

HEALTHmattersMD

HPSM's quarterly newsletter to update network providers on policy changes, regulatory requirements and best practices

Marketing & Communications

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CENTERS OF EXCELLENCE

Three county facilities certified to treat COVID-19

CHECK ONLINE FOR COVID-19 UPDATES

and guidelines for reopening your practice



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NEW: VIDEO INTERPRETING SERVICES

for office and telemedicine visits

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NCQA ACCREDITATION

- HPSM Earns NCQA Accreditation BACK COVER

SUPPORTING COVID-19 PREPAREDNESS AND RESPONSE IN NURSING HOMES

HPSM is committed to getting our highest-risk members the highest-quality care – and the COVID-19 crisis only makes this more urgent.

Patients in skilled nursing facilities (SNFs) and long-term care (LTC) facilities are often older with chronic health problems, making them especially vulnerable to COVID-19. At the time of publication, over half of COVID-19 deaths in San Mateo County have occurred within congregate care facilities – a sobering trend that is also being seen nationwide. Since the emergence of COVID-19, HPSM has been heavily focused on supporting this vulnerable population. This includes two major efforts to mitigate the risk of COVID-19 in nursing homes:

- **Learning from peers and experts** In April 2020, HPSM launched a virtual Nursing Facility Learning Collaborative with nursing facilities across the county. We meet two to four times per month to share best practices on infection control from external experts, create a forum for peer learning and identify specific needs – such as COVID-19 testing resources.
- **Supporting patient cohorting** Additionally, HPSM has been working to support the best practice of “cohorting” patients within and between congregate care settings. This means safely grouping members at designated buildings, or within an area of a building, based on whether they are COVID-19 negative, positive or unknown. To support cohorting, HPSM partnered with San Mateo County Health to designate multiple nursing facilities as Centers of Excellence (COE).

WHAT IS A NURSING FACILITY CENTER OF EXCELLENCE?

At the beginning of the COVID-19 public health emergency, academics^{1,2}, industry experts³ and the Centers for Medicare & Medicaid Services (CMS)⁴ urged the creation of COVID-19 COE among nursing facilities. COE facilities specialize in post-acute care for patients with COVID-19.

To earn COVID-19 COE status in San Mateo County, facilities must meet several rigorous criteria:

1. High quality ratings (including Medicare stars)
2. Experience caring for patients with respiratory distress and related complications
3. Few long-term residents to relocate
4. Adequate bed capacity
5. Experienced operational and management teams

In San Mateo County, three facilities have currently earned COE status: Pacifica Nursing and Rehab Center, St. Francis Convalescent Pavilion and Seton Skilled Nursing (within the Seton Medical Center campus). Additional facilities may be added over time should cases increase.

WHY ARE COE HELPFUL IN REDUCING THE RISKS OF COVID-19?

By designating high-quality post-acute treatment facilities as COE early in the pandemic, HPSM and San Mateo County Health officials are now in a better position to protect nursing home residents should an outbreak occur. If an outbreak occurs in a congregate care facility or nursing home and it isn't possible to isolate COVID-19 positive patients in place, they may be transferred to a COE temporarily. There, positive-status patients may receive the highest quality care while being spared the stress of going to an emergency room or being admitted to an acute care facility. By cohorting positive-status patients together, providers can reduce the risk of the virus spreading further within congregate care settings that are not equipped to isolate.

► **Read our in-depth profile of Pacifica Nursing and Rehab Center** to learn how they adapted their operations to treat COVID-19 patients while protecting other patients from infection

www.hpsm.org/COE

¹“Postacute Care Preparedness for COVID-19.” JAMA: March 2020. www.jamanetwork.com/journals/jama/fullarticle/2763818

²“Designating Certain Post-Acute Care Facilities As COVID-19 Skilled Care Centers Can Increase Hospital Capacity And Keep Nursing Home Patients Safer.” Health Affairs: April 2020. www.healthaffairs.org/doi/10.1377/hblog20200414.319963/full/

³“CALTCM Resolution: COVID-19.” California Association of Long Term Care Medicine: March 2020. www.caltcm.org/assets/CALTCM%20COVID-19%20Resolution%20March%2019%202020.pdf

⁴“Trump Administration Issues Key Recommendations to Nursing Homes, State and Local Governments.” Centers for Medicare & Medicaid Services: April 2020. www.cms.gov/newsroom/press-releases/trump-administration-issues-key-recommendations-nursing-homes-state-and-local-governments

DIABETES SELF-MANAGEMENT VIDEO SESSIONS FOR PATIENTS AT SMMC CLINIC

Do you care for HPSM members who are established patients at San Mateo Medical Center's (SMMC's) 39th Ave. Clinic, and have been diagnosed with pre-diabetes or diabetes type 1 or 2? If so, these members can be referred to SMMC's Diabetes Self-Management Education (DSME) program for individual video sessions with a diabetes educator. The DSME program offers individual sessions, in English and Spanish, on the basics of pre-diabetes and diabetes, and on how healthy nutrition and exercise habits help prevent diabetes type 2 or reduce the risk of diabetes-related complications. When patients enroll, their PCPs receive follow up recommendations and updates from the diabetes educator.

DSME REFERRAL FORM

To refer a patient, complete a referral form via SMMC's eClinical Works (eCW) system and email it to Innovative Care Clinic's Diabetes Educator Nicky Reynicke at nreynicke@smcgov.org. You can also email Nicky if you need assistance locating the referral form or have questions about the DSME program.

INTRODUCING ALERT CARE

A new addition to HPSM's HomeAdvantage program

If you serve any HPSM CareAdvantage members with multiple chronic medical conditions, you know that we provide regularly scheduled home health care visits for this population through our HomeAdvantage program in partnership with Landmark Health. To make the program more clinically effective, we have added a program called AlertCare and separated the overall program into two tiers:

HomeAdvantage

There are no program changes for members in this tier; they receive case management and regularly scheduled home-based medical care

AlertCare (new)

Provides lower-acuity members with on-demand urgent home visits and an annual in-home assessment, rather than regularly scheduled home-based visits

AlertCare will better meet the needs of patients who do not require routine home visits but may need home-based urgent care in specific situations. We started transitioning qualified members from HomeAdvantage into AlertCare beginning on August 1. If you are treating any of these members, you will receive a letter with a list of those patients and more information. You can also learn more by visiting www.hpsm.org/healthy-at-home.

PRENATAL TO THREE HEALTHY FAMILIES PROGRAM

For over 20 years, San Mateo County Health's Prenatal to Three Healthy Families (PRE-3 HF) Program has provided support services to pregnant women and mothers and their children that include:

Home visits	Developmental screening	Mental health services	Substance abuse support	Case management
Care coordination	Parenting education	Public health nursing services	Breastfeeding support	Referrals to community services



Refer your patients to PRE-3 HF if they meet the following three criteria:

- Pregnant or have a newborn (2 months old or younger)
- Living in San Mateo County
- Have Medi-Cal or qualify for WIC

For more information, call 650-573-2501 or 888-840-0889 or visit these websites:

- San Mateo County Health Family Health Services: www.smchealth.org/division-family-health-services
- Healthy Families America: www.healthyfamiliesamerica.org

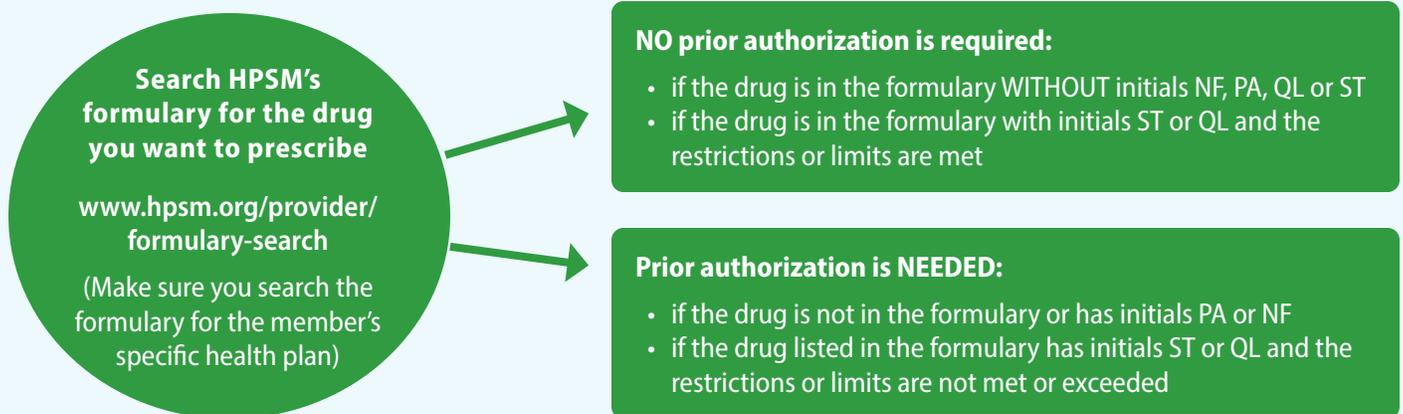
POLICIES & PROCEDURES

WHEN TO GET PRIOR AUTHORIZATION FOR MEDICATION

PRIOR AUTHORIZATION IS REQUIRED FOR

- Non-formulary drugs
- Formulary drugs when plan or formulary restrictions and limits (e.g., quantity limitations or step therapy) are not met or exceeded or if the drug is identified on the formulary as requiring a prior authorization and indicated by the initials "PA".

HOW DO I KNOW WHEN I NEED PRIOR AUTHORIZATION?



To request prior authorization simply fill out and submit the Department of Managed Health Care (DMHC) Services mandated Prescription Drug Prior Authorization or Step Therapy Exception Request Form. For CareAdvantage requests, use the CareAdvantage Determination Request Form. Both forms are available on HPSM's website at www.hpsm.org/provider-forms.

The following information is required on ALL pharmacy request forms:

<ul style="list-style-type: none">• Member name• Member date of birth• Member address and telephone number• Prescriber name	<ul style="list-style-type: none">• Prescriber NPI• Prescriber address• Prescriber phone number• Prescriber fax number• Prescriber signature	<ul style="list-style-type: none">• Requested medication (strength, dosage, frequency, quantity)• Diagnosis for treatment• Tried and failed treatments• Clinical information
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EMERGENCY MEDICATION SUPPLY

For emergency situations, HPSM's Pharmacy Services department can provide at least a 72-hour supply of most medication(s) without restriction. This includes prescriptions awaiting the submission or approval of a prior authorization request. Certain limitations apply. For additional information or assistance, please contact us at one of the following:

- The Pharmacy Help Desk line at **888-635-8362** any time (24/7); OR
- HPSM's Pharmacy Services at **650-616-2088** during business hours (M-F, 8 a.m. to 5 p.m.)

REMINDER: RESPOND TO MEDICAL RECORD REQUESTS

HPSM conducts an annual clinical record review in order to search for documented ICD-10 diagnoses that may not have been previously reported to the Centers for Medicare and Medicaid Services (CMS). The 2020 Requests for medical records from providers will begin in September with the expectation that all records will be collected by December 31.

Because record retrieval can be a burden on providers, we will consolidate requests when possible. In many of those cases, providers grant us access to their electronic health record (EHR) for HPSM members so we can handle the record retrievals individually. If you are not already taking advantage of this opportunity to streamline your ongoing record collection process, and are interested in doing so, please contact psinquiries@hpsm.org to check if you are eligible.

The following details will help you respond to upcoming requests:

- HPSM partners with other organizations that specialize in the record retrieval process, so you may get a record request from one of those partners rather than HPSM
- Records requested will be from January 1, 2019 to the present
- Since CMS is requesting these records as part of their risk and quality review, we appreciate your prompt response
- If your office needs assistance complying with these requests, please email Lorena Mathus, Medicare Risk Adjustment Specialist, at lorena.mathus@hpsm.org

DHCS UPDATES ITS 2020 SITE REVIEW POLICY

The Department of Health Care Services (DHCS) started implementing some changes to its site review policies starting on July 1st, 2020. The updates pertain to the criteria and scoring of its audit tools, including:

5 new critical elements in the facility site review (FSR) tool

23 new items in the pediatric medical record review (MRR)

20 new items in the adult MMR

The new criteria are now used in every review, and providers will be held responsible for complying with them. To review the policy update and review tools, please visit www.hpsm.org/qi-toolkit.

STAY UP TO DATE ON HPSM'S FORMULARY

HPSM's formularies are available online and updated monthly, or more frequently as needed.

To look up specific medications, find copayment requirements or limitations that apply to certain drugs, please visit www.hpsm.org/provider/formulary-search

As you know, every primary care provider site must undergo an initial FSR upon contracting with HPSM and subsequent reviews thereafter.



If you are due for a review, HPSM will contact you to schedule an office visit.

CLINICAL CORNER

SCREEN CHILDREN AT 12 AND 24 MONTHS FOR LEAD POISONING – IT’S THE LAW!



Although California and the federal government have taken steps to reduce lead poisoning, lead can be found in the air, soil and drinking water of housing and other structures that contain lead pipes. Children under six years old are especially vulnerable to lead poisoning’s harmful effects, including lower IQ, because their brains are in a critical stage of development. **A recent analysis of data by the California Department of Health Care Services (DHCS) showed that, of the nearly three million one-to-two-year-old children enrolled in Medi-Cal:**

1/4 missed one of the two tests

1/2 did not receive any testing

That means more than two million children in California were not properly tested for lead poisoning – and therefore never got the treatment they need. Many of these children live in areas where high numbers of children are suffering from elevated lead levels.

The primary way to determine whether a child has been exposed to lead is to perform a blood test. State law requires that all children enrolled in Medi-Cal receive lead screening tests at 12 months of age and again at 24 months of age. It is recommended that providers monitor and provide follow-up for children with levels at or above the current CDC reference value.

- ▶ Follow the California Department of Public Health’s “Management Guidelines on Childhood Lead Poisoning for Health Care Providers” at www.cdph.ca.gov/Programs/CCDPHP/DEODC/CLPPB/CDPH%20Document%20Library/Lead_HAGs_Table.pdf

HELP YOUR PATIENTS QUIT TOBACCO

A research review coordinated by the World Health Organization indicates that tobacco smokers are at higher risk than non-smokers of potentially life-threatening reactions to COVID-19. That is because the virus primarily attacks the lungs, which are severely weakened by tobacco use. The increased danger makes helping people kick this harmful habit even more urgent.

As a trusted health care provider, you can play a pivotal role in persuading your patients to quit tobacco. Try these effective tactics:

- ▶ **Refer patients to support resources** The California Smokers’ Helpline provides free services, training and materials to help people quit. You can refer patients by filling out a form at www.nobutts.org/helpline-referral-options or have them contact the Helpline directly.
- ▶ **Accentuate the positives** In addition to strengthening the immune system against viruses like COVID-19, going tobacco-free has a wide range of immediate and long-term health benefits, from younger-looking skin to a healthier heart. Visit www.smokefree.gov/quitting-smoking/reasons-quit/benefits-quitting for details.
- ▶ **Prescribe FDA-approved tobacco cessation medication** HPSM covers all of these for adults who use tobacco products.



Patients who need help quitting tobacco can visit www.nobutts.org or call the helpline at 1-800-NO-BUTTS (1-800-662-8887)

Spanish: **1-800-45-NO-FUME (1-800-456-6386)**

Chinese: **1-800-838-8917**

Korean: **1-800-556-5564**

Vietnamese: **1-800-778-8440**

Tobacco Chewers: **1-800-844-CHEW (1-800-844-2439)**

Vape Users: **1-844-8-NO-VAPE (1-844-866-8273)**

“WHO statement: Tobacco use and COVID-19.” World Health Organization: May 2020. www.who.int/news-room/detail/11-05-2020-who-statement-tobacco-use-and-covid-19

FLUORIDE VARNISH – COMBAT TOOTH DECAY IN CHILDREN

Tooth decay affects more than half of kindergarten-age children and nearly two-thirds of third graders in California. It is especially common among disadvantaged youth. Fluoride varnish is a simple and effective way to prevent childhood tooth decay. It can be applied by physicians, nurses and supervised medical assistants with minimal training in less than three minutes, and no special dental equipment is required. It is safe for babies and toddlers and is most effective if applied right after the first teeth appear.



HPSM covers fluoride varnish as a Medi-Cal benefit for children, starting with the first tooth to erupt to six years of age. The average child sees nine medical doctors before their first dental appointment. That means you and your staff are particularly well-positioned to protect young patients’ dental health – and prevent the chronic problems caused by tooth decay.

As a reminder, HPSM has added this measure to the 2020 Primary Care Value-Based Payment program, codes for which are shown in the table below. For more information, please refer to the P4P program guidelines available on our website at www.hpsm.org/pcp-incentives.

Fluoride Varnish Procedure

Code	Definition	Code System
99188	Topical application of fluoride varnish	CPT
D1206	Topical application of fluoride varnish	HCPCS

For more information on fluoride varnish application, take the CHDP dental training at www.dhcs.ca.gov/services/chdp/Pages/FluorideVarnish.aspx.

For all information related to coding of covered benefits, please refer to the updated version of the Medi-Cal fee schedule and codes.

HELP YOUR MEDI-CAL PATIENTS GET DENTAL CARE

The Child Health & Disability Prevention (CHDP) Oral Health Program helps children, pregnant women and families covered by Medi-Cal get the dental care they need. The CHDP Program will:

- Help your patients find a dentist
- Schedule dental appointments for your patients
- Arrange free transportation to dental appointments

Have your patients call **650-573-2877** to receive assistance.

Sponsored by



REMIND PATIENTS TO TAKE HPSM’S HRA SURVEY

Our Care Coordination team wants to ensure that HPSM members receive the care and services they need. To do this, we need specific information about their health, which is collected through our Health Risk Assessment (HRA) survey, a no-cost service that we offer to our members.

PLEASE REMIND PATIENTS TO COMPLETE THE HRA



The HRA enables HPSM to:

- Create a health care plan tailored to each member’s personal needs
- Help members obtain covered medical services, supports and equipment
- Inform members about no-cost community programs they may qualify for – from home-based care to long-term services and supports

HPSM’s partner, Independent Living Systems (ILS), will administer the HRA by calling your patients. If they cannot be reached by phone, ILS will mail them a survey. The HRA is confidential: HPSM does not share your patients’ private information with anyone aside from the team creating the care plan.

If your patients have questions about the HRA, they can call **1-888-234-6403** (toll free) or **1-650-227-4670**. Office hours are Monday through Friday, 8am to 5pm.

PROVIDING CARE DURING THE COVID-19

PRIORITIZE CHILD IMMUNIZATIONS AND FLU/PNEUMONIA VACCINATION

Vaccination rates for children in California and San Mateo County have decreased significantly during the COVID-19 public health emergency. **In April 2020, less than half of the previous volume of doses were delivered to children aged 0 to 18 versus the prior year.** Patients and parents may be fearful of potentially exposing their children and themselves to COVID-19. However, this decline in vaccinations can leave children and the community vulnerable to vaccine-preventable diseases such as measles. **If measles vaccination coverage of 90%-95% is not achieved, measles outbreaks may occur.**



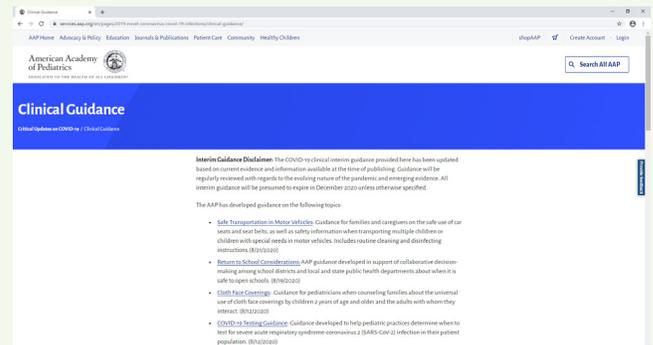
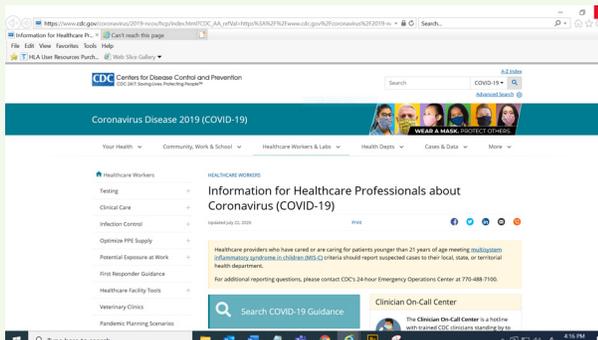
As a trusted medical authority, you can recommend that patients get their flu or pneumonia shot and that children receive their immunizations as scheduled. Here are some ways to provide these critical shots safely:

- Dedicate specific clinics, rooms or buildings for well child/immunization visits. Be sure to disinfect exam rooms in between visits and your clinic twice daily.
- Separate well visits from sick visits by appointment times (e.g., AM vs. PM).
- Organize drive-thru visits for immunizations; while patients wait in their cars, use text messaging or phone calls to screen and prepare for immunization.
- If you have limited capacity, CDPH currently recommends providers prioritize newborn care and vaccination of infants and young children (through 24 months of age).

Please refer to the Centers for Disease Control and Prevention (CDC) and American Academy of Pediatrics (AAP) for full guidance and other suggestions:

CDC: www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/

AAP: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/>



► Questions? Please call the VFC Customer Service Center at **877-243-8832**.

EMPHASIZE THE IMPORTANCE OF PRENATAL AND POSTPARTUM CARE

Pregnant women need to be reminded of completing their prenatal and postpartum visits to ensure they receive high quality care before, during and after childbirth, including mental health care. Reinforcing the importance of receiving immunizations during pregnancy is of key importance. The following educational methods can help you support this message:

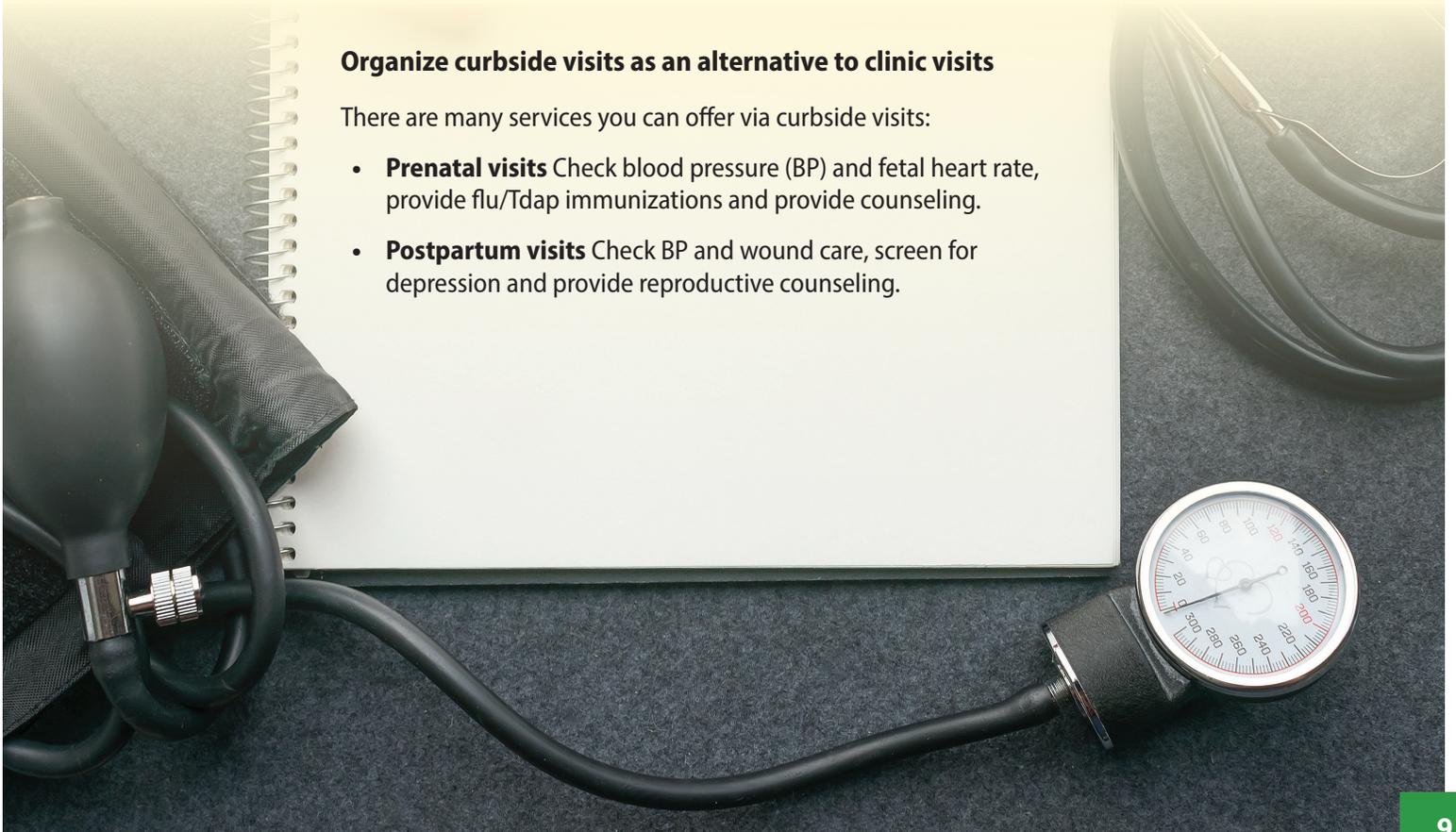


- Play educational videos, or short snippets, for patients while waiting in the exam room for their provider.
- Place wall posters in the exam room that promote immunization during pregnancy.
- Use testimonials by sharing real life stories or connecting patients with peers who have been immunized. Talking about a patient who was bedridden for days with a 103 degree fever is more vivid than saying “the flu can cause fever.”
- Inform parents that catching up later may not be so easy. When California “reopens,” there may be many children who need to catch up on immunizations. This will increase wait times for appointments. While waiting, they could be exposed to dangerous vaccine-preventable diseases circulating in the community. Avoid that danger by keeping their child’s immunizations on track.

Organize curbside visits as an alternative to clinic visits

There are many services you can offer via curbside visits:

- **Prenatal visits** Check blood pressure (BP) and fetal heart rate, provide flu/Tdap immunizations and provide counseling.
- **Postpartum visits** Check BP and wound care, screen for depression and provide reproductive counseling.



PROVIDING CARE DURING THE COVID-19 PANDEMIC

REACHING PATIENTS WITH DISABILITIES VIA TELEMEDICINE

Telemedicine plays a crucial role in maintaining access to care during the COVID-19 pandemic. However for some members with disabilities, engaging in telemedicine visits during the COVID-19 pandemic can be inconvenient. Before the pandemic, persons with disabilities were already having to contend with unique barriers to care. The pandemic has presented additional challenges, including limited access to caregivers due to shelter in place restrictions and, for some members, difficulty accessing care on a virtual platform, especially if they live alone.

Contact Care Coordination for support in engaging patients with disabilities

PCPs who have patients with disabilities are encouraged to contact HPSM's Care Coordination team to discuss how to engage their patients in telemedicine, or for support in coordinating an in-person clinic visit. Providers are encouraged to participate in an Interdisciplinary Care Team (ICT) meeting when

invited. ICTs are led by an HPSM Care Coordinator and focus on collectively identifying a member's care management needs. The ICT includes the member or authorized representative, their PCP and agencies that provide support services – such as the Golden Gate Regional Center (GGRC), which serves individuals with developmental disabilities. Other care team members, like staff from board and care homes and Adult Day Care centers, are also invited to participate depending on the member's preference. As a PCP, you can:

- Provide input on a patient's needs
- Learn about HPSM and community programs available to your patients
- Help connect your patients with disabilities to telemedicine visits

Contact HPSM's Care Coordination team by phone at **650-616-2068** or by fax at **650-829-2047**. You can also email CareCoordinationRequests@hpsm.org.



COVID-19 RECOMMENDATIONS FOR PATIENTS WITH CHRONIC CONDITIONS

Older adults and patients with underlying chronic conditions such as diabetes, asthma and hypertension are at higher risk for developing severe complications from COVID-19. Persons with asthma, for example, can develop pneumonia and acute respiratory disease because of COVID-19 infection.

During the COVID-19 pandemic, provider-patient communication and a team-based approach to care management (including pharmacists) are important to help HPSM members with underlying conditions lower their risk. Additionally, many providers have started pivoting to telemedicine visits to stay connected with their patients, particularly those who are at higher risk. The following strategies can help you support patients with chronic conditions during the public health emergency:

Consider easier access to medications

- Consider pharmacist-led medication management, review, reconciliation and counseling.
- Provide online ordering and inform patients of availability.
- Adjust refill limits to 90-day supplies and arrange for automatic refills.
- Inform patients of free mail or home delivery services – find pharmacies that deliver to HPSM members online at www.hpsm.org/covid-19/access-to-medication.
- Provide pharmacy drive-thru or curbside pick-up for prescriptions.



Offer alternative parking lot or curbside video visits using tablets

For patients with limited digital resources or support to engage in telemedicine visits from home, providers can schedule video visits with patients remotely located in their cars near the clinic's location. Staff can provide iPads or tablets and disinfect devices in between patients' use.



Remote biometric monitoring

- Consider providing patients with digital kits that transmit biometric data such as blood pressure or blood glucose to a medical device. Based on results, a nurse or pharmacist can contact the patient for follow up counseling.
- Consider using continuous glucose monitoring (CGM) applications, such as Tidepool, to access member glucometer and insulin pump data and then adjust medications accordingly.



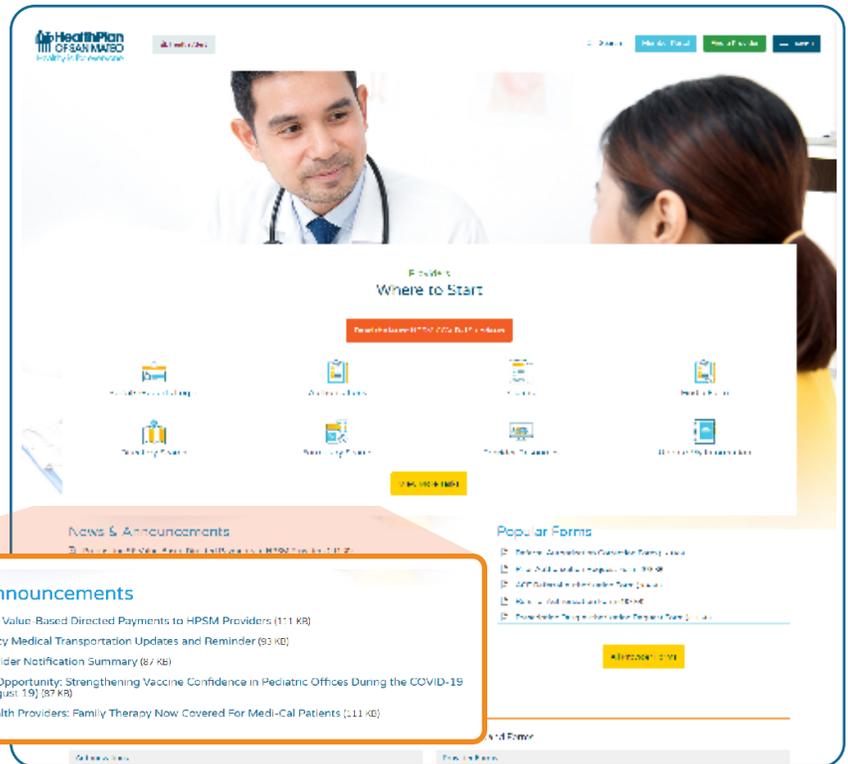
COVID-19 RESOURCES

FOR COVID-19 INFORMATION, VISIT HPSM'S WEBSITE

To effectively support our members during the COVID-19 crisis, you need easy access to the latest information – and you can find it on our website.

www.hpsm.org/provider

The News & Updates section includes HPSM policy and procedure changes regarding COVID-19 as well as other subjects



News & Announcements

- Proposition 56 Value-Based Directed Payments to HPSM Providers (11 KB)
- Non-Emergency Medical Transportation Updates and Reminder (93 KB)
- July 2020 Provider Notification Summary (87 KB)
- CDC Webinar Opportunity: Strengthening Vaccine Confidence in Pediatric Offices During the COVID-19 Pandemic (August 19) (87 KB)
- Behavioral Health Providers: Family Therapy Now Covered For Medi-Cal Patients (111 KB)

www.hpsm.org/provider/COVID-19

HPSM's COVID-19 Provider microsite organizes information by topic:



Telemedicine



Screening, Testing & Clinical Resources



Changes to Authorization Requirements



Get Your Practice Ready



Medication Needs



Interpreter Services

NEW! Ready to reopen your practice during COVID-19 to offer in-person and/or telemedicine services? Our resources and best practice guidelines provide the tools you need to do it right.

QUICK TIPS FOR IMPROVING INFECTION PREVENTION AND SAFETY IN YOUR CLINIC

The COVID-19 virus is highly contagious. It can be transmitted by contact with people, airborne aerosol droplets or particles on surfaces that infected people have touched. As you reopen your practice to in-person office visits, establishing protocols to protect your staff and patients from infection must be your top priority. Here are a few quick tips and best practices to get you started. We have a much more in-depth set of reopening resources at www.hpsm.org/provider/COVID-19.

Explain to your patients what your practice is doing to keep them safe

- Schedule appointments so only one patient is at the clinic at a given time.
- Schedule well child/immunization visits in the morning and sick visits in the afternoon.
- Dedicate specific clinics, rooms or buildings for well child/immunization visits vs. sick visits.
- Screen everyone who comes into the office, including taking everyone's temperature.
- Disinfect your clinic twice daily and exam rooms after each visit.
- Make sure everyone at the clinic always wears a mask.

Offer alternate ways to deliver care

- Schedule telemedicine appointments when possible. Need an interpreter? Learn more in the article on the right.
- Follow up with a brief in-person immunization visit.
- Offer drive-through immunizations so patients don't even have to come inside the clinic. While patients wait in their cars, you can use text messaging or phone calls to screen and prepare for immunization.
- Patients can also get the flu shot at their local pharmacy: remind them to bring their HPSM Member ID.

Reinforce the fact that vaccine-preventable diseases will continue to be a threat to children

- See our feature articles on Immunizations and Pre- and Post-Natal Care in this newsletter for notes on key messages to use with patients and parents. No one wants a measles outbreak this year on top of COVID-19.

VIDEO REMOTE INTERPRETERS ARE AVAILABLE FOR OFFICE AND TELEMEDICINE VISITS

HPSM's partnership with Certified Languages International (CLI) now allows contracted HPSM providers to access both phone and video interpreters for in-person and telemedicine visits. This will help you communicate with members who have limited English proficiency (LEP) or require American Sign Language (ASL) assistance. Visit www.hpsm.org/provider-vri for instructions on how to access video remote interpreter (VRIs), as well as:

- A four-minute training video on how to use the CLI platform to access VRIs
- Minimum system requirements your office/clinic equipment must meet to access VRIs
- How to prepare your patient for a remote visit with a VRI
- Key details to review with your patient regarding minimum system requirements their device must meet to access a VRI
- Connecting with the VRI before connecting with your patient at home
- How to get a secure code to access the CLI platform

If you have questions about how to access a VRI, email psinquiries@hpsm.org.



COVID-19 RESOURCES

FOR COVID-19 STRESS, PRESCRIBE SELF-CARE

Self-care is key to good health – especially during tough times such as these. Self-care helps people develop inner strength and mental resilience, which are potent antidotes to anxiety and depression. Healthy self-care habits also improve people’s physical fitness and strengthen immunity.

If the COVID-19 crisis is causing emotional, social, physical and economic hardship for your patients or for you, self-care may be just what the doctor ordered. Here are six self-care tips that you can recommend to your patients and staff or try yourself. When people choose healthy activities they enjoy, they are more likely to continue them – and hopefully develop lifelong healthy lifestyle habits!



SHARE THESE SIX SELF-CARE TIPS!

1 Reach out to friends and family

Keep in touch with people you trust on a routine basis (daily, if possible).

- Call or text friends and family to connect on a personal level. If you have children in your life, read them a story or tell them a story from your own life.
- Use FaceTime or Skype to express your feelings and laugh (which lets pent up feelings go).

2 Call a warm line

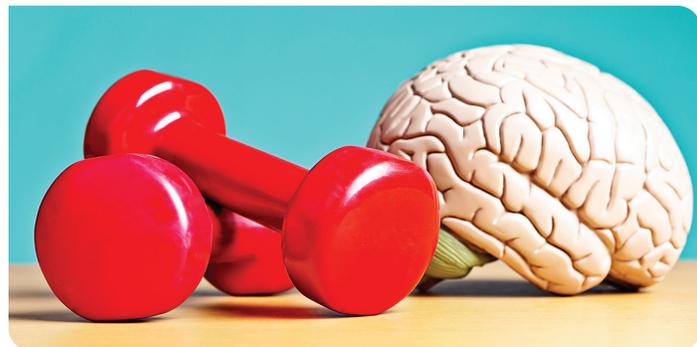
A free community service. Volunteers who are trained to listen are on hand any time 24/7.

- Peer-Run Warm Line: **1-855-845-7415** (online chat also available)
- Friendship Line (for seniors): **1-888-670-1360**

3 Think positive

Studies show that people with a “glass half-full” outlook are healthier and less stressed. They can even live longer!

- Do something that gives you a sense of accomplishment. For example, take a walk, garden, clean, read, listen to a favorite song/album/podcast or try a new recipe.
- Practice positive self-talk. You might think, “Being alone all the time is just too sad. I’ll never get through this.” Instead, try “I’ve been through challenging times before and I am strong enough to make it through this.”
- Try to remember a specific happy memory in detail. That will help you feel good now.



4 Put your feelings down on paper

This will help you process unhelpful thoughts and feelings.

- Journals let you to look back with self-confidence at how you coped with challenges. They can also help you think through or “feel through” difficult feelings.
- Start a “gratitude journal” where you jot down things that went well in your day. They can be big or small, such as laughing with a friend, seeing a beautiful sunset or walking your dog.
- If you don’t want to write, draw pictures about how you feel.

5 Learn something new

Expand your skills and knowledge to keep your mind active and engaged.

- Look for virtual tours of museums or places you’d like to visit.
- Read about a topic that has nothing to do with the news. Is there someone or some time period you’ve always wanted to know more about? This is a great time to learn more by reading book watching a documentary on that subject.
- Keep your brain challenged with online puzzles, crosswords or sudoku.
- Practice a musical instrument to keep your mind focused and engaged. Keep your mind focused and engaged.

6 Take care of yourself

Nurture your mind, body and spirit!

- Reading novels, listening to audiobooks and watching movies are great ways to distract yourself for a bit and enjoy the fun of storytelling.
- Put on some of your favorite music, close your eyes and listen without distractions or talking. Focusing only on the music can help soothe you and calm your mind.
- Try meditation. Sit and focus on your breathing. Try breathing in as you count to five, hold your breath for a count of six, and then release your breath as you count to seven. Doing this a few times is a quick way to feel more relaxed. Or you can do a guided meditation:
 - Search for a guided meditation online (e.g., YouTube)
 - Download a free app such as:
 - ▶ Calm - For sleep, meditation and relaxation
 - ▶ My Life Meditation - Helps you stop, breathe and think clearly
- Listen to podcasts that support self-care, such as “On Purpose” with Jay Shetty
- Eat well. Keep a food journal to track your healthy eating efforts and jot down your intentions to become mindful of what you’re eating.
- Go outside. If you are unable to get outside, sit near a window with natural light.

As a medical provider, you can assess members regularly for possible mental health or substance use treatment needs. Please use the Behavioral Health Screening tools to help determine if a referral is appropriate. The tools can be found at www.hpsm.org/provider/resources/forms.

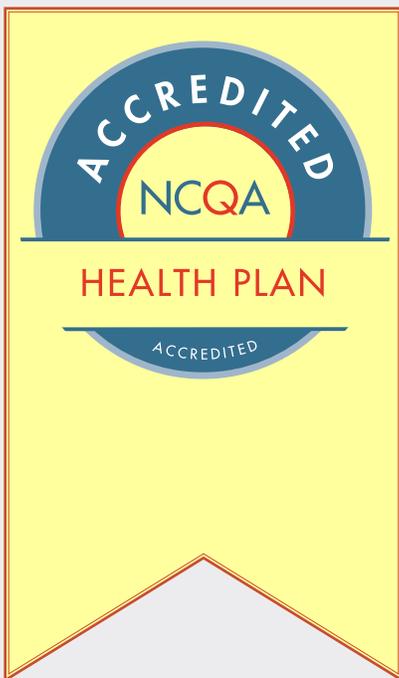
Support is available If your patients have trouble getting started or feel like they are not making progress you can refer them to mental health or substance use services that are part of their benefit. Download the Behavioral Health Referral referral form at www.hpsm.org/provider/authorizations/referrals, complete it and send it in. You can also refer the member or call the ACCESS Call center directly to be assessed for treatment at **1-800-686-0101**.

www.hpsm.org/covid-19/behavioral-health-support for additional community resources including help hotlines for crisis and emotional support as well as domestic violence and substance use.



Healthy is for everyone

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HPSM EARNS NCQA ACCREDITATION

On January 22nd, 2020, the National Committee for Quality Assurance (NCQA) awarded HPSM's Medi-Cal program Accreditation status. HPSM has been working toward this for several years, so we are proud to have finally achieved our goal.

NCQA accreditation is the health care industry's "seal of approval" certifying that HPSM meets the highest quality standards. Ultimately, the rigorous accreditation process made HPSM a more efficient and effective organization – one that better serves our members and providers.

Providers contributed to HPSM's Accreditation by submitting medical records during our HEDIS® review that starts in February every year.

Thank you for your effort and cooperation!