

Blue Shield of California Promise Health Plan Network Provider Update

To: Medi-Cal Network Providers

June 2020

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Blue Shield of California Promise Health Plan

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Subject: Department of Health Care Services COVID-19 All Plan Letters Bulletin

The Department of Health Care Services (DHCS) has issued several All Plan Letters (APLs) to Medi-Cal managed care providers during the past weeks in response to the current COVID-19 crisis. We are sharing summaries of these APLs with you to ensure you are aware of the information, and you can apply the information to your practice or facility operations, where appropriate.

Blue Shield of California Promise Health Plan also publishes [COVID-19 information](#) pertaining to Blue Shield Promise Medi-Cal service providers on our website.

[APL 20-004](#) – (Revised 04/27/2020)

Emergency Guidance for Medi-Cal Managed Care Health Plans in Response to COVID-19

Outlines temporary changes to federal requirements for managed care plans (MCPs), including:

- Extended timeframe for State Fair Hearings
- Flexibilities for provider Medi-Cal screening and enrollment
- Waiving prior authorization for COVID-19 services, including screening and testing
- Reimbursement for COVID-19 testing
- Provision of care in alternative settings, hospital capacity and blanket waivers
- Pharmacy guidance

Providers are advised to refer to the [DHCS COVID-19 Response webpage](#) for the most up-to-date information.

Additional guidance was added on April 27, 2020, reminding MCPs “that they must adhere to existing contractual requirements and state and federal laws requiring MCPs to ensure their members are able to access medically necessary services in a timely manner,” including:

- Providing emergency care
- Complying with utilization review timeframes
- Ensuring network adequacy to meet increased needs
- Ensuring members are not liable for balance bills
- Providing members with 24-hour access to an MCP representative

Managed care providers are also responsible for ensuring members can access medically necessary screening and testing of COVID-19. This access includes provisions for telehealth (for non-hands-on screening, if/when appropriate), transportation, pharmacy services, and member eligibility.

Flexibility is being offered in the following areas:

- Encounter Data: MCPs must still submit complete and timely encounter data, but DHCS is temporarily pausing the state fiscal year 2019-2020 Encounter Data Validation study.
- Health Homes: Telephonic and video call assessments may substitute for face-to-face assessments.
- Initial Health Assessment: DHCS is temporarily suspending the requirement to complete an Initial Health Assessment until the COVID-19 public health emergency declaration is rescinded.
- Quality Monitoring, Programs & Initiatives:
 - Quarterly Monitoring: MCPs will only be required to submit their responses for the grievances and state fair hearing report until the COVID-19 emergency declaration is rescinded.
 - Timely Access Survey calls have been ceased.
 - Managed Care Program Data Improvement Project deadline has been extended to July 1, 2021.

[APL 20-007](#) – (Revised 04/13/2020)

Policy Guidance for Community-Based Adult Services in Response to COVID-19 Public Health Emergency

Community-based adult services (CBAS) providers are advised of the following guidance:

- Congregate services inside centers are not allowed during the COVID-19 public health emergency.
- Essential services may be provided to individuals in the center or in the home, so long as they meet safety and infection control precautions.
- CBAS centers are granted flexibility to reduce day-center activities and to provide CBAS temporarily alternative services telephonically, via telehealth, live virtual video conferencing, or in the home.

The APL also lists specific requirements for services, staffing, authorization and reimbursement, and documentation and reporting.

A more in-depth communication about these requirements will be sent to our CBAS providers.

[APL 20-008](#) – (04/07/2020)

Mitigating Health Impacts of Secondary Stress Due to the COVID-19 Emergency

In consideration of the negative health outcomes the stress of the COVID-19 crisis could cause, this APL advises MCPs to do the following:

- Support continuity and integration of medical and behavioral health services via telehealth and other adaptations.
- Share information with providers about disaster-responsive, trauma-informed care.

- Ensure providers are aware of the published signs of, and assess for, stress-related morbidity, and create responsive treatment plans.

Additional resources on how to mitigate the stress-related health outcomes anticipated with the COVID-19 emergency can be found on www.ACEsAware.org.

ACEs resources and information for Medi-Cal can be found on the DHCS webpage at <https://www.dhcs.ca.gov/provgovpart/Pages/TraumaCare.aspx>.

APL 20-009 – (04/15/2020)

Preventing Isolation of and Supporting Older and Other At-Risk Individuals to Stay Home and Stay Healthy During COVID-19 Efforts

Reminds providers of the need to support older and other at-risk individuals who may be isolated during the state's COVID-19 stay-at-home campaign. Lists available public resources for food, aging and adults services, isolation, wellness checks, fraud, and Alzheimer's support and encourages providers to share them with patients who qualify.

APL 20-011 – (04/24/2020)

Governor's Executive Order N-55-20 in Response to COVID-19

The Executive Order provides DHCS with various flexibilities in support of COVID-19 mitigation efforts.

- Site reviews and subcontractor monitoring may be virtual, or have deadlines extended.
- Annual medical audits are suspended.
- Deadlines for Health Risk Assessments are extended.

These summaries are only meant as brief descriptions of the APLs. Please see the APLs themselves for the complete requirements. The full text of all DHCS managed care APLs may be found at this URL: <https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx>.

Links to the DHCS.ca.gov website will take you off of the Blue Shield Promise website.

If you have questions about applying any of the information in this notice to Blue Shield Promise members, please call our Provider Customer Care Department at **(800) 468-9935** from 8 a.m. to 5 p.m., Monday through Friday.

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