyone ages 3 months and older.

What You Can Do: Before prescribing an antibiotic for a diagnosis of pharyngitis, perform a group A strep test. Document and submit claims for all appropriate diagnoses established at the visit Submit claim for in-office rapid strep test There are numerous comorbid conditions and competing diagnoses exclusions for this measure.

AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis

HEDIS MEASURE DEFINITION: Members age 3 years and older where the member was diagnosed with pharyngitis, dispense an antibiotic and received a group A strep test for the episode.

This measure used to be for children only and now includes everyone age 3 years and older.

What You Can Do: Treat acute bronchitis primarily with home treatments to relieve symptoms. Antibiotics don't usually help (viral). Of course, some patients have comorbid conditions and require antibiotics. These patients would be excluded from this measure reporting. A diagnosis of pharyngitis on the same day or in the 3 days after also exclude this member. Educate patients about overuse of antibiotics and resistance.

LBP - Use of Imaging Studies for Low Back Pain

HEDIS MEASURE DEFINITION: Adults age 18-64 years old with a primary diagnosis of low back pain, who did not have an imaging study (plain x-ray, MRI or CT scan) within 28 days of the diagnosis.

What You Can Do: Occasional uncomplicated low back pain in adults often resolves within the first 28 days. Imaging before 28 days is usually unnecessary. Exclusions to this measure—a diagnosis of HIV, major organ transplant or cancer any- time in the patients history - Diagnosis of trauma during the 3 months prior to dx of back pain - IV drug use, spinal infection or neurological impairment during the 12 months prior to the low back pain diagnosis. Above includes through 28 days after LBP DX 90 consecutive days of corticosteroid treatment any time 12 months prior to the dx of low back pain.

HEDIS
Cheat
Sheet
& Behavioral
Health HEDIS
Measures for

Primary Care

As a way of measuring our quality as required by our regulatory agency, the Department of Managed Health Care (DMHC), the Plan Measures Health Effectiveness Data Information Set (HEDIS) rates.

VCHCP continues to work diligently with members and providers to improve care and subsequent HEDIS rates. The HEDIS Cheat Sheet is a tool you can use throughout 2022 to help you navigate the HEDIS requirements, which can change on an annual basis. This document includes HEDIS measure descriptions, appropriate codes, available exclusions, and applicable tips. Please take a look at all measures on this document for the 2022 year changes. You can access this tool by visiting:

vchealthcareplan.org/providers/docs/HEDISCheatSheet.pdf

In addition, HEDIS measures related to behavioral health disorders commonly identified in primary care are posted on our website can be accessed by visiting:

vchealthcareplan.org/providers/docs/HEDISMeasuresSummaryForPrimaryCare.pdf

If you have any questions or would like more of this tool, please do not hesitate to contact the **VCHCP QA Department: 805-981-5060**.

HEDIS Measure HIGHLIGHT

Hemoglobin A1c Control for Patients with **Diabetes (HBD)**

Comprehensive Diabetes Care (CDC) CDC is now retired and has been replaced by the following 3 new measures:

- Hemoglobin A1c Control for Patients with Diabetes (HBD)
- Blood Pressure Control for Patients with Diabetes (BPD)
 - ♦ Same changes as the controlling BP measure
- Eye Exam for Patients with Diabetes (EED) Retired HbA1c testing and nephropathy.

How you can help:

- Order HbA1c lab prior to patient appointment.
- For point of care testing, document the date of the in-office test with the result.
- To increase compliance, consider ordering the HbA1c or glucose test as an annual standing order.
- Routinely refer members with type 1 or type 2 diabetes to a participating lab for their eGFR and uACR.
- Follow up with patients to discuss their lab results.
- Educate the patient on how diabetes can affect the kidneys and provide tips on preventing damage to their kidneys.
- Controlling High Blood Pressure Medication Adherence by taking prescribed meds that protects the kidney functionality (ACE inhibitors or ARBs).
- Offer education on harmful medications to the kidneys (NSAIDS such as naproxen or ibuprofen).
- Suggest a diet of lower protein and limited salt intake Coordinate patient care with specialists (endocrinologist or nephrologist) as needed.
- Utilize the HEDIS Cheat Sheet to represent care rendered which is posted online at vchealthcareplan.org/providers/docs/ HEDISCheatSheet.pdf
- Refer patients to community resources that provide diabetes education and support. You may also contact our Diabetes Disease Management Program Case Manager at (805) 981-5060.

Disease Management & Case Management VCHCP continues to offer free,

VCHCP makes a continuous effort to improve the quality of services that we deliver.

comprehensive disease management and case management programs for your patients.

One of the ways we strive to accomplish this is through our case management programs, into which members are enrolled free of charge. The Case Management (CM) Program is to help our members who have complex needs by ensuring that our members work closely with you, their doctors to plan their care. The goals of Case Management are to help members get to their best health possible in the right setting; coordinate and manage healthcare resources; support the treatment plan ordered by the doctor; and to take action to improve member overall quality of life and health outcomes. As a member in Case Management, members with complicated health care issues and their family have a truly coordinated plan of care.

We also offer a **Disease Management (DM) Program** to benefit members with diabetes and asthma. The Disease Management Program coordinates health care interventions and communications for members with conditions where member self-care can really improve their conditions. The Disease Management team works with doctors and licensed professionals to improve these chronic conditions, so members obtain the best possible quality of life and functioning. Included in the Disease Management Program are mailed educational materials, provider education on evidence-based clinical guidelines, member education over the phone, and care coordination. VCHCP has a variety of materials about diabetes and asthma that they give to members to help members better understand their condition and manage their chronic diseases.

Both valuable programs are coordinated by highly skilled, compassionate registered nurses who personalize and tailor their services to benefit each individual person. Our nurses work in tandem with the physician to reinforce and strengthen the member's understanding and management of their medical condition(s).

You may refer patients to VCHCP Case Management and Disease Management Programs by calling (805) 981-5060. Members may also self refer online by visiting our website at vchealthcareplan.org and clicking on "Request Case Management or Disease Management" link. If you would like to speak directly with a nurse, please call (805) 981-5060 and ask for a Case Management Nurse.



OPTUM PROVIDER EXPRESS

OPTUM QI Summary

OPTUMHEALTH QUALITY PROGRAM

Ventura County Health Care Plan contracts with OptumHealth Behavioral Solutions (Life Strategies) for Mental/Behavioral health and substance abuse services. OptumHealth has a Quality Improvement Program (QI) that is reviewed annually. If you would like to obtain a summary of the progress OptumHealth has made in meeting program goals, please visit OptumHealth's online newsletter at liveandworkwell.com/newsletter/ohwellness.pdf

or call OptumHealth directly at (800) 851-7407 and ask for a paper copy of the QI program description.

Medical Behavioral Integration:

What's new?

BEHAVIORAL HEALTH TOOLKIT FOR MEDICAL PROVIDERS

Newly launched: online Behavioral Health Toolkit for Medical Providers:

<u>providerexpress.com/content/ope-provexpr/us/en/clinical-resources/PCP-Tool-Kit.html</u>

- Relevant, organized and easy to use
- Screening tools for: Substance Use Disorder (SUD) — Adult/Youth and Mental Health — Adult/Youth
- Resources: Assessment, Referrals, Behavioral health care guidelines
- Links to industry resources such as Screening, Brief Intervention, Referral to Treatment (SBIRT)

VCHCP Member Behavioral Health and Substance Abuse RESOURCES

Substance Use Disorder Helpline 1-855-780-5955

A 24/7 helpline for VCHCP Providers and Patients to:

- Identify local MAT and behavioral health treatment providers and provide targeted referrals for evidence-based care
- Educate members/families about substance use
- Assist in finding community support services
- Assign a care advocate to provide ongoing support for up to 6 months, when appropriate

Member Website and Provider Directory

LiveandWorkWell.com

Optum Intake and Care Management For Intake and Referrals

(800) 851-7407

Optum Behavioral Health Toolkit for Medical Providers

These are one-page documents that provide best practice information in support of Optum's HEDIS® measures. These pages contain lots of information about treating behavioral health conditions in a primary care setting.

EXAMPLE OF MATERIALS AVAILABLE INCLUDES:

- Alcohol and Other Drug Dependence: Initiation and Engagement in Treatment
- Antidepressant Medication Management
- Best Practices for Children and Adolescents on Antipsychotic Medications
- Follow-Up Care for Children Prescribed ADHD Medications
- Metabolic Screening for Children and Adolescents on Antipsychotic
- Use of Multiple Concurrent Antipsychotic Medications in Children and Adolescents

Resources are available via this link:

<u>providerexpress.com/content/ope-provexpr/us/en/clinical-resources/PCP-Tool-Kit.html</u>



Follow-Up Care After Discharge

Follow-up treatment must occur within 7 days* after discharge from a higher level of care.

Source: National Committee for Quality Assurance 2021 HEDIS Specifications, see NQF-Endorsed Measures at www.ncqa.org *The day of discharge is Day Zero

Helping Patients Get the Care They Need Within 7 Days After Discharge

If any of your patients have recently been discharged from an Emergency Department or an inpatient hospital stay with a substance use or mental health disorder, you play an important role in ensuring that they receive appropriate follow-up care after discharge.

Virtual visits are an effective way to provide care within 7 days after discharge. Visit our provider website at the following link for more information.

Become a Virtual Visit
Telemental Health Provider

"Lack of timely follow-up can result in negative outcomes, such as continued substance use, relapse, high utilization of intensive care services and mortality.*"

Resources to Assist You and Your Patients with Follow-up Care After Discharge

- ProviderExpress.com provides educational materials, screening tools, and assessments
- <u>Provider Express Clinician Center</u> provides resources for your patients on mental health, substance use, and crisis support
- <u>Recovery and Resiliency Toolkit</u> helps determine personal strengths and facilitates recovery & wellness planning
- Medication Assisted Treatment (MAT) resources

Nothing herein is intended to modify the Provider Agreement or otherwise dictate MH/SA services provided by a provider or otherwise diminish a provider's obligation to provide services To members in accordance with the applicable standard of care.

NOTE: This information is provided by Optum Quality Management Department. If you would like to be removed from this distribution or if you have any questions or feedback please contact us at: qmi_emailblast_mail@optum.com (email). Please include the email address you would like to have removed when contacting us.

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United Behavioral Health and United Behavioral Health of New York, I.P.A., Inc. operating under the brand Optum U.S. Behavioral Health Plan, California doing business as OptumHealth Behavioral Solutions of California

^{*} According to the National Committee for Quality Assurance (NCQA).



ADHD Screening and Follow-up Care for Children



We appreciate your taking an active role in screening children with symptoms of attention deficit / hyperactivity disorder (ADHD).

The American Academy for Child and Adolescent Psychiatry and the American Psychiatric Association affirm thorough assessment is needed to rule out other conditions including learning disabilities, depression or anxiety disorders that mimic ADHD.

How You Can Help

Prior to prescribing medications, screen patients for ADHD. If medication is prescribed, be sure to:

- Schedule a follow-up appointment with your patient within 30 days of writing the prescription
- Schedule at least two more followup appointments over the next nine months to make sure the dosage is effective and to assess for side effects

Refer to a Mental Health Professional

In conjunction with medication, Psychosocial treatment approaches are also recommended. They include cognitive-behavioral therapy, social skills training, parent education and modifications to the child's education program. (AACAP) You can request coordination of care and referrals for members by calling the number on the back of the member's health plan ID card or searching liveandworkwell.com.

Recommended screening tools include:

- <u>Vanderbilt Scale</u> providerexpress.com > Clinical Resources > Attention Deficit/Hyperactivity Disorder
- Resources from the Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD) organization – CHADD.org > Understanding ADHD > For Professionals > For Healthcare Professionals > Clinical Practice Tools > Evaluation and Assessment Tools

Most of these tools also allow parents and teachers to provide feedback.

Resources

- More tools and information about behavioral health issues are available on providerexpress.com > Clinical Resources > Behavioral Health Toolkit for Medical Providers.
- Patient education information is available on <u>liveandworkwell.com</u> using access code "clinician." See "Mind & Body" at the top, scroll down to find the links to topics.

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United Behavioral Health and United Behavioral Health of New York, I.P.A., Inc. operating under the brand Optum U.S. Behavioral Health Plan, California doing business as OptumHealth Behavioral Solutions of California

Pharmacy Updates

The following is a list of additions and deletions for the Ventura County Health Care Plan's formulary recently approved by the Plan's Pharmacy & Therapeutics Committee. Additional information regarding the National Preferred Formulary is available thru Express Scripts (ESI).

Note: The Plan's Drug Policies, updated Step Therapy and Drug Quantity Limits can also be accessed at: vchealthcareplan.org/members/programs/countyEmployees.aspx



Formulary Additions: 3Q-2022

NEW CENERICS

NEW GENERICS	
Brand Name for First Generic	Chemical (HICL) Name
ALIMTA	PEMETREXED DISODIUM
BIDIL	ISOSORBIDE DINIT/HYDRALAZINE
CHANTIX	VARENICLINE TARTRATE
DAYTRANA	METHYLPHENIDATE
ESBRIET	PIRFENIDONE
NALFON	FENOPROFEN CALCIUM
NEXAVAR	SORAFENIB TOSYLATE
PEMETREXED DISODIUM	PEMETREXED DISODIUM
PENNSAID	DICLOFENAC SODIUM
PENTASA	MESALAMINE
PRADAXA	DABIGATRAN ETEXILATE MESYLATE
REVLIMID	LENALIDOMIDE
SSKI	POTASSIUM IODIDE
TARGRETIN	BEXAROTENE
TOVIAZ	FESOTERODINE FUMARATE
VIIBRYD	VILAZODONE HCL

LINE EXTENSIONS - NEW DOSAGE FORMS/STRENGTHS

LACOSAMIDE

Review Comments	Chemical (HICL) Name
New Dose Form	ACALABRUTINIB MALEATE
New Strength; New Dose Form	AMPHETAMINE
New Brand	FLASH GLUCOSE SENSOR
New Strength	MEPOLIZUMAB
New Strength; New Dose Form; New Rte of Admin	RISANKIZUMAB-RZAA
New Strength	TICK-BORNE ENCEPHALITIS VACCIN

NEW AND EXISTING BRANDS/CHEMICALS

Review Comments	Chemical (HICL) Name
New Strength	BORTEZOMIB
New Chemical Entity/Combination; New Brand	MAVACAMTEN
ACA Update	DIAPHRAGMS, CONTOURED
Contract Update	BOLUS INSULIN PUMP, 200 UNIT
Existing Product Review	DESMOPRESSIN ACETATE
ACA Update	ULIPRISTAL ACETATE
New Topic	EUA PATIENT ASSESSMENT
Covid Update	TIXAGEVIMAB/CILGAVIMAB
ACA Update	COPPER
New Chemical Entity/Combination; New Brand	LU-177 VIPIVOTIDE TETRAXETAN
New Brand; New Chemical Entity/ Combination	VONJO 100 MG CAPSULE
New Brand; New Strength	MEASLES,MUMPS,RUBELLA VACC/PF
Existing Product Review	FACTOR IX CPLX(PCC)NO4,3FACTOR
New Brand; New Strength; New Dose Form	EDARAVONE
New Brand	TREPROSTINIL
New Brand; New Chemical Entity/ Combination	GANAXOLONE

Formulary Removals: 3Q-2022

MULTISOURCE BRAND REMOVALS

Review Comments	Chemical (HICL) Name	NPF Preferred Alternative
MSB Removals	BETAINE	betaine anhydrous
MSB Removals	PIRFENIDONE	pirfenidone
MSB Removals	SORAFENIB TOSYLATE	sorafenib tosylate
MSB Removals	MESALAMINE	mesalamine er
MSB Removals	BEXAROTENE	bexarotene gel
MSB Removals	FESOTERODINE FUMARATE	fesoterodine fumarate er
MSB Removals	BORTEZOMIB	bortezomib (generic)
MSB Removals	LACOSAMIDE	lacosamide

VIMPAT

Pharmacy Updates

Formulary Removals: 3Q-2022

EXCLUSION LIST ADDITIONS: 30-2022

Review Comments	Chemical (HICL) Name	NPF Preferred Alternative
New Brand; New Chemical Entity/Combination	MISCELLANEOUS ANTINEOPLASTIC DRUGS	ZIRABEV
New Brand; New Chemical Entity/Combination	VUTRISIRAN SODIUM	
New Brand; Re-introduced	DOLASETRON MESYLATE	granisitron (oral), ondansetron (oral)
New Brand; New Dose Form	RANOLAZINE	ranolazine er
New Brand; New Chemical Entity/Combination	RANIBIZUMAB-NUNA	EYLEA
New Strength	DOXYCYCLINE HYCLATE	doxycycline hyclate, doxycycline monohydrate
New Brand	FLUTICASONE PROPIONATE	ARNUITY ELLIPTA, ASMANEX HFA, ASMANEX TWISTHALER, FLOVENT DISKUS, FLOVENT HFA, QVAR REDIHALER
New Brand	FLUTICASONE/VILANTEROL	fluticasone-salmeterol, wixela inhub, ADVAIR HFA, BREO ELLIPTA, DULERA, SYMBICORT
New Brand	INSULIN GLARGINE, HUM. REC. ANLOG	SEMGLEE (YFGN)
New Brand	INSULIN GLARGINE, HUM. REC. ANLOG	SEMGLEE (YFGN) PEN
New Brand	LEVAMLODIPINE MALEATE	amlodipine besylate,felodipine er,nifedipine er,nisoldipine
New Brand; New Dose Form	BACLOFEN	baclofen (tablets)
New Strength; New Dose Form	MELOXICAM	ibuprofen suspension, naproxen suspension
New Strength	METFORMIN HCL	metformin hcl (tablet, generic)
New Brand; New Strength; New Dose Form; New Indication	AMLODIPINE BESYLATE	amlodipine tablets
New Strength	BARICITINIB	betamethasone valerate, clobetasol emollient, cyclosporine, dexamethasone, fluocinonide, methotrexate, prednisone
New Brand	BLOOD-GLUCOSE METER	FREESTYLE FREEDOM, FREESTYLE INSULINX, FREESTYLE LITE METER, PRECISION XTRA, ONE TOUCH ULTRAMINI, ONE TOUCH VERIO, ONE TOUCH VERIO FLEX
New Brand; New Chemical Entity/Combination	DARIDOREXANT HCL	doxepin tablets, eszopiclone, ramelton, zaleplon, zolpidem, zolpidem er
New Strength	SULFACETAMIDE SODIUM/SULFUR	sulfacetamide- sulfur (generic)
Line Extension	OCULAR IMPLANT FOR RANIBIZUMAB	
New Brand	HYALURONATE SODIUM	EUFLEXXA,MONOVISC,ORTHOVISC
New Brand	TESTOSTERONE UNDECANOATE	testosterone (topical, generic),ANDRODERM
New Brand; New Chemical Entity/Combination	VENLAFAXINE BESYLATE	desvenlafaxine succinate er, duloxetine hcl, venlafaxine hcl er, FETZIMA
New Brand	CYCLOSPORINE	azelastine, bepotastine, cromolyn, epinastine, olopatadine

EXCLUSION LIST REMOVALS: 30-2022

Review Comments	Product Name	NPF Preferred Alternative
Exclusion List Update- Product is obsolete	AMPHETAMINE	dextroamphetamine sulfater er, dextroamphetamine-amphet er, dexmethylphenidate hcl er, methylphenidate hcl er, methylphenidate hcl, cd, DYANAVEL XR, MYDAYIS, VYVANSE
Contract Update	IMMUN GLOB G(IGG)/PRO/IGA 0-50	XEMBIFY
Contract Update	OCTREOTIDE ACETATE	SOMATULINE DEPOT

COVID-19 MEDICALLY NECESSARY THERAPEUTICS

There are treatments that can keep COVID-19 symptoms from getting worse.

What You Need to Know

- If a patient test positive for COVID-19 and is more likely to get very sick, treatments are available that can reduce the chances of hospitalization and death.
- The FDA has authorized certain antiviral. medications and monoclonal antibodies to treat mild to moderate COVID-19 in people who are more likely to get very sick.
- Treatment must be started within days after the first development of symptoms to be effective.
- Learn more about COVID-19 therapeutics at venturacountyrecovers.org/therapeutics/.

Learn about:

- Possible treatment options
- Oral antivirals
- Monoclonal antibodies
- Other resources and treatment locations

Ventura County Health Care Plan does not require a prior authorization for COVID-19 medically necessary therapeutics.



2022 Provider Satisfaction WITH UTILIZATION MANAGEMENT

VCHCP performs a Provider Satisfaction with Utilization Management (UM) Survey annually. The 2022 survey was performed by SPH Analytics (SPHA). VCHCP would like to thank the 74 providers who completed the survey, producing an overall response rate of 10.8%. Based on responses specifically related to provider experience with our Utilization Management (UM), the Plan is committed to improving provider experience and survey results. Below are the specific survey questions that pertain to provider satisfaction with our Utilization Management.

QUESTION 3A:

Access to knowledgeable UM Staff

QUESTION 3B:

Procedures for obtaining pre-certification/ referral/authorization information

OUESTION 3C:

Timeliness of obtaining pre-certification/ referral/authorization information

OUESTION 3D:

The health Plan's facilitation/support of appropriate clinical care for patients

QUESTION 3E:

Access to Case/Care Managers from this health plan

There was an overall improvement in all areas of provider satisfaction with our Utilization Management. We will continue to implement actions to improve provider experience with our Utilization Management, such as but not limited to:

- 1. Collaborate with VCMC Ambulatory Clinics through the VCHCP Ops Triad Meeting to ensure timely receipt of requests from the clinics, streamlining of VCMC's referral center process and continued expansion of the VCMC E-Consult.
- 2. Provide education to our members and providers through our newsletters regarding the importance of timeliness of receipt of treatment authorization requests by the Plan.

- **3.** Educate members regarding the Plan's prior authorization process and timelines of reviews.
- 4. Implement efficiencies in the Plan's **Utilization Management Department** to reduce the 45-day denial for lack of information. Efficiencies include but not limited to:
 - Calling or messaging providers to request the information needed on pended cases to complete timely prior authorization review.
 - Medical Director reviews all pend and denial letters/determinations for appropriateness prior to sending to providers.

VCHCPUpdates

For a full list of participating providers please see our website: wchealthcareplan.org/members/physicians.aspx or contact Member Services at (805) 981-5050 or (800) 600-8247.

NEW TO THE NETWORK

Angelique Dore, F.N.P. at Hematology-Oncology Clinic (VCMC) in Ventura has been added, effective October 2022.

Ashley Lamb, D.O., an orthopedic surgeon specialist at West Ventura Orthopedics and Podiatry Clinic (VCMC) in Ventura has been added, effective July 2022.

Ayhan Yoruk, M.D., a Cardiac Electrophysiologist at Cardiology Associates Medical Group in Oxnard and Ventura has been added, effective August 2022.

Benham Sharareh, M.D., an Orthopedic Surgeon at Ventura Orthopedic Medical Group in Oxnard and Ventura has been added, effective October 2022.

Brenda Younany, P.A.-C at Sierra Vista Family Medical Clinic (VCMC) in Simi Valley has been added, effective May 2022.

Chris Wu, M.D., an Ophthalmologist at California Retina Consultants in Oxnard and Simi Valley has been added, effective August 2022.

Christopher Tatum, DPM at Foot and Ankle Concepts in Oxnard has been added, effective November 2022.

Claudio Cardenas, F.N.P. at Clinicas Del Camino Real in Oxnard has been added, effective November 2022.

Daniel Demirchyan, M.D., a family medicine physician at Clinicas Del Camino Real Inc in Ojai has been added, effective September 2022.

Daniel Farnsworth, M.D., a Family Medicine physician at Santa Paula Medical Clinic in Santa Paula has been added, effective September 2022.

Emily Sim, P.A.-C at Ventura Orthopedics Medical Group in Oxnard and Ventura has been added, effective August 2022.

Erin Baird, N.P. at Surfside Pediatrics In Ventura has been added, effective May 2022.

Evelyn Magdaleno, F.N.P. at Pediatric Diagnostic Center (VCMC) in Ventura and Las Islas Family Medical Group North (VCMC) in Oxnard has been added, effective July 2022.

Farshid Bozorgnia, M.D., an internal medicine physician at Clinicas Del Camino Real, Inc. in Newbury Park and Oceanview has been added effective September 2022.

George Hoffman, M.D., an ophthalmologist at Miramar Eye Specialists/ Westlake Eye Center in Westlake, has been added, effective May 2022.

Ishita Patel, M.D., a Pediatrician at Clinicas Del Camino Real in Ventura and Santa Paula has been added, effective October 2022.

Jaira Muriel Gomez, P.A.-C at Clinicas Del Camino Real Inc in Oxnard has been added, effective October 2022.

Jenny Ringnes, M.D., a pediatrician at Sierra Vista Family Medical Clinic (VCMC) in Simi Valley added, effective May 2022.

Joni Bhutra, M.D., a Pediatrician at Pediatric Diagnostic Center in Ventura has been added, effective September 2022.

Joseph Chen, M.D., an ophthalmologist at California Retina Consultants in Westlake, has been added, effective May 2022.

Leon Fogelfeld, M.D., an Endocrinologist at Medicine Specialty Center - West has been added, effective September, 2022.

Lilly Mallare, M.D., an OB/GYN at Santa Paula Hospital Clinic (VCMC) in Santa Paula, has been added, effective May 2022

Louise Toutant, F.N.P. at Clinicas Del Camino Real in Oxnard has been added, effective November 2022.

Mariam Saad, P.A.-C., a physician assistant at California Dermatology Institute in Thousand Oaks and Ventura, has been added, effective May 2022.

Misty Eleryan, M.D., a Dermatologist at Pacifica Center for Dermatology in Camarillo has been added, effective September 2022.

Nicholas Campbell, P.A.-C at Ventura Orthopedic Medical Group in Oxnard and Ventura has been added, effective August 2022.

Nima Nassiri, M.D., a urologist at Anacapa Urology Clinic (VCMC) in Ventura, has been added, effective April 2022.

Oliver Ong, M.D., an Endocrinologist at Adventist Health Physicians Network - SV Alamo Hills has been added effective, August 2022.

Riza Malana, F.N.P. at Renal Consultants of Ventura County in Camarillo and Oxnard has been added, effective July 2022.

Robert Streeter IV, M.D., a Family Medicine physician at Clinicas Del Camino Real in Ventura and Oxnard has been added, effective September 2022.

Roberto Roizenblatt, M.D., an ophthalmologist at Miramar Eye Specialists in Camarillo, Oxnard, Thousand Oaks, and Ventura, has been added, effective May 2022.

Sam Key, P.A.-C. at Clinicas Del Camino Real Inc in Ventura has been added, effective July 2022.

Sanket Shah, M.D., an ophthalmologist at California Retina Consultants in Westlake, has been added, effective May 2022.

Sarah Ali, M.D., at Hematology-Oncology Clinic (VCMC) in Ventura has been added, effective April 2022.

Stephanie Cekov, P.A.-C at Clinicas Del Camino Real in Oxnard has been added, effective November 2022.

Steven Carter, M.D., an ophthalmologist at Miramar Eye Specialist Medical Group in Camarillo, Oxnard, Santa Paula, Thousand Oaks and Ventura has been added, effective August 2022.

Vladislav Bekerman, M.D., an ophthalmologist at Miramar Eye Specialist in Camarillo, Oxnard, Thousand Oaks and Ventura has been added, effective August 2022.

Yohan Perera, M.D., a Family Medicine and Women's Health physician at Las Islas Family Medical Group North in Oxnard has been added effective, August 2022.

LEAVING THE NETWORK

Alexander Meyer, M.D., a family medicine physician in Santa Paula has left, effective October 2022.

Amy Gowan, M.D., a family medicine physician at Clinicas Del Camino Real in East Simi Valley has left, effective October 2022.

Arezu Haghighi, M.D., an ophthalmologist at Miramar Eye Specialists Medical Group in Camarillo, Oxnard, Santa Paula, Thousand Oaks, and Ventura at has left, effective February 2022.

Brenda Younany, P. A.-C. at Clinicas del Camino Real Inc, Moorpark has left, effective May 2022.

Christine Weber, P.A. at Anacapa Surgical Associates in Ventura, has left effective August 2022.

Daniel Agarwal, M.D., an ophthalmologist at Miramar Eye Specialist Medical Group in Camarillo, Oxnard, Santa Paula, Thousand Oaks, and Ventura has left, effective October 2021.

David R. Hantke, an Otolaryngology (ENT) specialist in Ventura, has left effective October 2022.

Debbie Muratet, P.A.C. at Magnolia Family

Medical Center (VCMC) in Oxnard, Sierra Vista Family Medical Clinic (VCMC) in Simi Valley, West Ventura Clinic (VCMC) and Medicine Specialty Center West (VCMC), both in Ventura, has left effective February 2022.

Debra Minjarez, M.D., a reproductive endocrinologist at SCRC Medical Group in Santa Barbara/Ventura, has left, effective May 2022.

Dena Werner, M.D., an Internal Medicine and Infectious Disease physician at Las Islas Family Medical Group North and Medicine Specialty Center West - Immunology has left, effective August 2022.

Denise Ellison, CNM, a midwife at Santa Paula Hospital Clinic (VCMC) in Santa Paula, has left, effective June 2022.

Diane Narhi, M.D., a Rheumatologist at Dignity Health Medical Group in Oxnard has left, effective December 2022

Edward Li, M.D., a vascular surgeon at West Coast Vascular in Ventura has left, effective December 2021.

Farshid Bozorgnia, M.D., an internal medicine physician at Clinicas Del Camino Real Inc in Newbury Park and Oceanview, has left, effective September 2022.

Grace Hunter, M.D., an internal medicine physician at Las Islas Family Medical Group North (VCMC) in Oxnard has left, effective May 2022.

Jeff Magbitang, P.A.-C at Clinicas Del Camino Real in Santa Paula has left, effective November 2022.

Josephine Soliz, M.D., a family medicine physician at Rose Avenue Family Medical Group in Oxnard, has left effective January, 2023.

Julie Schreiner, N.P. at Surfside Pediatrics in Ventura has left, effective September 2022.

Kristi Schoeld, M.D., a Family Medicine physician at Academic Family Medicine Center in Ventura has left, effective December 2022.

Louise Toutant, F.N.P. at Anacapa Surgical Associates in Ventura has left, effective June 2022.

Marc D. Wolfsohn, M.D., a pain management physician at Spanish Hills Interventional Pain Specialists in Camarillo has left, effective June 2021.

Maria Choudhary, M.D., an ophthalmologist at Miramar Eye Specialist in Thousand Oaks has left, effective July 2022.

Mark Smith, M.D., a family medicine physician at Conejo Valley Valley Family Med Grp (VCMC) in Thousand Oaks has left, effective November 2022.

Michele Horwitz, FNP, a nurse practitioner at Academic Family Medicine Center in Ventura has left, effective December 2022.

Nandinidevi Ramaswamy, M.D., an Internal Medicine physician at Clinicas Del Camino Real in Fillmore and Oxnard has left, effective December 2022.

Neil Jorgensen, M.D., a Family Medicine physician at Academic Family Medicine Center in Ventura has left, effective December 2022.

Nirmala Gowrinathan, M.D., a Pediatric Neurologist at Pediatric Diagnostic Center in Ventura and Sierra Vista Family Medical Clinic in Simi Valley, has left effective October 2022.

Pallavi Kamra, M.D., a Pediatrician at Clinicas Del Camino Real, Inc. in E. Simi Valley and Moorpark, has left effective August 2022.

Paul Rehder, M.D., a Pediatric Dermatologist at Pediatric Diagnostic Center in Ventura has left, effective November 2022.

Preiya Jain, M.D., an obstetrics & gynecology physician at Clinicas Del Camino Real Inc in Simi Valley and Moorpark, has left, effective June 2022.

Sanket Shah, M.D., an ophthalmologist at Miramar Eye Specialists Medical Group in Camarillo and Ventura has left, effective March 2022.

Tamra Travers, M.D., a family medicine physician at Academic Family Medicine Center (VCMC) in Ventura has left, effective October 2022.

Theresa L. Broms, N.P. at Dignity Health Medical Group in Oxnard, Camarillo, and Ventura, has left, effective May 2022.

Thomas Horn, M.D., an orthopedic surgeon at Ventura Orthopedic Medical Group-Ventura, has left, effective August 2022.

CHANGES

Access Eye Institute - Thousand Oaks has closed their doors, effective July 2022.

Access Eye Institute has added a new location in Westlake Village, effective August 2022.

California Retina Consultants in Westlake Village has relocated, effective September 2021.

Clinicas Del Camino Real Inc, North Oxnard has closed their doors, effective July 2022.

Fillmore Urgent Care has closed their doors, effective August 2022.

Miramar Eye Specialists has add a new location in Simi Valley, effective August 2022.

Miramar Eye Specialists has added a new location in Westlake known as Westlake Eye Center, effective May 2022.

Nobbe Orthopedics Inc in Ventura has changed it's name to Hanger Clinic, effective October 2022.

St John's Pleasant Valley Hospital in Camarillo has changed it's name to St John's Hospital Camarillo, effective October 2022.

Ventura Care Partners in Ventura has relocated, effective October 2022.

West Coast Hearing & Balance in Ojai and Ventura have changed ownership and are now called Nelson Audiology, effective September 2022.

STANDARDS FOR

MEMBERS' Rights & Responsibilities

Ventura County Health Care Plan (VCHCP) is committed to maintaining a mutually respectful relationship with its Members that promotes effective health care. Standards for Members Rights and Responsibilities are as follows:

- Members have a right to receive information about VCHCP, its services, its Practitioners and Providers, and Members' Rights and Responsibilities.
- Members have a right to be treated with respect and recognition of their dignity and right to privacy.
- Members have a right to participate with Practitioners and Providers in decision making regarding their health care.
- Members have a right to a candid discussion of treatment alternatives with their Practitioner and Provider regardless of the cost or benefit coverage of the Ventura County Health Care Plan.
- Members have a right to make recommendations regarding VCHCP's Member Rights and Responsibility policy.
- Members have a right to voice complaints or appeals about VCHCP or the care provided.
- Members have a responsibility to provide, to the extent possible, information that VCHCP and its Practitioners and Providers need in order to care for them.
- Members have a responsibility to follow the plans and instructions for care that they have agreed upon with their Practitioners and Providers.
- Members have a responsibility to understand their health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.



