

# Member NEWSLETTER

FALL ISSUE • SEPTEMBER 2019



VENTURA COUNTY  
HEALTH CARE PLAN  
A Department of Ventura County Health Care Agency

## YOUR INPUT MATTERS!

**2019 Member Access Survey** ..... **3**

## WHAT IS AN HMO AND

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## EMERGENCY ROOM AND

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*Meditation Mount in Ojai,  
two weeks before the  
2017 Thomas Fire.*



## VENTURA COUNTY HEALTH CARE PLAN

FALL ISSUE • SEPTEMBER 2019

### CONTACT INFORMATION

#### Ventura County Health Care Plan

Regular Business Hours are:

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

- [www.vchealthcareplan.org](http://www.vchealthcareplan.org)
- [VCHCP.Memberservices@ventura.org](mailto:VCHCP.Memberservices@ventura.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  
[www.express-scripts.com](http://www.express-scripts.com)
- Behavioral Health/Life Strategies:  
(24 hour assistance)  
(800) 851-7407  
[www.liveandworkwell.com](http://www.liveandworkwell.com)
- Nurse Advice Line: (800) 334-9023

#### VCHCP Utilization Management Staff

Regular Business Hours are:

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

- (805) 981-5060

### GRAPHIC DESIGN & PRINTING

GSA Business Support/Graphics

COVER PHOTO BY DONNA SCHMIDT

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# COMPLETE THE 2019 Member Access Survey TODAY!!!

## YOUR INPUT MATTERS!

Help us make a difference to your health care access needs and identify areas needing improvement by completing the 2019 Member Access Survey online at:

<https://www.surveymonkey.com/r/VCHCPMemberSurvey2019>

You may also complete the survey by visiting our website at [www.vchealthcareplan.org](http://www.vchealthcareplan.org) and click on "For Members".

The Survey is available  
**NOW THROUGH DECEMBER 31st**

For assistance contact our Member Services Department at  
**(805) 981-5050** or toll free at  
**(800) 600-8247**  
Monday – Friday between 8:30 a.m. – 4:30 p.m.

## Got Maintenance MEDICATION? Save \$\$\$

DID YOU KNOW that getting a 90-day supply of your maintenance medication rather than a 30-day supply can save you money?

If you obtain a 90-day supply of maintenance medication via mail order through Express Scripts or at select retail pharmacies\*\*, you will receive a three-month supply for the price of a two-month supply.

You can sign-up and register for mail order at <https://www.express-scripts.com> or by calling Express Scripts at **(800) 233-8065**.

\*\* 90-day supplies of maintenance medications are available at "Smart 90" retail pharmacies, which include; Costco, Rite Aid, Vons, and Wal-Mart. A complete listing of Smart 90 pharmacies is available on the VCHCP website at <http://www.vchealthcareplan.org>

## Patient Emergency & Provider After Hours Contact

### Ventura County Medical Center Emergency Room

300 Hillmont Avenue  
Ventura, CA 93003  
**(805) 652-6165** or **(805) 652-6000**

### Santa Paula Hospital

A CAMPUS OF VENTURA COUNTY MEDICAL CENTER  
825 N. 10<sup>th</sup> 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



THE NURSE ADVICE LINE IS AVAILABLE AT:

**1-800-334-9023**, 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:

[www.vchealthcareplan.org/members/memberIndex.aspx](http://www.vchealthcareplan.org/members/memberIndex.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) 981-5060** or toll-free **(800) 600-8247**, FAX **(805) 981-5051**

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**

## WHAT IS AN



## AND HOW DOES IT WORK?

The Ventura County Health Care Plan (VCHCP) is a licensed health maintenance organization (HMO). An HMO gives you access to specific doctors and hospitals within its network. An HMO plan is different than a PPO plan, since under an HMO, your PCP coordinates all your care, and you must obtain services within the network, unless approved and authorized by the Plan.

*The following are main components of how an HMO works...*

**1 You are required to select a Primary Care Physician (PCP).**  
You have the right to select your own PCP as long as he or she is within VCHCP's network. If you do not choose a PCP one will be assigned to you; however, keep in mind that you may change your PCP at any time by contacting Member Services at (805) 981-5050 or (800) 600-8247.

**2 Before you can see a specialist, you'll need to obtain a referral from your PCP.**

Your PCP is responsible for coordinating your care, including making referrals to Specialists, when appropriate. In most cases, the PCP can directly refer you to a specialist; however, in some cases authorization from the Plan is required, and your PCP will coordinate that process. Please contact Member Services if you have any questions relating to your medical benefit.

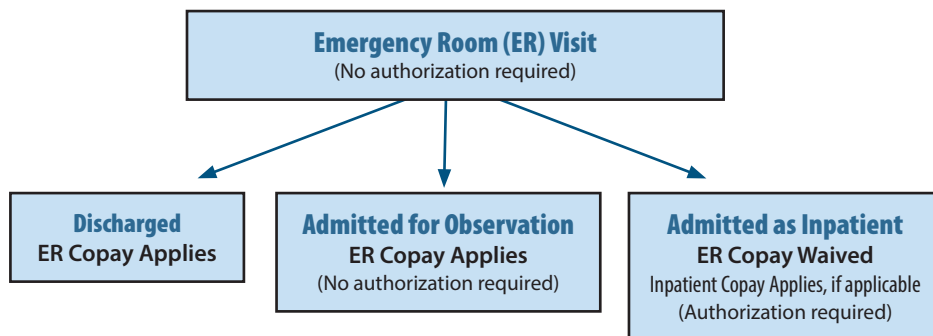
**3 You must use in-network providers and facilities.**

Services must be performed by a contracted provider and at a contracted facility/office unless prior authorized and approved by the Plan. This includes primary care, specialty care, and ancillary services, such as pharmacy and lab work.

*It's your responsibility to know which providers are in-network. For an updated listing of our providers, refer to our website at [www.vchealthcareplan.org](http://www.vchealthcareplan.org) and click on "Find a Provider" or you may contact Member Services for assistance.*

## Emergency Room and Observation

*If you are at the emergency room and the physician determines that you are not well enough to go home but not sick enough to be admitted as inpatient, you may be admitted for observation.*



An observation stay at the Ventura County Medical Center (VCMC) may be up to two (2) midnights, and at other contracted facilities, observation stay can be up to 24 hours. After those time periods, if you are still at the hospital, you would be considered admitted as inpatient.

*This chart explains when an authorization is required, and the applicable copay.*

**If you have any questions regarding your medical benefits, please contact VCHCP's Member Services Department at (805) 981-5050.**

## How to Find a Provider

The most efficient way of finding a provider is by utilizing our online Provider Search Engine! The Search Engine can be found in our website at **[www.vchealthcareplan.org](http://www.vchealthcareplan.org)** via the "Find a Provider" link. This is updated on a weekly basis thus providing the most accurate information available.

Select your plan:	All Plans
Select a provider type:	All Provider Types
Select a specialty:	All Specialists
Select a city:	All Cities
Select a language:	All Languages
Select a gender:	All Genders
Select Name of Clinic...	All Clinics
Select Name of Hospital...	All Hospitals

**TIP:** When searching for a specialist, make sure to select a specialty but ensure that the provider type is set at "All Provider Types" as selecting a provider type will limit the options available.

## How Often Should You See Your Primary Care Physician?

Your Primary Care Provider (PCP) is responsible for treating you when you are sick or injured, and at times is the coordinator of referrals to specialists and other services. Some members rarely see their PCP, which can make care difficult, especially in an emergent situation. Children and Adults should be seen by their PCP at least yearly (more frequently for children under 2 years of age). Preventive Health Visits, or Check-ups should occur regularly to have appropriate preventive screenings, immunizations, and an overall review of your health. This is an important visit to discuss health concerns or even health goals. Staying in contact with your PCP by having annual check-ups can help with establishing a good relationship with your PCP. This relationship can make times of illness or injury run smoother and give you peace of mind for the care you receive.

If you haven't had a checkup in the last year, please call your PCP today to make an appointment. If you need assistance or have questions, please call Member Services at (805) 981-5050.

## Timely Access REQUIREMENTS

### STANDARDS INCLUDE:

**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.

TYPE OF CARE	WAIT TIME OR AVAILABILITY
Emergency Services	Immediately, 24 hours a day, seven 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

# Runny Nose from a Cold: Does your Child need Antibiotics?

## Q&A Guide for Parents

*Your child has a cold and a runny nose. You might think this means your child needs an antibiotic. A runny nose, even if you're seeing thick yellow or green mucus, is normal when you begin to get better from a cold.*

### What causes a runny nose during a cold?

When germs that cause colds first infect the nose and sinuses, the nose makes clear mucus. This helps wash the germs from the nose and sinuses. After two or three days, the body's immune system fights back, changing the mucus to a white or yellow color. When bacteria that normally live in the nose grow back during the recovery phase, they then change the mucus to a greenish color. This is all normal and does not mean your child needs antibiotics.

### What should I do?

- Try using a cool mist vaporizer or saltwater nose drops.
- Watch your child. Runny nose, cough, and symptoms like fever, headache, and muscle aches may be unpleasant, but antibiotics will not help and the symptoms won't go away any faster. When antibiotics aren't needed, they won't help and could even hurt you.

### Are antibiotics needed for a runny nose?

A runny nose is a normal part of a cold. Antibiotics do not work on viruses like colds or runny noses



(even if the mucus is thick yellow or green). Your child's doctor or nurse may prescribe other medicine or give you tips to help with symptoms like fever and cough.

### Why not just try antibiotics?

When antibiotics aren't needed, they won't help and could even hurt you. Taking antibiotics creates resistant bacteria. Antibiotic resistance occurs when bacteria change and adapt to defeat the killing power of antibiotics. Any time antibiotics are used, they can cause side effects and lead to antibiotic resistance. Side effects of antibiotics can include rash, dizziness, stomach problems, or yeast infections.

Improving the way we take antibiotics can help fight antibiotic resistance and ensure that life-saving antibiotics will be available for future generations.

A runny nose typically gets better on its own, so antibiotics aren't needed. Talk to your healthcare professional about how to feel better while your body fights your illness.

To learn more about appropriate antibiotic prescribing and use, visit

[www.cdc.gov/antibiotic-use](http://www.cdc.gov/antibiotic-use)

National Center for Emerging and Zoonotic Infectious Diseases  
Division or office name in this space



CS283061

## FIGHT FLU

# CDC Says "Take 3" Actions To Fight Flu

## Viruses or Bacteria What's got you sick?

Antibiotics are only needed for treating certain infections caused by bacteria. Viral illnesses cannot be treated with antibiotics. When an antibiotic is not prescribed, ask your healthcare professional for tips on how to relieve symptoms and feel better.

Common Condition	Common Cause			Are Antibiotics Needed?
	Bacteria	Bacteria or Virus	Virus	
Strep throat	✓			Yes
Whooping cough	✓			Yes
Urinary tract infection	✓			Yes
Sinus infection		✓		Maybe
Middle ear infection		✓		Maybe
Bronchitis/chest cold (in otherwise healthy children and adults)*		✓		No*
Common cold/runny nose			✓	No
Sore throat (except strep)			✓	No
Flu			✓	No

\* Studies show that in otherwise healthy children and adults, antibiotics for bronchitis won't help you feel better.



To learn more about antibiotic prescribing and use, visit [www.cdc.gov/antibiotic-use](http://www.cdc.gov/antibiotic-use).



### #1

## TAKE TIME TO GET A FLU VACCINE.

- CDC recommends a yearly flu vaccine as the first and most important step in protecting against flu and it's potentially serious complications.
- While there are many different flu viruses, flu vaccines protect against the viruses that research suggests will be most common.
- Flu vaccination has been shown to:
  - » Reduce flu illnesses, doctors' visits, and missed work and school due to flu.
  - » Reduce the risk of flu-associated hospitalization for children, working age adults, and older adults.
  - » Prevent serious medical events associated with some chronic conditions.
  - » Protect women during and after pregnancy and protect their babies from flu after birth for several months.
  - » Be lifesaving in children.
- Flu vaccination has been shown in several studies to reduce severity of illness in people who get vaccinated but still get sick.
- Getting vaccinated yourself may also protect people around you, including those who are more vulnerable to serious flu illness, like babies and young children, older people, and people with certain chronic health conditions.
- Everyone **6 months and older** should get a flu vaccine annually by the end of October.

### #2

## TAKE EVERYDAY PREVENTIVE ACTIONS TO HELP REDUCE THE SPREAD OF GERMS.

- Try to **avoid close contact** with sick people.
- If you are sick with flu symptoms, CDC recommends that you stay home for at least 24 hours after your fever is gone except to get medical care or for other necessities. Your fever should be gone without the use of a fever reducing medicine.
- While sick, limit your contact with others as much as possible to keep from infecting them.
- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water. If soap and water are not available, use an alcohol-based hand rub.
- Avoid touching your eyes, nose and mouth. Germs spread this way.
- Clean and disinfect surfaces and objects that may be contaminated with germs like flu.

### #3

## TAKE FLU ANTIVIRAL DRUGS IF YOUR DOCTOR PRESCRIBES THEM.

- If you get sick with flu, antiviral drugs can be used to treat your illness.
- Antiviral drugs are different from antibiotics. They are prescription medicines (pills, liquid or an inhaled powder) and are not available over-the-counter.
- Antiviral drugs can make illness milder and shorten the time you are sick. They may also prevent serious flu complications. For people with high risk factors, treatment with an antiviral drug can mean the difference between having a milder illness versus a very serious illness that could result in a hospital stay.
- CDC recommends prompt treatment for people who have influenza infection or suspected influenza infection and who are at high risk of serious flu complications.
- Studies show that flu antiviral drugs work best for treatment when they are started within 2 days of getting sick, but starting them later can still be helpful, especially if the sick person has a high risk factor or is very sick from the flu. Follow your doctor's instructions for taking this drug.

## FLU-LIKE SYMPTOMS INCLUDE:

fever\* or feeling feverish/chills, cough, sore throat, runny or stuffy nose, muscles and body aches, headache, fatigue, sometimes diarrhea and vomiting.

# Make Your Child's Shots Less Stressful

*Vaccines help protect babies and young children against 14 serious diseases. Even though you are keeping her safe from diseases, it's hard to see your child cry when she gets her shots. But you can take some steps before, during, and after a vaccine visit to ease the pain and stress of getting shots.*



**READ ABOUT THE SHOTS** your child will get in advance. “CDC’s vaccine webpage has a lot of useful information to help parents understand the importance of on-time vaccination,” said Dr. Nancy Messonnier, Director of the National Center for Immunization and Respiratory Diseases at the Centers for Disease Control and Prevention. “You can review this information before your appointment, and then, you can ask your child’s doctor any remaining questions or concerns you have about vaccines.”

**YOU MAY ALSO WANT TO BRING** your child’s vaccine record to show the doctor, and pack a favorite toy, book, blanket or other comfort item. For older children, be honest—shots can pinch or sting, but not for long. Remind them that shots help keep them healthy.

**DISTRACT YOUR CHILD** with a toy, a story, a song, or something interesting in the room. Make eye contact with your child and smile, talk softly, or sing. Hold your child tightly on your lap, if you can. Take deep breaths with an older child to help “blow out” the pain.

**AFTER THE SHOT,** hug, cuddle, and praise your child. For babies, swaddling, breastfeeding, or a bottle may offer quick relief. Comfort and reassure older children if they cry.

**IF YOU NOTICE REDNESS,** soreness, or swelling from the shot, place a clean, cool washcloth on the area. These reactions are usually mild and resolve on their own without needing treatment. If your child runs a fever, try a cool sponge bath. You can also use a non-aspirin pain reliever if your doctor says it’s OK. Some children eat less, sleep more, or act fussy for a day after they get shots. Make sure your child gets plenty to drink. If you’re worried about anything, call your doctor.

**“REMEMBER,”** added Dr. Messonnier, “keeping your child up-to-date on vaccines is the best way to protect against vaccine-preventable diseases.”

**Learn more about childhood vaccines at <https://www.cdc.gov/vaccines/parents>**

# 2019 HEDIS

## Results and 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.

### 2019 Accomplishments

- Several scores improved over the past three years.
- Improvement in Comprehensive Diabetes Care attributed to effective Health Coaching by the Plan's Health Coach Nurses and Case Manager.
- 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. This program has been effective because of the following:

#### SUCCESSFUL HEALTH COACHING CALLS:

- We have a 66% success rate in contacting you, our member, and performing health coaching.

#### HGBA1C TESTING:

- Higher percentage of members who had health coaching (74%) had their A1c done within six months following the health coaching call, compared to those members who did NOT have health coaching (61%).
- For those who accepted case management, 73% of these members had their A1c done within six months following the health coaching call.

#### A1C MOVEMENT:

- Higher percentage of members who had successful health coaching had decreased A1c (73%), compared to those members who did NOT have health coaching (57%).
- For those members who accepted CM, 95% of these members decreased their A1c level.

#### RISK STRATIFICATION:

- Higher percentage of members who had successful health coaching decreased their risk level (57%), compared to those members who did NOT have successful health coaching (36%).
- From those members who accepted CM and had their A1c done, 90% of these members decreased their risk level.

#### RISK STRATIFICATION SUMMARY:

- Percent of members with high A1c decreased after successful health coaching calls (from 34% to 11%) and the percent of members with high A1c who accepted case management decreased even more (from 27% to 16%) compared those members who did not have successful calls.

*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.*

### 2019 Goals

- Breast cancer screening: All women age 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 age 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.
- Weight, nutrition, and physical activity assessment/counseling in children: At least annually, each child 3 years old and older should have their weight, nutrition, and physical activity assessed by their health care provider.

### 2019 Areas for Improvement

- Breast Cancer Screening
- Prenatal and Postpartum Care
- Comprehensive Diabetes Care: Weight Assessment and Counseling – BMI Percentile, Nutrition & Physical Activity

### 2019 Planned Interventions:

- VCHCP will continue to reach out to you and to your doctor when you need any of the above preventive health screenings.
- Postcards are sent to members in need of breast cancer screenings twice a year.
- Diabetics will continue to receive health coaching, mailed information and resources annually, and have access to Health Coach Nurses.
- All women who deliver babies will continue to receive follow up reminder care letters.
- We will send Birthday Card Care Gap reminders 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.*



# 2018 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 2018, the Plan is pleased to share that it succeeded in achieving multiple identified goals.*

## **HIGHLIGHTS OF PLAN ACCOMPLISHMENTS FOR 2018 INCLUDE:**

### **Improved Access and Availability:**

- 67% reduction of access issues from the commencement of the Access to Care Task Force in August of 2015.
- Executed 12 new provider contracts including Dermatology, Pain Management, Nutritional Consulting, Podiatry, and Taxonomy Pathology, Ancillary and Primary Care.
- Hiring of providers for many Primary Care Providers and Specialist, which include Pediatric Neurologist, Pediatric Gastroenterologist, Cardiologists, Neurological Surgeons, Pulmonologist, General Surgeon, Internal Medicine/Nephrologist, Hem/Oncologist and, OB/GYN.

### **Effectiveness of Case Management (CM) Program:**

- CM acceptance rate was 37% which is above the 20% goal.
- 100% reduction in inpatient admissions for members enrolled in complex case management at least 60 days.
- 33% reduction in Emergency Room visits for members enrolled in complex case management program at least 60 days.
- 100%-member experience/satisfaction with CM.

### **Improved Disease Management Program:**

- The VCHCP Quality Application System (Quality App) disease management tool was enhanced to include the last service date of care gaps which includes A1c, retinal eye exam and nephrology. This helped the Disease Manager/Case Manager to access up to date information on missing services including last service date and helped with health coaching.
- Continued to identify members in the moderate and high risk with the availability of Diabetes A1c results, allowing health coaching and case management.
- Increase A1c testing compliance, decreased A1c level and decreased risk level of members with successful health coaching and case management.
- 100% overall satisfaction with Asthma and Diabetes Disease Management programs.
- Implemented survey monkey and offered "goodie bags"

### **Efficiency in Utilization Management:**

- Two (2) DMHC onsite audits/surveys were successfully completed with follow up on the Mental Health Parity review and the 2018 routine Medical Survey.
- With the 2018 Routine Medical Survey, feedback from the surveyors resulted in tracking of opportunities for improvement in the UM Department. This would allow interventions to ensure efficiency and compliance with the DMHC requirements.
- Reduction in prior authorization of those services (medical and pharmacy) that are seldom denied (<5%) with no or little return on investment (ROI). This resulted in decreased work volume and efficiency which allowed the program resources to meet the needs of the UM program.
- Aggressive queue/workload monitoring, distribution and management ensured timely completion of workload and efficiency.
- Continued collaboration with Ventura County Health Care Agency Clinics (VCHCA) providers and administration to ensure timely receipt of treatment authorization requests from the clinics, improve care coordination, specialist access and increasing efficiencies.

### **System Enhancements:**

- UM and CM module QNXT (medical management computer system) upgrade.
- The Quality App for the Disease Management (DM) program was enhanced to add the last service date of preventive services. This was created by the Health Information Analyst, creating a more efficient process for the DM program and health coaching.

### Services:

- Maintained level of customer service with reduction in staff positions.
- More members enrolled in the Disease Management program received health coaching intervention, as the risk stratification of members was improved.

### Surveys:

- Member Appointment Availability Survey conducted by VCHCP specific to Access (10/1/18 – 12/31/18).
- After Hours Survey conducted by VCHCP was started in March 2018 and concluded on May 15, 2018 with the result being 100% of the providers complied.
- Provider Satisfaction Survey conducted by SPH Analytics (May 2018 – July 2018).
- Provider Access Survey was conducted by Healthy People (July 2018).
- Member Appointment Availability Survey conducted by VCHCP specific to Access (10/1/18 – 12/31/18).
- Conducted the annual member Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey, evaluated its findings, and identified opportunities for improvement particularly surrounding timely access to care (11/27/18).

### Processes:

- The VCHCP Member Services Department exceeded the call quality goal of 92% and the email quality goal of 95%.
- Achieved 99% to 100% compliance with UM review turnaround time.
- UM physicians and nurses met the passing score of 80% or better on inter-rater testing.
- Clinical rationale 8th grade reading level met 100% compliance at the end of 2018.

### Communications:

- Distributed member and provider newsletters twice a year, highlighting services offered by the Plan, as well as education about these services, benefits and guidelines.
- Continued to utilize email/fax-blasts to providers to relay important updates to practitioners on a timely basis; for example, the VCHCP drug formulary update (additions and deletions).
- Mailed postcard reminders to members re: needed mammograms, colorectal screenings and reminder on appropriate use of the Emergency Room.

### Collaborations:

- Continued regular Access to Care

Task Force meetings to identify and track access to care barriers and collaborate with County partners to identify and implement potential solutions.

- Continued successful collaboration with Optum Behavioral Health which has resulted in robust, productive quarterly meetings to promote continuity and coordination between medical and behavioral health-care.
- Continued quarterly Joint Operations Committee meetings with each of the Plan's delegates to ensure a venue of robust oversight of delegate activities with resultant quality services offered to Plan members.

### While the Plan realized multiple accomplishments throughout 2018, there were Key Challenges for the Plan in 2019 that came to light:

- Identification of barriers and interventions that will improve Health Effectiveness Date Information Set (HEDIS) scores overall, with the emphasis on the following measures:
  - Comprehensive Diabetes Care (CDC)
  - Breast Cancer Screening (BCS)
  - Postpartum Care (PPC)
  - Plan All-Cause Readmission (PCR)
- Consistent timeliness of follow up care:
  - After Emergency Room visits
  - After Inpatient hospital admissions
  - Postpartum
- Timely exchange of information, in particular the timeliness of initial consultation reports sent from Specialist to primary care providers (PCP).
- Timely communication of feedback from behavioral health providers to PCPs through increased collaboration between Optum Behavioral Health and VCHCP.
- Increase rates of member participation in the Case Management program.
- Increased A1c testing compliance, decreased A1c level and decreased risk level of members with successful health coaching and case management.
- Maintain volume of members stratified as moderate and high risk to allow health coaching and case management screening and intervention to more members.

# Direct Specialty REFERRALS



A "Direct Specialty Referral" is a referral that your Primary Care Physician (PCP) can give to you so that you can be seen by a specialist physician or receive certain specialized services. Direct Specialty Referrals do not need to be pre-authorized by the Plan. All VCHCP contracted specialists can be directly referred by the PCPs using the direct referral form [EXCLUDING TERTIARY REFERRALS, (e.g. UCLA AND CHLA), PERINATOLOGY and NON VCMC PAIN MANAGEMENT SPECIALISTS]. Referrals to Physical Therapy, Occupational Therapy, and Nutritional Counseling also use this form.

Note that this direct specialty referral does not apply to any tertiary care or non-contracted provider referrals. All tertiary care referrals and referrals to non-contracted providers continue to require approval by the Health Plan through the treatment authorization request (TAR) procedure.

Appointments to specialists when you receive a direct referral from your PCP should be made either by you or by your referring doctor. Make sure to check with your referring doctor about who is responsible for making the appointment.

Appointments are required to be offered within a specific time frame, unless your doctor has indicated on the referral form that a longer wait time would not have a detrimental impact on your health. Those timeframes are: Non-urgent within 15 business days, Urgent within 48-96 hours.

If you feel that you are not able to get an appointment within an acceptable timeframe, please contact the Plan's Member Services Department at (805) 981-5050 or (800) 600-8247 so that we can make the appropriate arrangements for timeliness of your care.

## Standing REFERRALS

A standing referral allows you to see a specialist or obtain ancillary services, such as lab, without needing new referrals from your primary care physician for each visit. You may request a standing referral for a chronic condition requiring stabilized care. Your primary care physician will decide when the request meets the following guidelines.

A standing referral may be authorized for the following conditions when it is anticipated that the care will be ongoing:

- Chronic health condition (such as diabetes, COPD etc.)
- Life-threatening mental or physical condition
- Pregnancy beyond the first trimester
- Degenerative disease or disability
- Radiation treatment
- Chemotherapy
- Allergy injections
- Defibrillator checks
- Pacemaker checks
- Dialysis/end-stage renal disease
- Other serious conditions that require treatment by a specialist

A standing referral is limited to 6 months, but can be reviewed for medical necessity as needed, to cover the duration of the condition.

If you change primary care physicians or clinics, you will need to discuss your standing referral with your new physician. Changing your primary care physician or clinic may require a change to the specialist to whom your primary care physician makes referrals.

**Additional information regarding Standing Referrals is located on our website: [www.vhealthcareplan.org/providers/providerIndex.aspx](http://www.vhealthcareplan.org/providers/providerIndex.aspx) or by calling Member Services at (805) 981-5050 or (800) 600-8247.**

# 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 Management Program (QM) 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 <https://www.liveandworkwell.com/newsletter/ohwellness.pdf> or call OptumHealth directly at (800) 851-7407 and ask for a paper copy of the QM program description.

## Optum Telemental Health/virtual visits



**You can meet with a psychiatrist or therapist online through private and secure video-conferencing.**

Schedule a virtual visit with a doctor or therapist using telemental health/virtual visits available through your health care plan.

Ventura County Health Care Plan Members that access behavioral health care services through Life Strategies (Optum Behavioral Health) now have the ability to meet with a doctor or therapist virtually. Make an appointment just as if you were scheduling with a mental health clinician at their office. Telemental Health clinicians treat general mental health conditions, such as depression and anxiety. Services include both therapy and medication management.

### How do Telemental Health/virtual visits work?

- **Treatment** is provided by doctors and therapists contracted with Optum Behavioral Health to provide therapy and medication management services
- **Services** are confidential
- **Insurance** covers your treatment with the same cost share (co-pay or co-insurance after deductible) as applies to face-to-face visits
- **Prescriptions** can be written and picked up at a local pharmacy
- **Appointments** can be scheduled by contacting a virtual visit clinician found on [liveandworkwell.com](https://www.liveandworkwell.com)

### Take the first step:



Log on to  
[liveandworkwell.com](https://www.liveandworkwell.com)



Find a virtual  
visit provider



Choose a provider and  
schedule an appointment

## VENTURA COUNTY HEALTH CARE PLAN CONTRACTS WITH



# OptumHealth Behavioral Solutions (LIFE STRATEGIES)

## FOR MENTAL/BEHAVIORAL HEALTH AND SUBSTANCE ABUSE SERVICES

Optum's Live and Work Well website is packed with valuable information for healthy living. For easy access to this information, look for Optum's icon on the VCHCP website – click on it and you are on your way to learning more about healthy living! You can also access it through <https://www.liveandworkwell.com/member>.

*Following are two examples of articles available for members to help with common behavioral health issues.*

## Attention Deficit Hyperactivity Disorder (ADHD)

### ***What is attention deficit hyperactivity disorder?***

Attention deficit hyperactivity disorder (ADHD) is a condition in which a person has trouble paying attention and focusing on tasks, tends to act without thinking, and has trouble sitting still. It may begin in early childhood and can continue into adulthood. Without treatment, ADHD can cause problems at home, at school, at work, and with relationships. In the past, ADHD was called attention deficit disorder (ADD).

### ***What causes ADHD?***

The exact cause is not clear, but ADHD tends to run in families.

### ***What are the symptoms?***

The three types of ADHD symptoms include:

- **Trouble paying attention.** People with ADHD are easily distracted. They have a hard time focusing on any one task.
- **Trouble sitting still for even a short time.** This is called hyperactivity. Children with ADHD may squirm, fidget, or run around at the wrong times. Teens and adults often feel restless and fidgety. They aren't able to enjoy reading or other quiet activities.
- **Acting before thinking.** People with ADHD may talk too loud, laugh too loud, or become angrier than the situation calls for. Children may not be able to wait for their turn or to share. This makes it hard for them to play with other children. Teens and adults may make quick decisions that have a long-term impact on their lives. They may spend too much money or change jobs often.

### ***How does ADHD affect adults?***

Many adults don't realize that they have ADHD until their children are diagnosed. Then they begin to notice their own symptoms. Adults with ADHD may find it hard to focus, organize, and finish tasks. They often forget things. But they also often are very creative and curious. They love to ask questions and keep learning. Some adults with ADHD learn to manage their lives and find careers that let them use those strengths.

## The Basics: Autism Facts

### ***What is Autism?***

Autism is a developmental disorder. The disorder makes it hard to understand the world. Communication is especially challenging. It is hard for people with autism to attach meaning to words and facial expressions. Individuals with the disorder have trouble interacting with others. They may seem as if they are in their own world. People with autism tend to engage in repetitive or obsessive behavior. They often do self-harming things. They may bang their heads on the wall or do things like repeatedly pinch themselves.

### ***What are the Symptoms?***

Autism is usually noticed in the first three years. Sometimes the symptoms are apparent when comparing the development of your child to others their age. Other times the symptoms may come on all at once. Some signs to look for are:

### ***Communication symptoms:***

- Talks late or not at all; speaks loudly or with flat tones
- Points or uses other motions to indicate needs
- Repeats words or phrases without understanding the meaning
- May talk at length about something even if no one is listening



### Social interaction symptoms:

- Likes to be alone
- Dislikes being held or touched
- Does not know how to interact; poor listener
- May stare at something for a long time, ignoring the rest of the world
- Poor eye contact
- Does not understand the feelings of others

### Behavior symptoms:

- Likes routine; is upset by change
- Does not pretend or use his or her imagination
- May have tantrums or show aggression
- May become very attached
- May engage in repetitive movements like rocking
- May bang his or her head or hurt self
- May be sensitive to noises that others tolerate
- May have an unusual reaction to the way things smell, taste, look, feel or sound

Not everyone experiences autism in the same way. Some may have severe trouble with some things and not be as challenged by others. If you suspect that your child may have autism, trust your instincts. Take your child to a doctor and have them examined.

*Additionally, VCHCP has a Case Management Program specific to the needs of those with Autism. Contact the VCHCP Case Management Department for more information (805) 981-5060 or visit [www.vchealthcareplan.org](http://www.vchealthcareplan.org) and click on "Request Case Management or Disease Management".*

# Autism Screening FOR ALL CHILDREN

Autism Spectrum Disorder (ASD) is the name for a group of developmental disorders. Studies show that when children with ASD are diagnosed early and receive early intervention, they have improved long-term outcomes. With this in mind, VCHCP has in place a Screening for Autism Policy that all Family Practitioners and Pediatricians caring for children age 2 and younger are to follow. Your child's provider will administer a standardized screening and surveillance of risk factors at age 18 and 24 months. Also, your provider will perform a general observation at every well-child visit. Please understand that these screenings are to be provided for all children at age 18 and 24 months. If you have concerns about the screening or the results, contact your child's provider.

**If you have any questions about the Autism Screening Policy, please contact VCHCP Utilization Management department at (805) 981-5060.**

## Autism Spectrum Disorders

**REQUEST  
Case Management or  
Disease Management**

Members now have an opportunity to seek assistance for Autism Spectrum Disorders (ASD). VCHCP recommends all members with ASD or parents of children with ASD participate in our Autism Case Management Program. Visit <http://www.vchealthcareplan.org/members/memberIndex.aspx>, and on the right side of the site, click "Request Case Management or Disease Management". You will be prompted to enter member specific information. You will then submit this form to a secure email. A nurse will evaluate your request and call you within 2 business days.

**If you would like to speak directly with a nurse, please call (805) 981-5060 and ask for a Case Management Nurse.**

# CODEPENDENCE

*When a person is codependent, they are unable to define and meet their own needs in a relationship. This individual “loses” their sense of self because they are completely absorbed in the needs of the other person in a relationship, who often is struggling with addiction or illness. This intense focus on the other person can jeopardize one’s health, safety, and success in life.*

**C**odependence is commonly seen in romantic relationships, although any relationship can take on the negative traits of codependence. You can see evidence of codependence in parent and child relationships, between siblings, and it can occur in the workplace among coworkers.

## How do people become codependent?

No one is born codependent. A newborn baby is completely dependent on a caregiver, whereas a codependent person learns this behavior. It can be passed down through the generations by observing other family members and modeling their codependent behavior. Codependent people are sometimes known as “relationship addicts” because the connection is unhealthy, destructive, and one-sided.

People who have addiction (drug, alcohol, food, gambling, etc.) in their family history are more likely to become codependent. Additionally, when physical, sexual, or emotional abuse has occurred the risk of emotional dependence escalates. Mental illness is also a commonality among codependent people.

## Characteristics of Codependent People

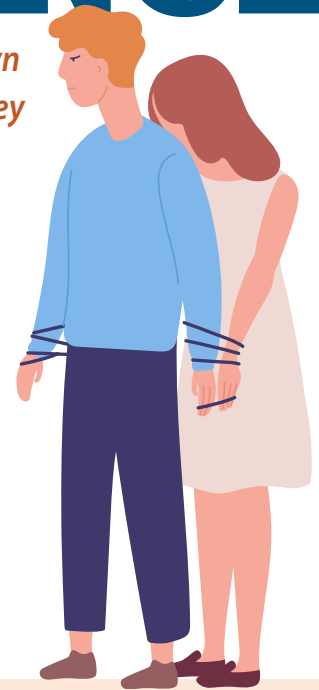
Codependent people struggle to define who they are and what their purpose is in life. They see their place in this world solely through the lens of their codependent relationship. Despite their genuine care and concern for the other person in the relationship, they will take on the role of a martyr or victim and are drawn to others with the same mindset.

Codependents are inclined to do whatever is needed to erase or minimize the consequences from their partner’s destructive behaviors. This keeps the codependent individual on a damaging course. Codependents use others’ addictive behavior as an excuse to avoid communication and closeness with those who could help them.

## Help for the Codependent Person

*The following helpful tips can help you or someone you know step away from codependent tendencies:*

- **IDENTIFY:** Embrace your own needs and emotions. Saying “no” to a loved one doesn’t mean you don’t care for them, and it’s healthy to set these boundaries. Tough love is sometimes the most loving thing you can do.
- **SELF-RELIANCE:** What are some ways you could be more independent? When can you take responsibility for your own emotions and actions? Encourage others around you to do the same.
- **STOP “FIXING”:** It is not your responsibility to solve all your loved one’s problems. People who struggle with addiction or illness are capable of more than we realize. You can still support and love them without trying to “fix” their lives. Give them space to take personal responsibility for their actions and future.



**There are many emotional characteristics of codependent people. A person may not exhibit all these traits, but there will be some signs of imbalance such as:**

- Low self-esteem and comparisons with others
- Overblown sense of responsibility for others
- Hurt feelings when actions aren’t recognized
- Fears of abandonment or losing the person in the relationship
- Difficulty understanding and identifying feelings
- Unable to set and maintain boundaries
- Emotional outbursts to stressful events
- Difficulty expressing their own goals or values
- Symptoms of anxiety, depression, or mental illness

- **EXPLORE:** Discover what you value and what your beliefs are. Many times, we are people-pleasers looking for approval and love. Have you adopted values or beliefs simply to fit in or please your partner? What would be important to you regardless of others' opinions?
- **RELAX:** Take some time for you. Relieve stress, tension, and anxiety by practicing relaxation techniques. Exercise, enjoying music, mindfulness, and activities you love are all examples of how to dial down worry and guilt. When you practice good self-care by relaxing, those negative emotions are less likely to creep back.
- **BE KIND:** Apply the "golden rule" to yourself. Treat yourself as you would like others to treat you: Be kind to yourself, and offer forgiveness when needed.
- **COMMUNICATE:** Relational closeness doesn't magically happen. Open dialogue and communication is needed to foster intimacy in relationships.
- **CHOOSE HOPE:** It's easy to worry too much, causing fear to cloud good judgment. When we choose to operate out of hope instead of fear we can focus on our needs and desires in a healthy way. If we're living in fear of losing our partner, our stress and anxiety levels rise. This lifestyle takes a tremendous toll on your mind and body.

*If you or your loved one is struggling with codependency, be courageous and seek help. A licensed counselor or therapist can help you explore how you began to act this way. They can guide you to see healthy and unhealthy patterns in relationships. Together, you can establish a plan to change your life's direction and move from a codependent relationship to a mutually satisfying one.*

**SOURCE:**

- <http://www.mentalhealthamerica.net/co-dependency>

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## ACCESSING

# Behavioral Healthcare

## SERVICES

Contact  
OptumHealth  
Behavioral Solutions  
of California "Life  
Strategies" Program  
at (800) 851-7407

Contact VCHCP  
Member Services at  
(805) 981-5050 to  
request an EOC copy  
or go to the Plan's  
website at [www.vchealthcareplan.org](http://www.vchealthcareplan.org)

Information on authorization of Plan Mental Health and Substance abuse benefits are available by calling the Plan's Behavioral Health Administrator (BHA). A Care Advocate is available twenty-four (24) hours a day, seven (7) days a week to assist you in accessing your behavioral healthcare needs. For non-emergency requests, either you or your Primary Care Provider may contact Life Strategies for the required authorization of benefits prior to seeking mental health and substance abuse care.

Further information may also be obtained by consulting your Ventura County Health Care Plan Commercial Members Combined Evidence of Coverage (EOC) Booklet and Disclosure Form.

## A great resource in Ventura County...

2-1-1 can assist patients with counseling, food assistance, domestic violence services, employment resources, health care, senior services, legal assistance, substance abuse services, housing, resources for parents, and much more! 2-1-1 is available 24 hours a day, 7 days per week. You can also visit [www.211ventura.org](http://www.211ventura.org).



# FINDING & GETTING Help <sup>for</sup> Risky Alcohol Use



*If you or someone you know has a problem with alcohol, you are certainly not alone. Among adults 18 and older, 17 million have an alcohol use disorder, or AUD. AUD is a medical condition—not a lack of willpower or character flaw. And like many other conditions, AUD can be treated, and recovery is possible, even when severe.*

**N**ot all people who drink alcohol regularly have AUD. But continued heavy drinking increases the risk of developing AUD and having it impact your physical health, your functioning at work and your relationships with family and friends. So if you can't control your drinking, it may be time to seek professional help.

## WHAT ARE THE SIGNS?

If alcohol use is causing problems in your life, or when you are drinking too much, too often or too fast, you could have AUD. Some signs include feeling guilty about your drinking; using alcohol to relax or deal with a problem or emotions; blacking out or not remembering; and lying to people about your drinking.

An actual diagnosis is made based on your answers to a series of questions about your alcohol use over a one-year period. The questions center around your drinking behaviors, negative consequences of your drinking, and its physical effects on you. Your primary care provider, therapist, or other health care professional can give you the test as well. If the results show that your alcohol use is a risk to your health and well-being, you may want to explore your options for getting help.

## TREATMENT OPTIONS

There are multiple treatment methods available for alcohol use disorder. The decision on what treatment plan to follow is a highly individual one. Finding the right option is important.

Many people can benefit from treatment given on an outpatient basis. This means you meet with a doctor or therapist regularly or attend an outpatient treatment program.

Inpatient hospital stays should be followed by additional treatment that can be in the same or a different facility and does not include overnight stay, or with outpatient treatment.

Your primary care doctor can be a good starting point. Be honest, and let the doctor know that you're ready to take a serious look at your drinking. Along with assessing your risk and the severity of your use, he or she can help point you in the right direction toward next steps. The doctor might also ask if you're misusing any other drugs, whether you've been through treatment before, and what kind of support system you have in your life. You'll likely be checked for any other possible health issues as well. From there, your doctor may help sketch out a treatment plan. You will

probably be referred to a professional or treatment facility specializing in AUD.

In some cases, medications can be given to treat alcohol disorders. These medications are given by prescription only. They are not addictive. There are currently three medications approved by the FDA for treating the disorder. The medications help curb the urge to

**Your primary care doctor can be a good starting point. Be honest, and let the doctor know that you're ready to take a serious look at your drinking.**

drink and can help prevent you from starting to drink again (relapsing). They might be prescribed along with another recommended form of treatment, such as individual or group counseling and/or support groups such as Alcoholics Anonymous (AA).

## DOES TREATMENT WORK?

One of the keys to successful treatment is finding the treatment method that's right for you. What works for one person might not work for another. Exploring options, asking questions

about the treatment approach and knowing what the program expects of its participants are all important in deciding on what's best. Developing a trusting relationship with the professionals helping you in treatment is also crucial to success. Once you have the right treatment program in place, you're on the path to recovery—treatment does work. In fact, about a third of those who undergo treatment are symptom free a year later.

### ONE DAY AT A TIME

An important slogan in the Alcoholics Anonymous 12-Step peer support program is "One day at a time." Rather than challenge yourself with an overwhelming statement like "I'll never drink again," just focus on taking it day by day.

And it's important to know that relapsing is extremely common for people trying to quit or cut back on their drinking. Know that this is just a setback and not a failure. Continue to get support from your doctor, therapist, drug counselor, family and friends as well as from others who have shared your recovery journey.

It takes courage to admit to yourself and others that drinking is a problem for you. But admitting the problem is your first step toward recovery and wellness.

### SOURCES:

**Treatment for Alcohol Problems: Finding and Getting Help.** National Institute on Alcohol Abuse and Alcoholism. Accessed 10/12/2018

**What is alcohol use disorder?** National Institute on Alcohol Abuse and Alcoholism. Accessed 10/12/2018

**Alcoholism and Alcohol Abuse.** Helpguide.org. Accessed 10/12/2018

**What types of alcohol treatment are available?** National Institute on Alcohol Abuse and Alcoholism. Accessed 10/12/2018.

By: Laura Grathwol, Contributing Writer  
October 12 2018

## FAQ's FOR MEMBERS ABOUT SPECIALTY MEDICATIONS

*It is very important that you remain proactive in following up with your specialty medication. This will minimize the delay in getting timely medications.*

### What is a "Specialty Medication"?

Specialty Medications are high-cost medications, regardless of how they are administered (injectable, oral, transdermal, or inhalant), and are often used to treat complex clinical conditions that require close management by a physician due to their potential side effects and the need for frequent dosage adjustments.

### What if my Doctor prescribes a "Specialty Medication" for me?

Most "Specialty Medications" require prior authorization from the Plan. Your doctor will need to complete a Prescription Drug Prior Authorization Request form and submit it to the Health Plan for approval.

### How do I know if my medication is a "Specialty Medication"?

Contact Accredo at (866) 848-9870. Accredo is Express Scripts' specialty pharmacy provider.

### How much will my specialty medication cost?

You can look up your out-of-pocket cost for any medication (whether specialty or not) by going to the Express Scripts website at [www.express-scripts.com](http://www.express-scripts.com) and creating an online account. Or you can call Express Scripts directly at (800) 811-0293 to find out your out-of-pocket cost for a particular medication or for help logging into their website.

### How do I get my specialty medication?

Once the Health Plan approves your doctor's Treatment Authorization Request, Accredo verifies the approval and contacts the patient to coordinate shipment of the medication to the patient's address within 24 to 48 hours. Accredo cannot ship your medication without speaking with you directly to arrange shipment. If you receive a message from Accredo, you will need to call Accredo back. Accredo will also provide any equipment necessary for you to take your medication. You can call Accredo directly with any questions at (866) 848-9870.

### What if I need to start taking my medicine right away?

If your doctor determines that it is medically necessary for you to begin taking the medication right away, he/she can write a prescription for a 1 time 30-day supply to be filled at a local pharmacy upon approval by the Plan.

### What if my medication hasn't arrived yet?

If you are concerned about the amount of time it is taking for your medication to be shipped to you, or if you have any other questions or concerns, please call the Plan's Member Services Department at (805) 981-5050 or toll free at (800) 600-8247 Monday through Friday between the hours of 8:30 am and 4:30 pm.

*For more information about the Plan's Specialty Medication policies or Prescription Medication Benefit Program please see the Plan's website at [www.vhealthcareplan.org](http://www.vhealthcareplan.org) or call the Plan's Member Services Department at (805) 981-5050 or toll free at (800) 600-8247 between the hours of 8:30 am and 4:30 pm Monday-Friday.*

# Pharmacy Updates

Ventura County Health Care Plan updates the formulary with changes on a monthly basis and re-posts it in the VCHCP's member website. Here is the direct link of the electronic version of the formulary posted on the Ventura County Health Care Plan's website: <http://www.vhealthcareplan.org/members/programs/docs/ProviderDrugList.pdf>

*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 High-Performance 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: <http://www.vhealthcareplan.org/members/pharmacy.aspx>



## Formulary Additions: Q2-2019

### New Generics:

LETAIRIS  
TRACLEER  
SUPRAX  
LORZONE  
EXJADE  
TARCEVA  
FASLODEX  
LOTEMAX  
DELZICOL  
MIFEPREX  
NAFTIN  
NIACOR  
PALONOSETRON HCL  
CUPRIMINE  
REVATIO  
VESICARE  
VALSTAR

### New and Existing Brands/Chemicals:

"BALVERSA 3 MG TABLET	HEMOFIL M 500 UNIT NOMINAL
BALVERSA 4 MG TABLET	HEMOFIL M 250 UNIT NOMINAL"
BALVERSA 5 MG TABLET"	INBRIJA 42 MG INHALATION CAP
BIKTARVY 50-200-25 MG TABLET	JULUCA 50-25 MG TABLET
CABLIVI 11 MG KIT	"LUPRON DEPOT-PED 11.25 MG 3MO
"COMETRIQ 60 MG DAILY-DOSE PACK	LUPRON DEPOT-PED 11.25 MG KIT
COMETRIQ 100 MG DAILY-DOSE PK	LUPRON DEPOT-PED 15 MG KIT
COMETRIQ 140 MG DAILY-DOSE PK"	LUPRON DEPOT-PED 30 MG 3MO KIT
DDAVP 10 MCG/0.1 ML SOLUTION	LUPRON DEPOT-PED 7.5 MG KIT"
"DIACOMIT 250 MG CAPSULE	"ORILISSA 150 MG TABLET
DIACOMIT 250 MG POWDER PACKET	ORILISSA 200 MG TABLET"
DIACOMIT 500 MG CAPSULE	"PRALUENT 75 MG/ML PEN
DIACOMIT 500 MG POWDER PACKET"	PRALUENT 150 MG/ML PEN (NDCs starting
DOVATO 50-300 MG TABLET	with 72733)"
ELZONRIS 1,000 MCG/ML VIAL	PRIMAQUINE 26.3 MG TABLET
"HEMOFIL M 1,700 UNIT NOMINAL	SKYRIZI 150 MG DOSE KIT-2 SYRN
HEMOFIL M 1,000 UNIT NOMINAL	

### Line Extensions - New Dosage Forms/Strengths

KALYDECO 25 MG GRANULES PACKET	PROGRAF 0.2 MG GRANULE PACKET	ZYKADIA 150 MG TABLET
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### Formulary Removals/Deletions: Q2-2019

"EXJADE 125 MG TABLET  
EXJADE 250 MG TABLET  
EXJADE 500 MG TABLET"  
"GABLOFEN 10,000 MCG/20 ML VIAL  
GABLOFEN 20,000 MCG/20 ML VIAL  
GABLOFEN 40,000 MCG/20 ML VIAL"  
MESTINON 60 MG/5 ML SYRUP  
"TARCEVA 25 MG TABLET  
TARCEVA 100 MG TABLET  
TARCEVA 150 MG TABLET"  
ZOMETA 4 MG/100 ML INJECTION

### Updated VCHCP Custom Drug Policies

Isentress Drug Policy	Truvada Drug Policy
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### New VCHCP High Level Drug Policy

New to Market Medical and Pharmacy Benefit Products

### New ESI Drug Policies:

Inflammatory Conditions – Skyrizi PA Policy	Multiple Sclerosis – Mayzent PA Policy
Multiple Sclerosis – Mavenclad PA Policy	

### Existing ESI Drug Policies

Inflammatory Conditions Care Value Policy	Cystic Fibrosis – Kalydeco PA Policy
Multiple Sclerosis Care Value Policy	Oncology – Revlimid PA Policy
Inflammatory Conditions – Cimzia PA Policy	Oncology – Jakafi PA Policy
Oncology – Ibrance PA Policy	
PCKS9 Inhibitors - Praluent – Not on Formulary – for exception review only	
Muscular Dystrophy – Emflaza PA Policy – Not on Formulary – for exception review only	

*For questions, concerns, or if you would like a copy mailed to your home address please call Ventura County Health Care Plan at (805) 981-5050 or (800) 600-8247. You may also contact Express Scripts directly at (800) 811-0293.*

# Breast Cancer: What You Need to Know

*Cancer* is a disease in which cells in the body grow out of control. When cancer starts in the breast, it is called *breast cancer*. Except for skin cancer, breast cancer is the most common cancer in American women.

Breast cancer *screening* means checking a woman's breasts for cancer before she has any symptoms. A *mammogram* is an X-ray picture of the breast. Mammograms are the best way to find breast cancer early, when it is easier to treat and before it is big enough to feel or cause symptoms.

## Some things may increase your risk

*The main factors that influence your breast cancer risk are being a woman and getting older. Other risk factors include:*

- Changes in breast cancer-related genes (BRCA1 or BRCA2).
- Having your first menstrual period before age 12.
- Never giving birth, or being older when your first child is born.
- Starting menopause after age 55.
- Taking hormones to replace missing estrogen and progesterone in menopause for more than five years.
- Taking oral contraceptives (birth control pills).
- A personal history of breast cancer, dense breasts, or some other breast problems.
- A family history of breast cancer (parent, sibling, or child).
- Getting radiation therapy to the breast or chest.
- Being overweight, especially after menopause.

## Symptoms

*Some warning signs of breast cancer are—*

- New lump in the breast or underarm (armpit).
- Thickening or swelling of part of the breast.
- Irritation or dimpling of breast skin.
- Redness or flaky skin in the nipple area or the breast.
- Pulling in of the nipple or pain in the nipple area.
- Nipple discharge other than breast milk, including blood.
- Any change in the size or the shape of the breast.
- Pain in the breast.

**Most women who are 50 to 74 years old should have a screening mammogram every two years.**

If you are 40 to 49 years old, or think you may have a higher risk of breast cancer, ask your doctor when to have a screening mammogram.

## Can't afford a mammogram?

If you have a low income or do not have insurance and are between the ages of 40 and 64, you may qualify for a free or low-cost mammogram through CDC's National Breast and Cervical Cancer Early Detection Program. To learn more, call (800) CDC-INFO.



**Other conditions can cause these symptoms.**  
*If you have any signs that worry you, call your doctor right away.*

## More Information

[www.cdc.gov/cancer/breast/](http://www.cdc.gov/cancer/breast/) • (800) CDC-INFO  
(800-232-4636) • TTY: (888) 232-6348

National Center for Chronic Disease Prevention and Health Promotion  
Division of Cancer Prevention and Control



## EARLY DETECTION IS YOUR BEST PROTECTION AGAINST BREAST CANCER

### VCHCP NETWORK RADIOLOGY FACILITIES

You can now set an appointment for a screening mammogram directly with any VCHCP contracted radiology facility without a doctor's prescription or order. There is no copay for screening mammogram at any of these contracted facilities.

Bring this card with you to your mammogram appointment and give it to the radiology office. Remember to ask the radiology office to send the result of your mammogram to your primary care physician.

**Ventura County Medical Center Radiology (VCMCR)**  
(805) 652-6080  
M-F 8 AM - 4:15 PM

**Grossman Imaging Centers**  
(805) 988-0616  
VENTURA LOCATION  
W 8 AM - 4 PM  
F 8 AM - 4 PM  
OXNARD LOCATION  
M 9 AM - 4:30 PM  
THU 9 AM - 4:30 PM

**Rolling Oaks Radiology**  
(805) 357-0067  
PRESS OPTION 2  
VENTURA LOCATION  
M-F 8 AM - 5 PM  
CAMARILLO LOCATION  
M-F 8 AM - 5 PM

**OXNARD LOCATION**  
M-F 8 AM - 5 PM  
**THOUSAND OAKS LOCATION**  
M-F 7:30 AM - 5 PM

**Rolling Oaks St. Johns Imaging Center**  
(805) 983-0883  
M-F 8 AM - 5 PM

**Palms Imaging**  
(805) 604-9500  
M-W 8 AM - 5 PM  
TTH 7:30 AM - 7:30 PM  
Open 3 Saturdays each Month  
8 AM - 2 PM

**Nancy Reagan Breast Center**  
(805) 955-6122  
M-F 8 AM - 4 PM

**Alamo Imaging Center**  
(805) 357-0067  
M-F 8 AM - 4:30 PM

GET YOUR SCREENING MAMMOGRAM DONE WHEN RECOMMENDED. VCHCP and the U.S. Preventive Services Task Force recommends a screening mammogram every two years between the ages of 50 and 74. Note: If you are having a diagnostic mammogram, copayment applies.

5/2019

## Breast Cancer Screening

Early detection is the best practice against cancer, especially breast cancer. In an effort to increase awareness, VCHCP sent mammogram post cards to those who are due for their breast cancer screening. The postcards were mailed in May and will be mailed out again in October. Our goal is to provide education to you to complete this important screening.

**If you have any questions or concerns, please contact our Health Services Department at (805) 981-5060.**

# MEMBER SATISFACTION WITH Utilization Management

**SURVEY  
RESULTS**

**A**s part of our continuing commitment to serve our members, VCHCP conducted a 2018 Consumer Assessment of Healthcare Providers and System (CAHPS) survey. The purpose of this survey is to measure how well the Health Plan meets members' expectations and goals. SPH Analytics was selected by VCHCP to randomly select eligible members to participate in the survey using a combination of mail and telephone outreach.

We would like to thank the 238 members who responded to our survey, yielding a 23.7% response rate. Based on your responses, specifically with regards to your "experience with our Utilization Management" (UM), the Plan is committed to improving member survey results and experiences. The specific questions in the survey that pertain to your experience with our UM are:

**Q14: In the last 12 months, how often was it easy to get the care, tests, or treatment you needed?**

**Q25: In the last 12 months, how often did you get an appointment to see a specialist as soon as you needed?**

*We heard your feedback and recognize we have opportunities for improvement. We have implemented actions to improve your experience with our Utilization Management such as:*

➤ **VCHCP continues to utilize our Direct Specialty Referral Program for our VCHCP health plan members.**

The Primary Care Physicians can directly refer members to certain in network/contracted specialty providers

without requiring prior authorization. This program was updated to include additional specialties, along with adding procedures available under the direct referral.

➤ **In addition to expanding the specialists in the direct specialty referral program, the Plan's UM removed prior authorization on services that the Plan generally approve, reducing the barrier of having to obtain prior authorization.**

The intent is to make it easy for members to get these services.

➤ **We are working with our Provider Network to address the issue of getting timely appointments with specialists for our members.**

- Executed a contract with Davita – Dialysis, Advanced Pain Medical Group- Pain Management, Advanced Surgery Specialty Surgical Center, Alinea Imaging-Mobile Mammography, Scott Roberg., DPM – Podiatry and Ross Kaplan - Dermatology. Executed a contract with Millennium Health, LLC – Ancillary Agreement/Drug testing, 360 Nutrition Consulting – Specialist Agreement.
- The Ventura County Medical Center (VCMC) Ambulatory Clinic hired and recruiting physicians in the various specialties such as Cardiologist, General Surgeon, Neurological Surgeons, Pulmonologist, Pediatric Neurologist, Pediatric Gastroenterologist, OB/GYN and NP for the Neuroscience Center
- Continued use of the existing "VCHCP Member only" clinic located in Camarillo. This VCHCP member only clinic is part of the

VCMC network and timely appointments are available.

- Sixty-Seven (67%) reduction of access issues from the commencement of the Access to Care Task Force in August of 2015. The Plan created an Access to Care Task Force under the Plan's Network Relations to address and resolve access issues with VCMC Ambulatory Care. If you or your family member are having trouble in getting timely appointments, please contact us at (805) 981-5050.

➤ **Our UM department continues to utilize an electronic prior authorization referral process at VCMC through the Cerner system.**

VCHCP continues to work with VCMC to improve access to timely appointments by improving the VCMC referral center process.

➤ **The Plan's Member Services department measures/monitors access issues through Plan complaint and grievance data.**

The Plan assists members in getting appointments or may arrange case agreements with providers. Access issues are addressed for continued improvement with collaboration between the Plan and providers.

➤ **The Plan has made concerted efforts to contract with needed specialists in geographic areas of need.**

➤ **The Plan's IVR messaging was updated to direct callers to call Member Services for status of authorization requests.**

In addition, urgent calls/UM decision issue calls to Member Services regarding UM issues are directed to a live UM staff via warm transfer

► **A staff to handle intake processing of TARs was hired to backfill for the UM Manager.**

This not only resulted in closing the gap with handling intake processing of TARs, it also allowed timely response to voicemail within 24 hours.

► **In addition, as Member Services started handling the calls for status of authorization, the UM intake could manage the lower volume of voice-mails and could return the voicemail messages within 24 hours.**

Our UM department continues to monitor the timeliness of our UM prior authorization processing on a daily basis to ensure timely review. Certain benefits require prior authorization from the VCHCP in order to be covered. This means that visits to certain specialists, specific tests, and some prescription medications require the requesting physician to submit a Treatment Authorization Request (TAR) to VCHCP. VCHCP UM Department reviews the request and it is either approved or denied based on medical necessity. For more information about the TAR review process please see your plan's Evidence of Coverage (EOC) Booklet available at [www.vchealthcareplan.org](http://www.vchealthcareplan.org). VCHCP must approve the request in order for the Plan to pay for the cost of the service(s). Generally, routine authorization requests are processed within 5 business days.

Additionally, did you know that our UM department tracks how long it takes to respond to each request it receives? This is reported to our Utilization Management Committee on a quarterly basis as the UM Turn-Around-Time. There are strict regulatory requirements for the time UM takes to respond to requests that are received by the Plan. When turn-around-times do not meet specified goals, a Corrective Action

Plan (CAP) is activated to ensure improvement occurs. So far in 2019, over 99% of requests received have been completed within the specified regulatory requirement.

In order to meet the steps of prior authorization, the prescribing physician must submit the TAR. Without the TAR, the Plan is not aware that you are in need of services. Some members call the Plan with concerns that they have not received authorization for the service

requested, and it is found that the physician has not submitted the request yet, or the request has not been processed through the physician's office referral system. This delay in the process can lead to increased time it takes to get the services needed. The Plan is working closely with physician offices to ensure that the offices submit the TARs to the Plan's UM Department as soon as possible. This will help prevent delays in the process.

*If you would like to know if VCHCP has received your TAR, you may call the Plan's Member Services Department at (805) 981-5050 from 8:30 am to 4:30 pm. Your continued participation in our annual member satisfaction surveys and other feedback will help us identify areas of opportunity for improvement, which in turn aids us in increasing the quality of care you receive.*

## REQUEST Case Management or Disease Management

Members now have an opportunity to seek assistance for complex and or chronic medical needs such as asthma, diabetes, and coordination of challenging care online! Visit <http://www.vchealthcareplan.org/members/memberIndex.aspx>, and on the right side of the site, click "Request Case Management or Disease Management". You will be prompted to enter member specific information. You will then submit this form to a secure email. A nurse will evaluate your request and call you within 2 business days. If you would like to speak directly with a nurse, please call (805) 981-5060 and ask for a Case Management Nurse.

## Have your say about your experience with Disease Management and Case Management

All VCHCP members who are in our Disease Management or Case Management Programs will receive a survey to evaluate the program they are enrolled in. These surveys are to measure how useful our programs are to the members, and to evaluate where we need to improve. Programs being surveyed include, Diabetes Disease Management, Asthma Disease Management, and Autism Case Management. When you receive the survey, simply complete the questions and return it in the pre-paid envelope. Your responses are completely anonymous. As a special thank you for completing our survey, you have the option to receive a free Goody Bag (includes recipe books) from Champions for Change: Network for a Healthy California. Please click on the link listed on your survey so we know where to send your bag. Thank you in advance for helping us evaluate our programs, making them even better! If you have questions regarding surveys or any of our Disease Management or Case Management programs, call Utilization Management at (805) 981-5060.

# Imaging Tests FOR LOWER-BACK PAIN

*You probably don't need an X-ray, CT scan, or MRI*

**X**rays, CT scans, and MRIs are called imaging tests because they take pictures, or images, of the inside of the body. You may think you need one of these tests to find out what is causing your back pain. But these tests usually don't help. Here's why:

## **The tests will not help you feel better faster.**

Most people with lower-back pain feel better in about a month, whether or not they have an imaging test.

People who get an imaging test for their back pain do not get better faster. And sometimes they feel worse than people who took over-the-counter pain medicine and followed simple steps, like walking, to help their pain.

Imaging tests can also lead to surgery and other treatments that you do not need. In one study, people who had an MRI were much more likely to have surgery than people who did not have an MRI. But the surgery did not help them get better any faster.

## **Imaging tests have risks.**

X-rays and CT scans use radiation. Radiation has harmful effects that can add up. It is best to avoid radiation when you can.

## **Imaging tests are expensive.**

Imaging tests can cost hundreds, or even thousands, of dollars depending on the test and where you have it. Why waste money on tests when they don't help your pain? And if the tests lead to surgery, the costs can be much higher.



## **When are imaging tests a good idea?**

- Weight loss that you cannot explain
- Fever over 102° F
- Loss of control of your bowel or bladder
- Loss of feeling or strength in your legs
- Problems with your reflexes
- A history of cancer

These symptoms can be signs of nerve damage or a serious problem such as cancer or an infection in the spine.

*If you do not have any of these symptoms, we recommend waiting a few weeks.*

*This report is for you to use when talking with your healthcare provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.*

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[www.choosingwisely.org/patient-resources](http://www.choosingwisely.org/patient-resources)

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FOUNDATION



ADVANCING GLOBAL SPINE CARE

# VCHCP NETWORK Updates

For a full list of participating providers please see our website: <http://www.vchealthcareplan.org/members/physicians.aspx> or contact Member Services at **(805) 981-5050**.

## NEW TO THE NETWORK!

**Andrew Armstrong III, P.A.-C.** at Ventura Orthopedic Medical Group Inc. in Oxnard has been added, effective March 2019.

**Arthur Peters, M.D.**, an ENT physician at Anacapa Surgical Associates (VCMC) in Ventura has been added, effective May 2019.

**Central Coast Center for Gynecologic Oncology**, a specialty clinic has been added, effective March 2019.

**Charles Pankratz, M.D.**, a hospice and palliative medicine physician at Ventura Care Partners APC in Ventura has been added, effective April 2019.

**Christina Matts, M.D.**, a hospice and palliative medicine physician at Ventura Care Partners APC in Ventura has been added, effective April 2019.

**Colin Scibetta, M.D.**, a hospice and palliative medicine physician at Ventura Care Partners APC in Ventura has been added, effective April 2019.

**David Philips, M.D.**, a interventional cardiologist at Cardiology Associates Medical Group in Oxnard and Ventura has been added, effective March 2019.

**Donald Miller, M.D.**, a gastroenterologist at Insite Digestive Health Care in Camarillo and Oxnard has been added, effective March 2019.

**Hang Tran, M.D.**, a pediatrician at Santa Paula West Medical Group & Pediatrics (VCMC) in Santa Paula and Mandalay Bay Women & Children's Med Grp (VCMC) in Oxnard has been added, effective June 2019.

**Jennifer Gros, P.A.** at Ventura Orthopedic Medical Group in Simi Valley has been added, effective April 2019.

**Jennifer Wan, M.D.**, a cardiothoracic surgeon at Anacapa Surgical Associates (VCMC) in Ventura has been

added, effective January 2019.

**Kelly Hines-Stellisch, F.N.P.** at Magnolia Family Medical Clinic West (VCMC) in Oxnard has been added, effective April 2019.

**Kristin Nurre, N.P.** at Dignity Health Medical Group Ventura County in Ventura has been added, effective March 2019.

**Lisa Solinas, M.D.**, a family medicine physician at Fillmore Family Medical Group (VCMC), Santa Paula Medical Group (VCMC) and Santa Paula West Medical Group & Pediatrics (VCMC) has been added effective August 2019.

**Lori Sikorra, F.N.P.** at Dignitary Health Medical Group Ventura County in Oxnard has been added, effective April 2019.

**Minesh Patel, D.O.**, a pediatric gastroenterologist at Pediatric Diagnostics Center (VCMC) in Ventura has been added, effective April 2019.

**Nicole Sherman, N.P.** at Magnolia Family Medical Clinic West (VCMC) in Oxnard has been added, effective May 2019.

**Ramsey Ulrich, M.D.**, an internal medicine physician at Dignity Health Medical Group Ventura County in Ventura has been added, effective March 2019.

**Robert Vasko, M.D.**, a pediatrician at Pleasant Valley Pediatric Medical Group in Camarillo has been added, effective May 2019.

**Sarmen Sarkissian, M.D.**, a hematology/oncology physician at the Hematology-Oncology Clinic (VCMC) in Ventura has been added, effective May 2019.

**Summit Home Health Inc.**, a home health ancillary provider in Simi Valley has been added, effective May 2019.

**Sunita Sujanani, M.D.**, a family medicine physician at Dignity Health Medical Group in Ventura has been

added, effective March 2019.

**Ventura Care Partners APC**, a hospice and palliative medicine ancillary provider in Ventura has been added, effective April 2019.

## LEAVING THE NETWORK

**Adam Catevenis, P.A.** at Ventura Orthopedic Medical Group in Simi Valley has left, effective October 2018.

**Alexis Dougherty, M.D.**, a dermatologist at Anacapa Dermatology Clinic (VCMC) in Ventura has left, effective May 2019.

**Amy Lin, M.D.**, a family medicine physician at Sierra Vista Family Medical Clinic (VCMC) in Simi Valley has left, effective June 2019.

**Ana Flavia Alpern, M.D.**, a pediatrician at Santa Paula West Medical Group and Pediatrics (VCMC) in Santa Paula has left, effective June 2019.

**Anita Sicolo, M.D.**, a pediatric gastroenterologist at Pediatric Diagnostics Center (VCMC) in Ventura has left, effective April 2019.

**Christina Monroy-Cardenas, P.A.** at Fillmore Family Medical Group (VCMC) in Fillmore has left, effective September 2019.

**Christy Monteith, F.N.P.** at Pediatrics Diagnostics Center (VCMC) in Ventura has left, effective April 2019.

**Clinton McBride, M.D.**, a family medicine physician at Santa Paula Hospital Clinic (VCMC) and Santa Paula West Medical Clinic & Pediatrics (VCMC) has left, effective July 2019.

**Dana Chavolla, N.P.** at Santa Paula Hospital Clinic (VCMC) in Santa Paula has left, effective July 2019.

**Daniel Lee, M.D.**, a physical medicine & rehabilitation provider at Neuroscience Center of Ventura County-West

# VCHCP NETWORK Updates

(VCMC) in Ventura, will be leaving, effective July 2019.

**Drew Kelts, M.D.**, a pediatric gastroenterologist at Pediatric Diagnostics Center (VCMC) in Ventura has left, effective April 2019.

**Emem Brown, P.A.-C.** at Santa Paula West Medical Group & Pediatrics (VCMC) in Santa Paula has left, effective July 2019.

**Habib Khan, M.D.**, a family medicine physician at Clinicas Del Camino Real Inc., Simi Valley in Simi Valley and Clinicas Del Camino Real Inc., La Colonia in Oxnard has left, effective June 2019.

**Hanna Ginther, P.A.-C.** at Clinicas Del Camino Real Inc. Oceanview has left, effective June 2019.

**Janelle Bohl, M.D.**, a pediatrician at Santa Paula West Medical Group & Pediatrics (VCMC) in Santa Paula has left, effective June 2019.

**Janice Holden, F.N.P.** at Island View Gastroenterology Associates in Ventura has left, effective November 2018.

**Josefina Arrigoni, F.N.P.** at Santa Paula Hospital Clinic (VCMC) in Santa Paula has left, effective March 2019.

**Justin Fawell, P.A.-C.** at Clinicas Del Camino Inc. La Colonia in Oxnard has left, effective July 2019.

**Lisa Solinas, M.D.**, a family medicine physician at Santa Paula Hospital Clinic (VCMC) and at Santa Paula West Medical Group & Pediatrics (VCMC) has left, effective May 2019.

**Lori Howell, M.D.**, a plastic surgeon at Anacapa Plastics and Hand Reconstruction (VCMC) in Ventura has left, effective August 2019.

**Marie Brock, M.D.**, a family medicine physician at West Ventura Medical Clinic (VCMC) in Ventura has left,

effective May 2019.

**Michael Gold, M.D.**, a pediatrician at Pleasant Valley Pediatric Medical Group in Camarillo has retired, effective June 2019.

**Nicholas De La Motte Hurst, P.A.** at Ventura Orthopedics Medical Group in Simi Valley has left, effective March 2019.

**Nicole Kehoe, M.D.**, a family medicine physician at Santa Paula Medical Clinic (VCMC) in Santa Paula has left, effective September 2019.

**Niloofer Farmani, M.D.**, a rheumatologist at Conejo Valley Family Med Grp (VCMC) in Thousand Oaks has left, effective August 2019.

**Peter Robilio, M.D.**, a maternal & fetal medicine physician at Central Coast Perinatal Medical Group in Santa Barbara has left, effective April 2019.

**Rachel Mory, M.D.**, a rheumatologist at Medicine Specialty Center West (VCMC) In Ventura and at Las Posas Family Medical Group (VCMC) in Camarillo has left, effective May 2019.

**Rajinder Maan, M.D.**, a family medicine physician at Clinicas Del Camino Real Inc., Comunidad De Oxnard in Oxnard has left, effective July 2019.

**Robert Hesselgesser, M.D.**, a radiation oncologist at North Oaks Radiation Oncology Center in Thousand Oaks and Westlake Radiation Center in Westlake Village has retired, effective March 2018.

**Seth Alkire, M.D.**, a family medicine physician at Santa Paula Hospital Clinic (VCMC) in Santa Paula has left, effective August 2018.

**Shiney Koshy, M.D.**, a pediatric neurologist at Pediatric Diagnostic Center (VCMC) in Ventura has left, effective July 2019.

**Stephanie Culver, M.D.**, an ENT

physician at Ventura Ear, Nose & Throat Medical Group in Ventura has left, effective April 2019.

**Stephanie D'Augustine, M.D.**, a pediatrician at Santa Paula West Medical Group and Pediatrics (VCMC) in Santa Paula has left, effective June 2019.

**Trish Reyes, N.P.** at Clinicas Del Camino Real Inc. in Santa Paula has left, effective April 2019.

**William Klope, M.D.**, a urologist in Ventura has left, effective June 2019.

**Yelena Gimelberg, P.A.-C.** at Clinicas Del Camino Real Inc., Ojai Valley Community Health Ctr in Ojai has left, effective June 2019.

## CHANGES

All the neurosurgeons from the **Neuroscience Center of Ventura County (VCMC)** in Ventura have been relocated to a different location and name, **Anacapa Neurosurgery (VCMC)** at 300 Hillmont Ave., Bldg. 340, Ste. 401, in Ventura, effective June 2019.

**Anacapa Dermatology (VCMC)** name has been removed. All the providers have moved to **Medicine Specialty Center West (VCMC)** at 300 Hillmont Ave., Bldg. 340, Ste. 502. in Ventura, effective May 2019.

**Anacapa Plastic, Reconstructive and Hand Surgery (VCMC)** in Ventura has moved to 300 Hillmont Ave., Bldg. 340, Ste. 401 in Ventura and has changed their name to **Anacapa Plastics and Hand Reconstruction**, effective May 2019.

**Charles Stolar, M.D.**, a pediatric surgeon is also providing services at Pediatric Diagnostic Center (VCMC) in Ventura, effective May 2019.

**Clinicas Del Camino Real Inc.**, has opened a new service location in Camarillo, effective April 2019.

**Dignity Health Medical Group Ventura County** has added a new service location in Ventura on Main St., effective March 2019.

Most of the neurologist, pain management and physical med.& rehab from **Neuroscience Center of Ventura County (VCMC)** in Ventura have been relocated to **West Ventura Medical Clinic (VCMC)** in Ventura, effective June 2019.

**Rolling Oaks Radiology** has a new location in Oxnard. They are also now at 1700 N. Rose Ave., #110, Oxnard, CA, 93030. They have replaced what use to be St. John's Regional Imaging Center, effective March 2019.

**Sang Il Lee, M.D.**, a pediatric surgeon is also providing services at Pediatric Diagnostic Center (VCMC) in Ventura, effective May 2019.

**Stroke & Neurovascular Ctr of Central CA** has moved its service location at Oxnard from 1700 N. Rose Ave., Ste. 370 to 1901 Holser Walk, Ste. 310., effective January 2019.

**Tamir Keshen, M.D.**, a pediatric surgeon is also providing services at Pediatric Diagnostic Center (VCMC) in Ventura, effective May 2019.

**The Neuroscience Center of Ventura County (VCMC)** in Ventura has closed, effective May 2019. All providers have been relocated.

**Two Trees Physical Therapy & Wellness** has opened a new service location in South Oxnard, effective June 2019.

**Ventura Cardiology Consultants** in Santa Paula has closed this service location, effective April 2019.

**West Coast Hearing and Balance Center** has opened a new service location in Ojai, effective March 2019.

**West Coast Vascular** has opened a new service location in Thousand Oaks, effective January 2019.

**West Coast Vascular** service location at 2100 Solar Dr., Ste 202 in Oxnard has moved to 2000 Outlet Center Dr., Ste. 225 in Oxnard, effective July 2018.

## 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:

- 1 Members have a right to receive information about VCHCP, its services, its Practitioners and Providers, and Members' Rights and Responsibilities.
- 2 Members have a right to be treated with respect and recognition of their dignity and right to privacy.
- 3 Members have a right to participate with Practitioners and Providers in decision making regarding their health care.
- 4 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.
- 5 Members have a right to make recommendations regarding VCHCP's Member Rights and Responsibility policy.
- 6 Members have a right to voice complaints or appeals about VCHCP or the care provided.
- 7 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.
- 8 Members have a responsibility to follow the plans and instructions for care that they have agreed upon with their Practitioners and Providers.
- 9 Members have a responsibility to understand their health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.

For information regarding the Plan's privacy practices, please see the "HIPAA Letter and Notice of Privacy Practices" available on our website at: <http://www.vhealthcareplan.org/members/memberIndex.aspx>. Or you may call the Member Services Department at (805) 981-5050 or toll free at (800) 600-8247 to have a printed copy of this notice mailed to you.



VENTURA COUNTY

**HEALTH CARE PLAN**

A Department of Ventura County Health Care Agency

2220 E. Gonzales Road, Suite 210-B  
Oxnard, CA 93036

