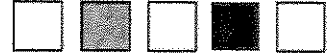


Provider BULLETIN

OCTOBER 2009



New Alliance CompleteCare Benefits for 2010

This Bulletin applies to:

- Medi-Cal
- Alliance CompleteCare
- Healthy Families
- Alliance Group Care

Alameda Alliance for Health is very pleased to announce it has added both dental and vision coverage to its Alliance CompleteCare (ACC) Medicare Advantage plan for 2010. ACC serves Alameda County residents who are dually eligible for Medi-Cal and Medicare. The addition of these new benefits to ACC is especially important given the State's recent Medi-Cal cuts to supplemental benefits, which included dental and vision coverage.

The new ACC benefits are effective January 1, 2010, and ACC accepts enrollments year-round. The chart below details program changes:

WHAT'S INSIDE:

2010 ACC Benefits

Healthy Families Program Update

Caregiver Resources

New WIC Food Package & Therapeutic Formula

	2009	2010
Monthly Premium	\$0	\$0
Dental	January 1 - June 30, 2009: Services covered through Denti-Cal; benefit eliminated effective July 1, 2009.	Covered services* include: -oral exams -up to 1 cleaning every 6 months - X-rays & fillings - crowns, bridges & dentures (*partial listing)
Vision	January 1 - June 30, 2009: Services covered through Medi-Cal; benefit eliminated effective July 1, 2009.	Covered benefit includes: - eye exams -\$100 every 2 years for glasses & contacts
Over-the-counter drugs and supplies from catalog	\$20 per quarter for Medicare approved over-the-counter drugs and supplies.	Not covered

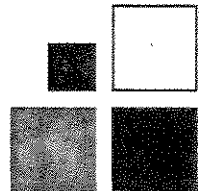
In addition to the dental and vision benefits, Alliance CompleteCare members have:

- \$0 co-pays on generic prescriptions
- access to 90-day supply for prescriptions & mail order service
- transportation (up to 24 one-way trips for medical appointments)
- a personal Care Advisor to assist members with coordinating care
- free interpreter services for medical appointments

To learn how to enroll your dual eligible patients in ACC, speak to your Provider Services Representative directly: Kreshenda Jenkins (510) 747-6203 or Lorena Ahumada (510) 747-6209.

ALAMEDA
Alliance
FOR HEALTH

Health care you can count on.
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PROGRAM UPDATE



Waiting List Dropped & Increases in Premiums and Co-payments

The Managed Risk Medical Insurance Board (MRMIB) announced that funding for the Healthy Families Program (HFP) is now sufficient to avoid disenrolling children currently enrolled in the program. MRMIB also opened the program to new enrollments on September 17, 2009. HFP is low-cost insurance that provides health, dental, and vision coverage to children and teens who do not have insurance and do not qualify for free Medi-Cal.

In addition, MRMIB announced that they have approved increases in premiums and co-payments for HFP. **These program changes take effect November 1, 2009.** Members with lower incomes (household income under 150% FPL) are exempt from any program changes. Members with household incomes between 151% - 250% FPL, will have increases in monthly premiums and changes in co-payments.

To assist your practice and make our members aware of the new co-payments, the Alliance will issue new Healthy Families ID cards to members with a November 1, 2009 effective date. It is still the responsibility of the provider's office to check eligibility. This will ensure you are collecting the correct co-payment from your patients. Below is a breakdown of the co-payment changes:

- Co-payments for non-preventive health, dental, and vision services will increase from \$5 to \$10.
- Co-payments for generic prescription drugs will increase from \$5 to \$10.
- Co-payments for brand name prescription drugs will increase from \$5 to \$15, unless generic is available or brand name drug is medically necessary.
- Co-payments for emergency room visit services will increase from \$5 to \$15, unless the child has to stay in the hospital.

MRMIB estimates it will take about 30 business days to process all the applications for wait-listed children and to notify families as to whether their children are eligible and have been enrolled in the program. Actual health care coverage begins 10 days after enrollment in the program.

The funding needed for Healthy Families was made possible by: 1) the passage of AB 1422 (Bass), which provides revenues for the program from a gross premium tax paid by Medi-Cal managed care plans; 2) funding from the state First Five Commission for children ages 0 - 5; and 3) increases in member premiums and co-payments.

For more information on the Healthy Families Program changes:

Log onto www.healthyfamilies.ca.gov

or call 1-800-880-5305



Community Organization Spotlight: Family Caregiver Alliance Patients as Caregivers Have Great Resources

Family Caregiver Alliance (FCA) offers programs to support and sustain the important work of families and friends caring for loved ones with chronic, disabling health conditions. FCA offers programs at national and local levels. A wealth of caregiving advice, resource listings, newsletters, fact sheets, research reports, policy updates and discussion groups are available free on their website. Alliance providers are encouraged to utilize FCA's tools and publications.

As our population ages, more people with chronic and disabling conditions are choosing to live at home or in the community, launching their family members and close friends into action as caregivers. The value of this unpaid care is stunning, but it exacts a high, often hidden, cost. A large and growing body of evidence confirms that providing care for a chronically ill person can have harmful physical, mental and emotional consequences for the caregiver. Informal caregivers are at risk for many different physical and mental health challenges that include:

- High levels of stress and frustration. 50% higher incidence of clinical depression.
- Harmful behaviors, from increased use of alcohol or other substances to higher than normal levels of hostility.
- Worse physical health and more chronic conditions such as heart disease, high blood pressure, diabetes, and arthritis than their noncaregiving peers. They may also suffer from poorer immune function and from exhaustion.
- Neglect of their own care.
- Higher mortality rates than noncaregivers of the same age.

Although family members commonly undertake care for an ill or elderly loved one willingly and find it to be a great source of personal satisfaction, caregivers themselves need support services.

Visit www.caregiver.org or call Family Caregiver Alliance at (800) 445-8106.



Free language Service

Friends and family want to be helpful. Even so, they should not interpret for you at your doctor visits. If you need someone to help you with your language needs, you can get this free service from us.

Call us at 510-747-4567 to learn more!



New WIC Food Package

The new WIC food package was rolled out statewide on October 1, 2009. There is a newly revised WIC Referral Form to document the type and amount of WIC foods to issue to infants and children with special needs. **To obtain the new form, call Elizabeth Edwards, Alliance Health Educator, at 510-747-6178.**

- For the first time in WIC's 35 year history, fresh fruits and vegetables will be added to the package.
- Dairy Foods – Only low fat milk will be given to women and children over age 2. Soy milk and tofu will also be available as an alternative. **Children will need a physician approval for this option.** This is done on the new WIC Referral Form and a qualifying condition must be specified.
- Grains and Cereals – The new package will emphasize whole grain breads, brown rice, corn and whole grain tortillas and breakfast cereals.
- Protein Foods – The egg count will be reduced to from two to one dozen/month/participant. Ready-to-eat beans will be included. Breastfeeding women will have the option of getting canned salmon or sardines as well as tuna.
- Breastfeeding – Breastfeeding moms get the most fruit and vegetables as an incentive to continue exclusive breastfeeding. Babies will get cereal plus baby fruits and vegetables at 6 months of age. WIC staff has received training to counsel and support moms with breastfeeding issues. There is also a breastfeeding resource guide available from Alameda First 5/Every Child Counts. Call Elizabeth Edwards at 510-747-6178 for copies.

WIC will no longer routinely offer formula during the first month of life (to protect and establish breastfeeding). The new formula allowance may not meet all the needs of an infant.

Clients can identify the closest WIC office by calling 1-888-WIC-WORK(s), they will be prompted to ID language and enter their Zip Code, and phone numbers of the closest WIC office(s) will be provided.

Health insurance plans will be responsible for formula for failure-to-thrive cases. In selected circumstances, the Alliance will cover the cost of therapeutic formula for babies and children under the following criteria:

- Children under 12 months of age may be authorized formula up to 12 months of age. The family and the provider will be notified that a dietician's consult confirming the need for therapeutic formula is required for authorization of formula beyond a 3 month period.
- Children over 12 months of age will be authorized formula for 3 months. The family and the provider will be notified that a dietician's consult confirming the need for therapeutic formula is required for authorization of formula beyond the 3 month period.

CONTACT INFORMATION



Health care you can count on.
Service you can trust.

**1240 South Loop Road
Alameda, California 94502**

providerservices@alamedaalliance.org

We're on the Web!

www.alamedaalliance.org

Using the online Provider Connection, Alliance Providers can:

- ▶ Verify member eligibility
- ▶ Check authorization/claim status
- ▶ View an online provider manual

To get a Provider Connection account, just log onto www.alamedaalliance.org and click on "Provider Connection." Follow the online instructions. If you have problems, call (510) 747-4510 or e-mail providerservices@alamedaalliance.org

Free Interpreter Services

Does your Alliance patient need an interpreter for visits to your office? Interpreter services are free for Alliance members. Please contact Member Services at (510) 747-4567 to arrange for an in-office or telephonic interpreter at no cost to you. Or fax us at (510) 747-4504.

Eligibility (24-hour automated line).....	(510) 747-4505
Authorizations (provider use only).....	(510) 747-4540 fax (510) 747-4507
Case Management Services.....	(510) 747-4540 <i>Asthma and Diabetes</i>
Claims	(510) 747-4530 fax (510) 747-4506
Member Services (8 a.m. – 6 p.m., M-F)	(510) 747-4567 fax (510) 747-4504
Provider Credentialing	(510)747-4555 Ext 4025
Provider Services General Information	(510) 747-4510 fax (510) 747-4508
Provider Services Representatives:	
Lorena Ahumada	(510) 747-6209
Kreshenda Jenkins.....	(510) 747-6203
Jett Stansbury, Sr. Director, Provider Services.....	(510) 747-6189
Alameda County Behavioral Health	(800) 491-9099
Children First Medical Group	(510) 428-3489
Community Health Center Network	(510) 297-0200
MedImpact (Pharmacy Benefit Manager)	(800) 788-2949
Delta Dental	(800) 338-4337
Denti-Cal	(800) 322-6384
Domestic Violence Hotline	(510) 536-7233
Healthy Families Program.....	(800) 880-5305
March Vision Care.....	(888) 493-4070
PacifiCare Behavioral Health:	
Physician Consultation	(800) 292-2922
Member Referral.....	(888) 789-7110
Quest Diagnostic (Outpatient Laboratory Services)	(800) 288-8008
Telephonic Interpreter Services Vendor	(510) 809-3986