# **PROVIDER***Update*

NEWS & ANNOUCEMENTS

JANUARY 17, 2024

UPDATE 24-069



## Attention: Your Contract has Transitioned to Health Net Community Solutions, Inc. (Health Net\*)

## Here is some important information and reminders on what you need to know about this change.

### **THIS UPDATE APPLIES TO:**• Physicians

- Participating Physician Groups
- Hospitals

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   Ancillary Provid
- Ancillary Providers
- Community Supports (CS) Providers
- Enhanced Care Management (ECM) Providers

Impacted counties: Amador, Calaveras, Inyo, Mono and Tuolumne.

As a reminder, effective January 1, 2024, your provider contract with Health Net Community Solutions, Inc. (Health Net) replaced your California Health & Wellness Plan (CHWP) contract. This provider communication includes important information and reminders for you about this change.

#### **Continuity of Care Requirements and Protections**

Health Net honors and adheres to continuity of care requirements and protections for members with existing provider relationships. If a member has an established relationship with a physician or other provider, even if the physician or other provider is not in Health Net's network, Health Net ensures that members who request continuity of care will receive care from the existing provider for up to 12 months. Providers should proceed with scheduled visits, surgeries, and continue to provide necessary care and services to all members as part of these requirements and protections.

Special population members (individuals living with complex or chronic conditions), who receive specific benefits such as transplant care, in-patient services, end-of-life care, and transitioning members who are currently receiving care management services, will not have to request continuity of care as this benefit is provided automatically for this special population.

Information regarding continuity of care was shared in notification letters sent to members in October 2023. Member letters included continuity of care benefit details and information regarding the required steps members must take to request continuity of care. Members can request continuity of care over the phone, electronically or in writing. They can download the continuity of care form at https://www.healthnet.com/content/healthnet/en\_us/members/forms-brochures.html. Refer to the Additional information section below for a link to the DHCS 2024 Medi-Cal Transition Policy Guide.

#### **Prior Authorizations**

Health Net will honor all existing in-network and out-of-network prior authorizations. Providers are not required to obtain additional prior authorizations if they already have one in place. Providers should proceed as scheduled with visits, surgeries, and continue to offer necessary care and services authorized under an existing prior authorization.

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#### **Member PCP Assignments**

We have conducted an analysis of member primary care provider (PCP) assignments to ensure that members maintained their 2023 PCP relationships. This analysis revealed misassignments in our system, which we are currently rectifying. We anticipate resolving the issue in our system around mid-January and mailing new ID cards to affected members at that time. Eligibility will be retroactive to January 1, 2024. Additionally, provider groups will receive updated eligibility lists around mid-January. In the meantime, please proceed with scheduled visits, surgeries, and continue to provide necessary care and services.

#### Steps to Register for a Health Net Account

If you are	and you	then you	
An existing Health Net provider	Have an account on provider.healthnetcalifornia.com	Do not need to create a new account with Health Net. You can log into the Health Net secure provider portal at provider.healthnetcalifornia.com using your existing credentials.	
New to Health Net	Do not have an account on provider.healthnetcalifornia.com	<ul> <li>Must register for an account with Health Net to access member information. Follow the steps below:</li> <li>1. Go to provider.healthnetcalifornia.com and select Create New Account</li> <li>2. Follow the prompts until registration is complete.</li> </ul>	

#### Member ID Cards

As part of this change, members received new member ID cards (see sample below). Members should present a copy of this new ID card to your office when seeking services.

#### Front

#### Back Health Net Member Services is available 24 hours a day, 7 days a week 🕄 health net Member Services & Mental Health Benefits 1-800-675-6110 (TTY: 711) 1-800-675-6110 (TTY: 711) Nurse Advice Line Member Portal www.healthnet.com Name FIRST MI LASTNAME Issue Date MM/DD/YY 24/7 Video Doctor Appointment wwwTeladoc.com/hn Enrollment Date MM/DD/YY CIN # XXXXXXXXX If you think you have a medical or psychiatric emergency, call 911 or go to the Health Net only covers medical and nearest hospital. Physician Group and PCP hospital services provided or authorized See your PCP for non-emergency health needs like colds, minor infections or illnesses, or treatment for ongoing health needs. Do not go to the emergency room routine health care. PPG Name by your Participating Physician Group PCP or Clinic Name (PPG). Street Address Providers Call for Eligibility and authorization: 1-800-675-6110. To change your PPG or Primary Care Provider (PCP), call Health Net Member City State Zip + 4 PCP PHONE: X-XXX-XXX-XXXX Medi-Cal RX Help Line: 1-800-977-2273 Services at 1-800-675-6110 / TTY: 711 To report, or request approval for, inpatient admits, call: 1-800-995-7890 contracting providers. Frankary care Provisician referral in advance is required for most non-emergency services by contracting providers. Emergency services rendered to the member by non-Health Net providers are reimbursable by Health Net without prior authorization. Effective date with PCP: MM/DD/YY Office Copay: \$0 or visit www.healthnet.com. Health Net Community Solutions This card is for identification only. It does not verify eligibility Rx BIN 022659 Rx PCN 6334225 Mail all claims to: Health Net of California - Medicaid, PO Box 9020, Farmington, MO 63640-9020.

If you have questions regarding this transition, contact Health Net Provider Services at 800-675-6110 and select option 2, or visit the websites shown below, for additional information.

Resource	Website
2024 Medi-Cal Managed Care Plan Contracts	www.dhcs.ca.gov/CalAIM/Pages/MCP-RFP.aspx
2024 DHCS Medi-Cal Contract Award Transition and County-specific Q&As for Amador, Calaveras, Inyo, Mono and Tuolumne	healthnet.com/providers/2024MediCal
DHCS 2024 Medi-Cal Transition Policy Guide	www.dhcs.ca.gov/Documents/Managed_Care_Plan_Transition_Policy_Guide.pdf
Member Information	www.dhcs.ca.gov/CalAIM/Pages/Members.aspx

Торіс	For dates of service on or prior to December 31, 2023	For dates of service on or after January 1, 2024	Additional information
Appeals and Grievances	Phone: 877-658-0305 Fax: 855-460-1009	800-675-6110	N/A
CalAIM	cahealthwellness.com/providers/resources/calai m-resources.html	healthnet.com/content/healthnet/en_us/provid ers/support/calaim-resources.html	N/A
Case Management	Phone: 877-658-0305 Fax: 855-556-7909	<b>Email</b> : CASHP.ACM.CMA@healthnet.com <b>Fax</b> : 866-581-0540	Members currently receiving CHWP care management will continue to receive case management, most likely with the same case manager.
Claims Submission	California Health & Wellness Attn: Claims P.O. Box 4080 Farmington, MO 63640-3835 <b>Payer ID</b> : 68069 <b>MHN Claims</b> P.O. Box 14621	Health Net Community Solutions, Inc. Medi-Cal Claims PO Box 9020 Farmington, MO 63640-9020 <b>Payer ID</b> : 95567 <b>Behavioral Health Claims</b> Health Net Medi-Cal	You have 180 days from the date of service to submit claims to CHWP for services provided in 2023.
	Lexington, KY 40512-4621 Payer ID: 22771 Claim status check Phone: 800-444-4281	P.O. Box 14621 Lexington, KY 40512-4621 <b>Payer ID:</b> 22771	
Concurrent Review	<b>Phone</b> : 877-658-0305 <b>Fax</b> : 855-556-7910	Phone: 800-675-6110 Fax: 800-676-7969	N/A
Disputes and Appeals	California Health & Wellness Plan Attn: Claim Disputes PO Box 4080 Farmington, MO 63640-3835 <b>Phone</b> : 877-658-0305 <b>Fax</b> : 855-460-1009 <b>MHN Provider Appeals/Disputes</b> P.O. Box 989882 West Sacramento, CA 95798-9882	Health Net Community Solutions, Inc. Attn: Medi-Cal Provider Appeals Unit PO Box 989881 West Sacramento, CA 95798-9881 <b>Phone</b> : 800-675-6110 <b>Behavioral Health Claims</b> Health Net Medi-Cal Provider Appeals/Disputes P.O. Box 989882 West Sacramento, CA 95798-9882	N/A
Facility Site Review	CHWP is responsible for all primary care physicians Medi-Cal facility site and medical record reviews.	Health Net is responsible for all primary care physicians Medi-Cal facility site and medical record reviews.	N/A
Eligibility and Benefit Checks	provider.cahealthwellness.com	provider.healthnetcalifornia.com	N/A
Hospital Admissions	Phone: 877-658-0305 Fax: 855-556-7907	Phone: 800-995-7890 Fax: 800-676-7969 provider.healthnetcalifornia.com	N/A

### Contact Information for Claims, Prior Authorization, Eligibility & Benefits, Websites, Portals, & More

Торіс	For dates of service on or prior to December 31, 2023	For dates of service on or after January 1, 2024	Additional information
Member Services	<b>Phone</b> : 877-658-0305 <b>Fax</b> : 877-302-3434 Monday-Friday, 8 a.m. to 5 p.m.	<b>Phone</b> : 800-675-6110 <b>Fax</b> : 818-676-5161 or 800-281-2999 24-hours a day, seven days a week	N/A
Member Websites	cahealthwellness.com/members/medicaid.html	Healthnet.com	N/A
Pharmacy	<b>Medi-Cal Rx</b> – Self-administered drugs and supplies obtained under the pharmacy benefit:	<b>Medi-Cal Rx</b> – Self-administered drugs and supplies obtained under the pharmacy benefit:	N/A
	<b>Prior auth fax</b> : 800-869-4325 <b>Help Desk</b> : 800-977-2273	<b>Prior auth fax</b> : 800-869-4325 <b>Help Desk</b> : 800-977-2273	
	AcariaHealth – Specialty Pharmacy	Medical benefit medication prior authorization:	
	Prior auth fax: 855-217-0926 Phone: 855-535-1815	MedPharm Attention: Prior Authorization 4191 East Commerce Way	
	CHWP Pharmacy Dept – Provider-administered drugs requiring prior auth:	Sacramento, CA 95834-9679 Mailstop: CA4151-04-530	
	<b>Prior</b> auth fax: 877-259-6961 <b>Phone</b> : 877-658-0305	<b>Phone</b> : 800-867-6564 <b>Fax</b> : 833-953-3436	
Plan Logos	СНШР	Health Net	N/A
	California health & wellness	inealth net	
Prior Authorization	Phone: 877-658-0305 (For TTY, contact California Relay by dialing 711 and provide the 877-658-0305 number)	<b>Fax</b> : 800-743-1655 Phone: 800-421-8578	Health Net will honor all existing in network and out of network prior
	<b>FAX</b> : 866-724-5057	Transplant fax: 833-769-1141	authorizations. Providers do not need to obtain a new prior authorization if one is already in place.
Provider Operations Manuals	cahealthwellness.com/content/dam/centene/ca healthwellness/pdfs/CHW_Provider_Manual.FIN AL.pdf	providerlibrary.healthnetcalifornia.com	N/A
Provider Portals/	Public website: cahealthwellness.com/providers.html	Public website: provider.healthnet.com	If you do not have access to
Websites	Secure portal: provider.cahealthwellness.com	Secure portal: provider.healthnetcalifornia.com	provider.healthnetcaliforr
	You can continue to access the CHWP portal at provider.cahealthwellness.com for historical information as needed until further notice.		a.com you must register for an account Instruction on how to register are on page 2 of this update.
Provider Services	<b>Phone</b> : 877-658-0305 Monday through Friday 8 a.m. to 5 p.m. (PT)	Phone: 800-675-6110, option 2 Fax: 818-676-5387 or 800-281-2999	N/A