CenCalHEALTH®
Local. Quality. Healthcare. | 40th ANNIVERSARY 1983 - 2023

PROVIDER *BULLETIN*

A QUARTERLY PUBLICATION FOR PROVIDERS

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A MESSAGE FROM OUR CEO

Compassionate Service

I want to take a moment to celebrate the compassionate service you provide. As 2023 draws to a close, we express our gratitude for your unwavering commitment to the members we serve, exceptional progress on reforms and initiatives, and remarkable achievements in quality of care.

At CenCal Health, this is also a time to celebrate the value of compassionate service, which is on display by healthcare providers in our community every day. I see you and your teams supporting our members like friends and family, reinforcing a sense of unity and caring within our community. I believe that this, in turn, promotes a healthier and more inclusive environment for everyone. As patients navigate our healthcare system's complexities, your connections with our members and community partners are life-changing.

The health coverage that CenCal Health provides keeps families from worrying and provides continued access to the high-quality healthcare that you provide. We also celebrate the customer service we provide to each other. The long-term benefit of compassionate service extends far beyond the daily assistance you provide. It creates a foundation of trust, expands our perspectives, develops empathy and helps us become more aware of the diverse needs of our organizations and community. It is an investment in well-being.

This month, CenCal Health celebrates 40 years of serve in Santa Barbara County and 15 years of service in San Luis Obispo County. This milestone is only possible through our continued partnership and our willingness to invest in compassionate service, strong partnership and local innovation. Next year will bring the expansion of community supports and enhanced care management to those in need.

CenCal Health will also reach for and achieve health plan accreditation from the National Committee of Quality Assurance (NCQA) and advance efforts to develop a locally responsive and high-quality Dual Special Needs Program (DSNP), which will become an option for those on both Medicare and Medi-Cal in 2026 and beyond. As we embrace what is possible, through our partnership, I am heartened by the values we share.

These include compassionate service, collaboration, integrity and improvement. Thank you for your support of a program that continues the legacy of high quality care and service through a health plan that is locally governed and directly accountable to the community it serves. Together, we are making a significant impact.

Marina A. Owen
Marina Owen, CEO

CenCal Health's Provider Satisfaction Survey Has Launched!

CenCal Health is grateful for the relationship that we have with our providers. Our collaboration with you is the backbone of our mission, and we deeply value your knowledge, experience, and commitment to serving the Medi-Cal population.

CenCal Health continues to look forward to how we can better serve our providers and strengthen our communities. This year, in order to better serve you, we have engaged with a third-party vendor to increase the quality of our Provider Satisfaction Survey. On our behalf, Press Ganey, also known as SPH Analytics, will be reaching out to many of our providers with an individualized link to an online survey. This outreach will be done in the form of mail and email, starting the first week of December, with follow up phone calls in January.

Your voice is so important in our work to improve the services we offer both you and your patients, we hope that you will take the time to make it heard.

Spread the word:

Age and immigration status no longer barriers to Medi-Cal access in 2024

California completes its phase-in of Medi-Cal eligibility on January 1, 2024, when all residents, regardless of age or immigration status, can qualify for free or low-cost coverage.

You can make a difference in expanding healthcare access to residents in your community by sharing important facts with your patients about who qualifies for Medi-Cal:

- The latest expansion allows adults ages 26 through 49 to qualify for full-scope Medi-Cal, regardless of immigration status. All other Medi-Cal eligibility rules, including income limits, will still apply.
- Applying for Medi-Cal does not impact an individual's immigration status; their information is only used to determine if they qualify for benefits.
- County residents, including those who were previously ineligible for Medi-Cal, can apply now to see if they qualify for To apply, individuals only need to provide a driver's license or photo ID, proof of income (such as a current pay stub or bank statement), and proof of residence (such as a utility bill).

If you would like resources to share about applying for Medi-Cal benefits, please reach out to the Provider Relations Department at (805) 562-1676 or email **psrgroup@cencalhealth.org**.

Help your patients avoid disenrollment during their Medi-Cal annual renewal

The renewal disenrollment rate in our counties averaged 18.5% in September, which is less than the statewide average of 20.5%, according to the Department of Health Care Services. The vast majority were disenrolled due to "procedural reasons," which most often means they did not return their renewal packet, or it was missing information.

The process of redetermination is new to many Medi-Cal recipients, following three years of not needing to renew coverage during the COVID-19 Public Health Emergency.

Important information to share with your patients about Medi-Cal renewal:

- All Medi-Cal members have their coverage reviewed once per year, and renewal dates vary.
- Members who have action required to renew their coverage will be mailed a yellow envelope with a Medi-Cal renewal form. Current members will need to confirm information such as income, household details, address, and may need to provide supporting documents.
- There are four ways for members to renew Medi-Cal:

  1. **Online:** Create an account on BenefitsCal.com.
  2. **Mail:** Follow instructions on the renewal form.
  3. **Phone:** Call their local Medi-Cal office.
  4. **In person:** Visit their local Medi-Cal office.

- If the renewal due date is missed, the member will be disenrolled. However, if it is less than 90 days from the due date listed in the packet, a member can still submit the form or missing information and have coverage retroactively reinstated without having to re-apply for Medi-Cal.

For more information, visit cencalhealth.org/redeterminationFAQ

CalAIM Trainings On the Horizon

Webinar Symposiums Available!
Substance Use Disorder (SUD) and the Justice System

As part of the Medication Assisted Treatment (MAT) Expansion Project in Jails and Drug Courts Learning Collaborative, Health Management Associates (HMA) is offering foundational training to the CenCal Health provider network to build capacity to address the needs of the justice-involved population.

This series of six 90-minute trainings from 12:30 – 2 p.m. will provide information on the latest evidence-based best practices for SUD care and the justice system.

Learning Objectives & Webinar Dates:

- Webinar 1: Substance Use Disorder 101: Neurobiology, Recovery Systems and MAT – Training Video Available at **cencalhealth.org/providers/provider-training-resources/**
- December 14, 2023 – Webinar 2: Substance Use Disorder and the Justice System
- January 4, 2024 – Webinar 3: Stigma, Trauma Informed Care (TIC) and Harm Reduction
- January 18, 2024 – Webinar 4: Special Populations with SUD in the Justice System
- February 1, 2024 – Webinar 5: Co-occurring Disorders and the Criminal Justice System
- February 15, 2024 – Webinar 6: The Importance of Transitions for Persons in the Justice System

We invite our provider network to attend these trainings! The trainings also include time for questions. All sessions will be recorded and made available for future training use. If you're interested in attending any or all of these webinar series, please go to **cencalhealth.org/providers/provider-training-resources/**.

New Community Supports Launching January 1, 2024!

CenCal Health is excited to announce the Community Supports programs which we will be launching on January 1, 2024!

The programs that will take effect on January 1, 2024, are:

Short-term Post Hospitalization Housing

Available for members who do not have a residence and who have high medical or behavioral health needs with the opportunity to continue their medical/psychiatric/substance use disorder recovery immediately after exiting an inpatient hospital, residential substance use disorder treatment or recovery facility, residential mental health treatment facility, correctional facility, nursing facility, or recuperative care and avoid further utilization of state plan services.

Personal Care and Homemaker Services

Provide for individuals who need assistance with Activities of Daily Living, such as bathing, dressing, toileting, ambulation, or feeding. Personal Care Services can also include assistance with Instrumental Activities of Daily Living, such as meal preparation, grocery shopping, and money management.

Respite Services

Provide caregivers of members who require intermittent temporary supervision. The services are provided on a short-term basis because of the absence or need for relief of those persons who normally care for and/or supervise them and are non-medical in nature. This service is distinct from medical respite/recuperative care and is rest for the caregiver only.
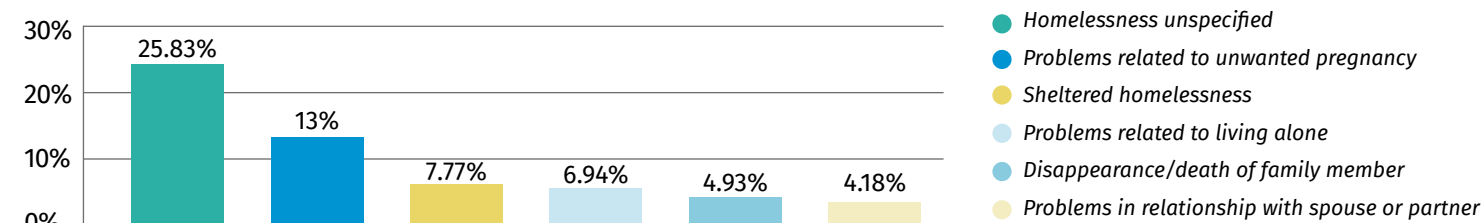
Day Habilitation

Programs are provided in a member's home or an out-of-home. The programs are designed to assist the member in acquiring, retaining, and improving self-help, socialization, and adaptive skills necessary to reside successfully in the person's natural environment. The services are often considered as peer mentoring when provided by an unlicensed caregiver with the necessary training and supervision.

If you are interested in contracting with CenCal Health to provide one or more of the above services, or if you'd like to learn more, please contact the Provider Relations Department at (805) 562-1676, and/or email **psrgroup@cencalhealth.org** for more information. Additional resources can also be located online at **cencalhealth.org/providers/calaim/**.

CenCal Health Whole-Person Care Webinar

As CenCal Health partners with our local community to transform local healthcare we invite our network to learn more about the services available to CenCal Health members that extend beyond traditional healthcare settings. These services aim to provide comprehensive care and achieve better health outcomes.

Join CenCal Health on January 25, 2024 at 2 p.m. to learn about these services, including Enhanced Care Management, Community Supports, Doula, and Community Health Worker services.

If you're interested in attending any or all of these webinar series, please go to **cencalhealth.org/providers/provider-training-resources/**.

Social Determinants of Health

The Centers of Disease Control and Prevention (CDC) defines Social Determinants of Health (SDOH) as the nonmedical factors that influence an individual's health outcomes. These factors include conditions into which people are born into, live, learn, work, socialize, and worship that affect a wide range of health and quality-of-life outcomes.

In calendar year 2022, CenCal Health's contracted Primary Care Providers (PCPs) submitted SDOH claim encounter codes for 7,510 members. The graph below illustrates the percentage of codes submitted for homelessness, problems related to living alone, problems related to unwanted pregnancy, and others.

Top SDOH Codes Utilized, 2022 (n=7,510)

Value	Category
25.83%	Homelessness unspecified
13%	Problems related to unwanted pregnancy
7.77%	Sheltered homelessness
6.94%	Problems related to living alone
4.93%	Disappearance/death of family member
4.18%	Problems in relationship with spouse or partner

The following tables show responses from the SDOH questions on the Adult Health Survey Tool for 2022, particularly related to housing, food, security, financial security, social support, and safety.

Self-Reported Responses from Adult Health Survey Tool 2022		
Question	Yes	No
Do you have family members or others willing and able to help you when you need it?	82.67%	17.33%
Are you currently homeless?	3.08%	96.92%
Do you have enough food to eat each month?	89.74%	10.26%
Do you sometimes run out of money to pay for food, rent, bills, and medicine?	36.32%	63.68%
Are you afraid of anyone or is anyone hurting you?	1.74%	98.26%

CenCal Health providers are key partners in identifying health disparities for your patients. Data gathered will ensure CenCal Health appropriately assesses the needs of our community in support of solutions to help members thrive and achieve optimal health.

Coding

CenCal Health encourages all network providers to include SDOH codes in their billing SDOH categories include:

- **Z55** – Problems related to education and literacy
- **Z56** – Problems related to employment and unemployment
- **Z57** – Occupational exposure to risk factors
- **Z58/Z59** – Problems related to housing and economic circumstances
- **Z60** – Problems related to social environment
- **Z62** – Problems related to upbringing
- **Z63** – Other problems related to primary support group, including family circumstances
- **Z64** – Problems related to certain psychosocial circumstances
- **Z65** – Problems related to other psychosocial circumstances

Help us strive for health equity by coding for SDOH to provide crucial data towards improving quality outcomes, reducing health disparities, and driving delivery system transformation and innovation.

For reference, DHCS issued a comprehensive list of SDOH codes to maximize the capture of actionable information: **www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf**

For case management referrals, please visit the CenCal Health website: **cencalhealth.org/providers/case-management/**

For additional support, please contact the Population Health team at **populationhealth@cencalhealth.org**

Breast Cancer Screening

Breast cancer is the second most common cancer among women in the United States. According to the Centers of Disease Control and Prevention (CDC), about 42,000 women and 500 men in the U.S. die each year from breast cancer, with Black women having a higher rate of death than all other women.

Although breast cancer screening cannot prevent breast cancer, it can help detect breast cancer early, sometimes up to three years before it can be palpated. Early detection makes treatment and outcomes better.

Clinical Recommendations

The United States Preventive Services Task Force (USPSTF) recommends biennial screenings for mammography between 50 to 74 years of age. For the comprehensive USPSTF clinical guideline, please visit: **https://uspreventiveservicestaskforce.org/uspstf/recommendation/breast-cancer-screening**.

Breast Cancer Screening is an incentivized QCIP measure!

CenCal Health's value-based Quality Care Incentive Program (QCIP) offers an incentive to primary care providers (PCPs) in accordance with established guidelines for breast cancer screenings. For details, please visit: **cencalhealth.org/providers/quality-of-care/quality-care-incentive-program/**.

Tips:

- Leverage Initial Health Appointments (IHAs) as opportunities for screening. The list of members due for IHAs can be found in the Coordination of Care section of the provider portal (available to Primary Care Providers only).
- Utilize gaps in care reports also available on the QCIP dashboard of the provider portal to call members and/or send reminders.
- Ensure mammogram information including date and results are noted in the patient's chart and document the findings through corresponding billing and coding.
- Create a workflow to check the status of the patient's mammogram ahead of the visit.
- Provide both written and verbal educational guidance on the importance of self-examination.
- Talk to your patients about the different types of screening tests available and which one is right for them.

Billing:

Timeliness of claims submission is highly encouraged as the list of members due for a breast cancer screening on the QCIP report will be updated monthly using real-time claims data. Below are codes that can be used when billing:

- CPT: 77061-77063, 77065-77067
- HCPCS: G0202, G0204, G0206
- ICD10: Z12

For member health education materials, please contact the Health Promotion team at **healtheducation@cencalhealth.org**
For QCIP questions, please contact the Quality team at **qcip@cencalhealth.org**.

Topical Fluoride for Pediatric Oral Health

Tooth decay (also known as caries or cavities) is the most common chronic disease of childhood in the United States, according to the Centers for Disease Control (CDC).

Poor oral health leads to pain, school absenteeism, lower grades, and an overall negative effect on children's general physical health. Tooth decay disproportionately affects low-income, young, Black, and Hispanic populations, as well as children with special healthcare needs. Cavities are preventable with the use of fluoride varnish, which can prevent about one-third (33%) of cavities in baby teeth.

Pediatricians are in a unique position to provide oral health guidance to families by applying fluoride varnish in-office. **Topical application of fluoride varnish is a covered benefit for pediatric CenCal Health members.**

The early application should be performed after the first tooth erupts until age 5. It can be swabbed directly onto the teeth in less than three minutes and sets within one minute of contact with saliva. No special dental equipment or training are required.

Billing for Fluoride Varnish

- Use CPT code 99188 - Reimbursable for children through age 5 and includes all materials and supplies needed.
- Once teeth are present, treatment is covered up to 3 times in a 12-month period.
- Fluoride Varnish may be applied by:
  » Medical professionals
  » Any trained person with signed guardian permission and under a doctor/dentist prescription or protocol
  » In a community setting such as a https://uspreventiveservicestaskforce.org/uspstf/recommendation/breast-cancer-screening school/health fair or government program

The American Academy of Pediatric Dentistry recommends that pediatricians perform oral health risk assessments on all children beginning at 6 months of age. Infants identified as higher risk should be referred to a dentist as early as 6 months of age and no later than 6 months after the first tooth erupts or 12 months of age (whichever comes first) to establish their dental home. Every child should have a dental home established by 12 months of age.

For additional resources, please reference **https://www.healthychildren.org/English/healthy-living/oral-health/Pages/Why-Regular-Dental-Visits-Are-Important.aspx** or contact our Population Health Team at **populationhealth@cencalhealth.org**.

CenCal Health recommends reviewing the following sites for more information:

American Academy of Pediatrics, "Fluoride Remains a Powerful Tool to Prevent Tooth Decay"
www.aap.org/en/news-room/news-releases/aap/2020/american-academy-of-pediatrics-fluoride-remains-a-powerful-tool-to-prevent-tooth-decay/

Centers for Disease Control and Prevention, "Children's Oral Health"
www.cdc.gov/oralhealth/basics/childrens-oral-health/index.html

Follow-Up After Emergency Department Visit

CenCal Health prioritizes timely follow-up care for individuals seeking emergency department (ED) services for mental illness and alcohol/drug abuse or dependence.

The period following an individual's ED visit is critical as timely follow-up care leads to reduced ED visits, improved function, increased compliance with follow-up instructions, and a reduction in substance use. High ED utilization may also signal a lack of access to care or issues with continuity of care, both crucial elements to be addressed in a follow-up visit.

For the health and safety of our members, it is important that Primary Care Providers (PCPs) ensure that members experiencing ED visits for mental illness and/or substance use or dependence receive timely follow-up care.

As part of CenCal Health's ongoing Quality Improvement and Health Equity Transformation Program (QIHETP), CenCal Health monitors and reports the following performance measures to the Department of Health Care Service (DHCS).

Follow-Up for Mental Illness (FUM)	Follow-Up for Substance Use (FUA)

The percentage of ED visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm who received a follow-up visit for mental illness:
1. Within 7 days
   • **Goal Rate: 61.68%**
2. Within 30 days
   • **Goal Rate: 73.26%**
	The percentage of ED visits for members 13 years of age and older with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, for which there was follow-up:
	1. Within 7 days
	   • **Goal Rate: 53.44%**
	2. Within 30 days
	   • **Goal Rate: 38.15%**

Best Practices:

- Establish a workflow to receive information from hospital partners daily to identify which patients have recently visited the ED.
  - » Many hospital partners have established reports that providers can review to support timely follow-up.

- Upon identification, schedule follow-up appointments within 7 days.
  - » Encourage patients to bring their discharge paperwork including any medications they received upon discharge.
  - » Use the "Teach-Back Method" to ensure patients and caregivers review and understand discharge instructions and the next steps in their care for follow-up.
  - » Engage members in determining what next steps they are open to.

- Screen for Alcohol and Drug Screening, Assessment, Brief Intervention, and Referral to Treatment (SABIRT) or depression screenings during the follow-up appointment.
  - » Document all results, referrals, and next steps.
  - » For members interested in substance use treatment or mental health treatment, please refer to the Behavioral Health Call Center at (800) 421-2560, the Provider Directory on our website to find an available mental health provider, or complete a Behavioral Health Care Coordination Referral form for Behavioral Health to assist with referrals to substance use treatment or mental health care.
  - » Outreach to patients who cancel appointments and assist them with rescheduling as soon as possible.

- Set flags, if available, in electronic health record (EHR) or develop a tracking method for patients due or past due for follow-up after discharge visits.

- Consider referrals to Community Supports (CS) or Enhanced Care Management (ECM) as social drivers of health (SDOH) factors may be barriers.

- Use the same diagnosis for SUD at each follow-up (a non-mental illness diagnosis code will not fulfill this measure).

Care Management (CM)

Care Management (CM) support is available for members who have complex medical conditions, high psychosocial risk factors, or need assistance navigating the healthcare system. Utilize CenCal Health's Provider Portal to determine if the member is currently receiving Complex or Enhanced Care Management or Community Support services. These programs have a dedicated team that can partner with you to support the health, social, and behavioral needs of the member.

For more information on CM services or to access the referral forms, visit **cencalhealth.org/providers/case-management/** or call (805) 681-8260.

For further questions or support, please reach out to the Population Health team at **populationhealth@cencalhealth.org**

Additional online resources:

- Behavioral Health Care Coordination Referral:
  cencalhealth.org/providers/behavioral-health-treatment-and-mental-health-services/mental-health-service-provider-resources/
- Care Management/ Enhanced Care Management:
  cencalhealth.org/providers/case-management/
- Community Supports:
  cencalhealth.org/wp-content/uploads/2023/02/202108utilizationmanagementauthorizationdownlaodform.pdf
- Provider Directory:
  cencalhealth.org/providers/search-provider-network/

Tools for Patients in the New Year

With the new year comes resolutions! Patients may have a health or wellness goal they would like to achieve and may come to you for information. As an active partner in their health care, creating a judgement-free environment that encourages questions is an important way to engage patients to share.

The following techniques will help promote a good health outcome and patient satisfaction:

Inviting questions:

- Encouraging patients to ask questions can be as simple as saying, "What questions do you have?" or "What health concerns do you have?" This wording creates an opportunity for your patients to ask questions.
- Asking "Do you have any questions?" is not ideal because most patients will respond to this wording by saying "no," even if they do have questions.

Using body language to build rapport.

- Look and listen: Look at patients when they're talking, as opposed to looking at the chart or computer.
- Show that you have the time: Be conscious about presenting yourself as having time and wanting to listen to their questions.

Encouraging all staff to make sure questions are asked and answered.

- **Check-in staff** can encourage patients to ask their clinicians any questions they have during the visit.
- **Check-out staff** can ask patients whether all their questions were answered.

If your patients would like more information about their health and wellness, they can visit **cencalhealth.org/health-and-wellness/**, request health education classes/materials from the NEW member portal, or request health education materials to be mailed to their home by calling (800) 421-2560 ext. 3126.

Medi-Cal Rx Updates: Updates to Continuous Glucose Monitoring (CGM) Systems Policy

The coverage requirements for Medi-Cal Rx contracted Continuous Glucose Monitoring (CGM) Systems have been updated. These changes went into effect for requests on or after October 1, 2023. The coverage criteria for CGM systems have been updated as follows:

Life of Prior Authorization Approval
CGM initial authorization and subsequent reauthorizations will be for a period of one year, initiating on the date of approval. Each fill can be a 90-day supply.

Prescriber Requirement
CGM coverage is limited to prescribing by an endocrinologist, a primary care provider (physician [MD or DO]), nurse practitioner (NP), clinical nurse specialist (CNS), physician assistant (PA), or a certified nurse midwife (APRN-CNM), or other licensed healthcare practitioner with experience in diabetes management.

Diagnosis Requirement
A diagnosis of diabetes or gestational diabetes.
- Diabetes (Type 1 or Type 2) and one of the following other criteria:
  » Insulin-dependence based on regular insulin claim history in the past or other documentation of regular insulin use; or
  » History of problematic hypoglycemia with documentation demonstrating recurrent (more than one) level 2 hypoglycemia events (glucose < 54 mg/dl [3.0 mmol/L]) that persist despite attempts to adjust medication(s) and/or modify the diabetes treatment plan within the past year.
- Gestational Diabetes
  » Restricted to approval for the duration of the pregnancy up to a maximum of 9 months; and
  » Estimated date of delivery must be included on the request.

Hemoglobin A1c (HbA1c) Requirement
A HbA1c value measured within eight months of the date of the request is documented on the PA request.

Reauthorization Requirement
Documentation that the member continues to meet CGM PA coverage criteria and has been seen and evaluated by the prescriber annually, either in person or telephone conferencing with documentation of:
- The date of the most recent visit; and
- The member is using the device as prescribed; and
- The member is maintaining clinical HbA1c targets defined by the prescriber.

Effective December 1, 2023, pharmacy providers and prescribers no longer need to submit PAs for each component (such as sensor plus transmitter plus reader) of the CGM system. Medi-Cal Rx will accept one PA request for CGM systems, which will apply to all components of the CGM system requested by the provider.

For any provider inquiries regarding Medi-Cal Rx, please call the Medi-Cal Rx Customer Service Center (CSC) at (800) 977-2273 or the CenCal Health Pharmacy Department at (805) 562-1080.

Mental health specialists: Higher Level of Care requests

Please coordinate a member's care for county-level mental health services directly with CenCal Health's Behavioral Health Department. The DHCS-required Transition of Care form is available in the Forms Library or on the Behavioral Health/Mental Health provider page.

County Mental Health Services include:
- Residential care for Eating Disorder; Partial Hospitalization care for an Eating Disorder; Intensive Outpatient program for an Eating Disorder
- Full-Service Programs
- Targeted Mental Health Case Management
- Transitional Youth Services
- Peer Recovery Specialists
- Support Groups
- Crisis Intervention, Stabilization
- In-patient psychiatric admission

For members requesting referrals to substance use treatment, please use the Behavioral Health Care Coordination form. For more information or to speak to the Behavioral Health team, please call the Provider Line at (805) 562-1600.

Benefits now include Dyadic Services

Last March, Medi-Cal expanded the Mental Health Benefit to include Dyadic Services and Family Therapy. The Dyadic Services Benefit is designed to support the implementation of comprehensive models of dyadic care, such as HealthSteps and Dulce, that work within the pediatric clinic setting to identify and address caregiver and family risk factors for the benefit of the child. It is a family and caregiver-focused model of care intended to address developmental and behavioral health conditions of children as soon as they are identified, and fosters access to preventive care for children, improved rates of immunization completion, coordination of care, child social-emotional health and safety, developmentally appropriate parenting, and maternal mental health.

Dyadic Services include Dyadic behavioral health (DBH) well-child visits, Dyadic Comprehensive Community Supports Services, Dyadic Psychoeducational services, and Dyadic Family Training and Counseling for Child Development. Eligible providers include licensed mental health specialists, physicians, associate mental health specialists, and community health workers. Psychological testing doesn't require referral.

For more information on how to incorporate Dyadic services into your practice, please reach out to Provider Relations at **providerservices@cencalhealth.org** or call (805) 562-1676.

Reminder: ABA Recommendation Does Not Require Autism Spectrum Diagnosis

Members do not require an Autism Spectrum Diagnosis (ASD) or a comprehensive developmental evaluation to start ABA Services. Eligible members only require a recommendation from a qualified provider stating services are medically necessary. Qualified providers (physicians, psychologists, and surgeons) who believe that a member would benefit from ABA services can complete an ABA Recommendation and submit it to the Behavioral Health Department by following the directions on the form.

ABA providers can also watch CenCal Health's monthly technical training quick reference videos online at **cencalhealth.org/ providers/behavioral-health-treatment-and-mental-health-services/** under the "Behavioral Health Treatment (ABA) Provider" tab!

For further questions, please contact the Behavioral Health Call Center Provider Line (805) 562-1600.

Provider Bulletin reminder

CenCal Health is publishing quarterly Provider Bulletins in March, June, September, and December, in addition to monthly digital Bulletins!

CenCal Health will continue providing time-sensitive information to our provider network through other means of communication, including emails, the CenCal Health website, and in-person during provider visits.

To ensure that you receive important updates, sign up today by scanning the QR code or with your email address online at **cencalhealth.org/providers/provider-bulletin-newsletter/**.

CenCal HEALTH®
Local. Quality. Healthcare.

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CenCal Health Holiday Closures

Monday, December 25, 2023 (Christmas Day observed)

Monday, January 1, 2024 (New Years Day observed)

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Provider Services (805) 562-1676

Claims Services (805) 562-1083

Pharmacy Services (805) 562-1080

Health Services (805) 562-1082

Member Services (877) 814-1861

Behavioral Health (805) 562-1600

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