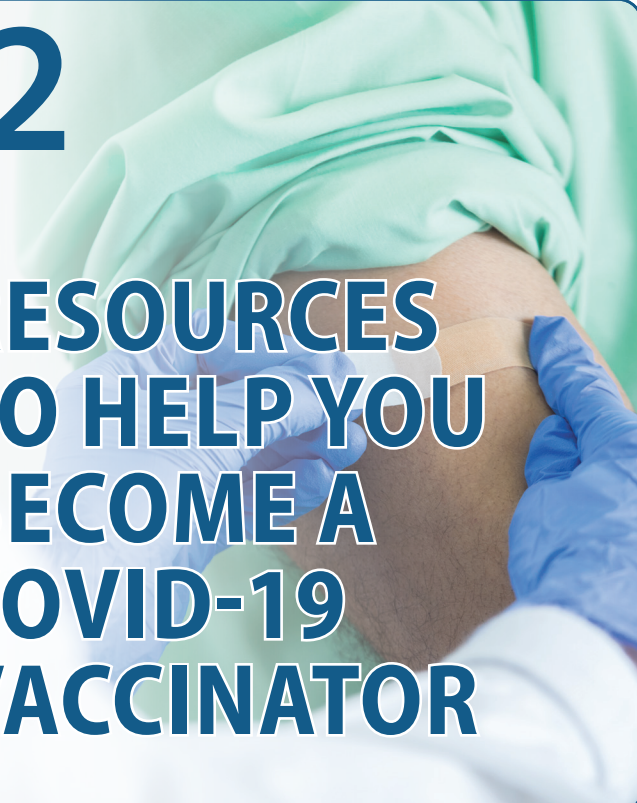


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COVID-19 UPDATES

RESOURCES TO HELP YOU BECOME A COVID-19 VACCINATOR

COVID-19 vaccination rates are high in San Mateo County, but are over 20 percent lower for HPSM members. With the emergence of the Delta variant and cases on the rise, it is imperative to close this gap. As a provider, you are on the front lines of this historic fight against COVID-19 and can have a major impact on the safety of our community. HPSM is grateful for all that you do to increase vaccination rates, and we have put together several new resources to support you as a COVID-19 vaccinator at hpsm.org/provider-covid-resources/content-page-4.

NOT SIGNED UP TO BE A VACCINATOR YET? WE'RE HERE TO HELP!

With the vaccine likely to be approved for younger age groups soon, it's particularly important for providers who see younger members to get registered as a vaccinator in advance.

- Watch our "How to Become a COVID-19 Vaccinator" webinar and download the slides. The presentation includes a live demonstration with network provider Dr. Connie Kniveton, as her team delivers a mock vaccination and responds to potential adverse effects. You'll also hear comments from Dr. Anand Chabra, San Mateo County Chief of the COVID-19 vaccination branch, on planning for vaccination of those under 12 years old.
- Download a clinic vaccine checklist and other useful forms for your office. These include forms that Dr. Kniveton shared that she wished she had before setting up for vaccine administration.

LOOKING FOR TOOLS TO HELP YOU TALK TO YOUR PATIENTS ABOUT THE VACCINE?

- Download and print flyers, FAQs and talking points for your office, including resources that we have field tested with our members to help build vaccine confidence.
- Learn from other clinicians about how to navigate these conversations. Watch the "How to Have Crucial Conversations about COVID-19" webinar (and check out other great resources) on the 30 Conversations in 30 Days Campaign page at eziz.org/covid/30conversations.

▶ Have questions about becoming a vaccinator or ideas about resources that help? Please email psinquiries@hpsm.org.

HOUSING IS KEY: COVID-19 RENT RELIEF



If you have patients who were not able to pay rent between April 2020 and March 2021 due to money or health issues, California's COVID-19 Rent Relief program may be able to help. Landlords can get reimbursed for 80 percent of eligible renters' unpaid rent for that one-year period. The program does not ask people about their citizenship status. Renters and landlords can apply. People can learn more and apply at housing.ca.gov.

DO YOUR PATIENTS EXPERIENCE FOOD INSECURITY? HPSM'S NEW GUIDE CAN HELP

Many people in San Mateo County suffer from food insecurity. That means they lack reliable access to a sufficient quantity of affordable, nutritious food. The good news is that San Mateo County has many great resources to help people get nutritious food for free or at reduced cost.

To help our members struggling with food insecurity, HPSM created a **Guide to Food Assistance Programs**. This new resource is designed to help people find the type of local food assistance programs that meet their needs. The guide lists these programs by categories that include:



Financial aid programs
that help eligible people pay
for food that they buy



Food delivery programs
that bring food to those who
cannot get to the store



Food pantries
that give free groceries to
people who need it



Food pickup events
that provide free bagged
groceries



School nutrition programs
that offer free or low-cost
meals to qualified students



Shelters
that give people in need a
place to stay as well as food



Sit-down meal programs
that serve free or low-cost hot
meals on a regular basis

See HPSM's Guide to Food Assistance Programs
online at hpsm.org/food-assistance

HOW TO FIND OUT IF YOUR PATIENTS ARE EXPERIENCING FOOD INSECURITY

It may not be obvious that someone lacks reliable access to sufficient nutritious food. As a trusted health care provider, you can find out by asking your patients three simple questions. A good way to start these conversations is to let patients know you ask all your patients these questions because of how important nutritious food is to health.

- ☑ Do you have any concerns about having enough food for the day or week for you or your family?
- ☑ Did you or members of your family skip a meal in the last year due to not having money or support resources?
- ☑ In the last year, have you had enough food for you or your family?



If a patient answers **yes** to any of these questions, direct them to hpsm.org/food-assistance

Sources:
sirenetwork.ucsf.edu
ers.usda.gov/media/8282/short2012.pdf
fao.org/3/as583e/as583e.pdf

COVID-19 UPDATES

NEARLY ONE-QUARTER OF POST-COVID PATIENTS MAY HAVE LONG-TERM HEALTH PROBLEMS

A recent FAIR Health study¹ of nearly two million Americans' medical insurance records suggests that "long-haul" COVID-19 may be a common condition. According to the study, one month or more after contracting COVID, 23 percent of patients sought treatment for conditions that had not been diagnosed prior to their getting the virus. Other research² has reported similar results, but FAIR Health's white paper is the most comprehensive yet to study post-COVID outcomes.

While half of those who were hospitalized for COVID-19 reported long-term health issues, so did 27 percent of people with mild-to-moderate COVID symptoms and 19 percent of those who were originally asymptomatic. FAIR Health president Robin Gelburd emphasized that clinicians need to be aware of this because "There are some people who may not have even known they had COVID, but if they continue to present with some of these conditions that are unusual for their health history, it may be worth some further investigation by the medical professional that they're working with."³

Currently, HPSM's authorization and claims policies for conditions diagnosed following COVID-19 infection are the same as they are for health issues not related to COVID. Researchers will continue studying post-COVID cases to determine their true prevalence and how long these conditions last. HPSM will keep providers updated as more information about long-haul COVID emerges.

The most common long-haul COVID-19 conditions include:

- Pain
- Breathing problems
- High cholesterol
- Malaise and fatigue
- High blood pressure



Protect your patients from long-haul COVID by encouraging vaccination

People cannot get long-haul COVID if they never catch COVID-19 – and all three approved vaccines provide high levels of protection against both infection and severe illness. The Delta variant is spreading rapidly because it may be more than twice as transmissible as the original virus.⁴ Become a vaccinator today and help lead the fight against COVID-19 – see page 2 or contact PSInquiries@HPSM.org to get help.

- Patients can find vaccination location information at hpsm.org/covid-19-vax
- Read HPSM's tips for encouraging vaccination at tinyurl.com/j4cw4tdt

1. FAIR Health White Paper. A Detailed Study of Patients with Long-Haul COVID: An Analysis of Private Healthcare Claims. June 15, 2021. <https://bit.ly/3v8RSQv>
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3. Belluck, P. Many Post-Covid Patients Are Experiencing New Medical Problems, Study Finds. New York Times: June 15, 2021. <https://www.nytimes.com/2021/06/15/health/covid-19-patients.html?action=click&module=Well&pgtype=Homepage§ion=Health>
4. Mandavilli, A, and Mueller, B. Delta Variant Widens Gulf Between 'Two Americas': Vaccinated and Unvaccinated. July 14, 2021. <https://www.nytimes.com/2021/07/14/health/delta-variant-uk-usa.html>

HPSM Dental

HPSM WILL BEGIN MANAGING DENTAL BENEFITS THIS JANUARY

In the Winter 2019 issue of *HealthMatters MD* (tinyurl.com/2afwbtyx), we announced that HPSM would be launching **HPSM Dental**: an innovative pilot program that is the first in California to integrate Medi-Cal members' dental, medical and behavioral health benefits. Now, after two years of planning with state regulators, operational preparation and provider recruitment, the day is finally here: we will be going live on January 1, 2022. This pilot has the ambitious goal of raising the bar on dental utilization among Medi-Cal members in San Mateo County — particularly for children, whose utilization lags far behind national averages.

WHAT DOES THIS MEAN FOR HPSM MEMBERS AND DENTAL PROVIDERS?

This change will be automatic, and members do not need to do anything to enroll. Starting in January, Medi-Cal beneficiaries will receive their dental benefits through HPSM rather than through state Denti-Cal. Members will have access to improved dental care coordination, and contracted dental providers will see higher payment rates, fewer authorization requirements, and faster claims payment.

WHAT DOES THIS MEAN FOR OUR PROVIDER NETWORK OVERALL?

Starting on January 1, 2022, your HPSM patients will be able to get access to dental care with any dental provider in our network. The current Denti-Cal network is quite limited, so HPSM will be working hard to increase the number of contracted providers. That's where you come in!

WE NEED DENTAL PROVIDERS TO JOIN OUR NETWORK AND SERVE THIS POPULATION OF OVER 130,000 MEMBERS




Please tell the dental providers in your social and professional networks about this opportunity to make a difference in people's lives while benefiting from:

Higher payment
than state Medicare agency rates

More rapid
claims payment

More streamlined
prior authorization processes

Plus:

-  Local program administration: providers can call a direct contact at HPSM with any questions
-  Dedicated HPSM Coordinators who handle referrals to specialty providers
-  More flexibility: providers can accept new patients when they are ready

Dental providers can apply to HPSM's network and learn more about HPSM Dental at hpsm.org/hpsm-dental-providers

Prospective providers who have questions about joining HPSM's network are encouraged to email dental@hpsm.org

Learn how this new program will improve clinical outcomes by integrating dental, medical and behavioral health benefits at hpsm.org/dental-integration



MEDI-CAL RX: NEW PRESCRIPTION DRUG MANAGEMENT PROGRAM STARTS JANUARY 1, 2022

In the Winter 2020 issue of *HealthMatters MD* (tinyurl.com/2afwbtyx), we shared information about the upcoming “Pharmacy Carve Out” mandate within Governor Gavin Newsom’s Executive Order N-01-19¹. Since that publication, the timeline for roll out was moved from April 2021 to January 1, 2022. With that go live date around the corner, here’s an update on the key facts to know.

WHAT IS THE PHARMACY BENEFIT CARVE OUT?

This change is a statewide mandate requiring the Department of Health Care Services (DHCS) to transition all Medi-Cal pharmacy services from HPSM to fee-for-service (FFS) Medi-Cal. Starting on January 1, 2022, outpatient pharmacy benefits and services administered by DHCS in the Medi-Cal FFS delivery system will be rebranded collectively as “Medi-Cal Rx.” The major implication for you and for our members is that outpatient pharmacy benefits for HPSM Medi-Cal members will no longer be managed by HPSM, but by DHCS in partnership with its contracted pharmacy benefits manager (PBM), Magellan.²

WHAT’S CHANGING

FORMULARY: Instead of a formulary, there is a preferred drug list, called the “Medi-Cal Contract Drug List”

For pharmacy-benefit drugs, you’ll need to refer to this list instead of HPSM’s formulary. Please familiarize yourself with the Medi-Cal Contract Drug list at dhcs.ca.gov/services/pages/ff.html. Keep in mind that, like most formularies you are used to, the preferred drug list may change.

AUTHORIZATIONS: Where and how you submit pharmacy-benefit prior authorization requests will change

There are two instances when you will need to submit a prior authorization request to allow for payment of a drug you are prescribing:

1. The drug is not on the Medi-Cal Contract Drug List
2. The drug is on the Medi-Cal Contract Drug List, but is flagged as requiring a prior authorization

Prior authorization requests will go to Magellan, the contracted PBM for DHCS. Magellan’s prior authorization requirements, review criteria and process for handling authorization denials will differ from what HPSM has historically required.

To ease with this transition, DHCS will allow for a 180-day transition supply where DHCS will not require a prior authorization for any drug that normally requires one for patients who are currently on the drug with HPSM. DHCS will also honor all existing prior authorizations that have been approved by HPSM through their stated duration (not to exceed one year).

There will be two ways to submit prior authorization requests:

1. Online through medi-calrx.dhcs.ca.gov or covermymeds.com
2. By fax or mail (for instructions, visit medi-calrx.dhcs.ca.gov)

BILLING: How pharmacies bill for prescriptions will change

Starting on January 1, 2022, pharmacies are to bill Magellan instead of HPSM (or HPSM’s PBM, SS&C). To bill Magellan, pharmacies should use the following information: BIN 022659, PCN 6334225 and the 14-character beneficiary identification number located on the patient’s BIC.



WHAT'S STAYING THE SAME

Medi-Cal Rx will not affect:

1. Pharmacy benefits for HPSM CareAdvantage or HealthWorx patients, which will still be managed by HPSM
2. All other health care benefits currently managed by HPSM
3. Pharmacy services billed as a medical and/or institutional claim instead of a pharmacy claim, which will continue to be billed through HPSM

WHAT'S NEXT

Take these three steps to learn more about Medi-Cal Rx and stay informed as we head into this new chapter:

1. Sign up to receive training on Medi-Cal Rx and the new required provider portal at medi-calrx.dhcs.ca.gov/home/education
2. Register for the new required provider portal via the Learning Management System, Saba, at medi-calrx.dhcs.ca.gov
3. Subscribe to receive emails for the latest Medi-Cal Rx updates at mcrxsspages.dhcs.ca.gov/Medi-CalRxDHCSgov-Subscription-Sign-Up

► If you have questions, please email Magellan's Medi-Cal Rx Education and Outreach team at medicalrxeducationoutreach@magellan-health.com

HPSM RATED 4 OUT OF 5 IN NCQA'S COMMERCIAL HEALTH PLAN RATINGS 2021

On September 15, 2021, the National Committee for Quality Assurance (NCQA) released its Medicaid Health Plan Ratings 2021, and gave HPSM a rating of 4 out of 5.

NCQA awarded HPSM's Medi-Cal program Accreditation status in January 2020. NCQA accreditation is the health care industry's "seal of approval," indicating that HPSM meets the highest quality standards for patient experience, prevention and treatment. While HPSM had worked to get accredited by NCQA for several years, this is the first year that HPSM received a rating, since it is the first year it is NCQA-accredited (and therefore agreed to public reporting). While NCQA rated several other health plans in California 4 out of 5, no plans rated higher than that.

Ultimately, the rigorous NCQA accreditation process has made HPSM a more efficient and effective organization – one that better serves our members and providers. Providers contributed to HPSM's 4-star rating by submitting medical records during our HEDIS® review that starts in February every year. *Thank you for your effort and cooperation!*

► See NCQA's Plan Detail Ratings of HPSM at tinyurl.com/33xe2xyc



CLINICAL CORNER

HPSM'S POPULATION HEALTH MANAGEMENT (PHM) PROGRAM

ASTHMA OUTREACH PROGRAM

This program helps members diagnosed with asthma avoid preventable attacks. HPSM's Health Promotion staff calls members to:

- Remind them to fill and pick up their prescriptions from the pharmacy
- Point out the value of using controller inhalers as prescribed to manage asthma symptoms
- Encourage them to call their PCP if they have any questions about their asthma

Members with asthma who have not filled some or all their controller inhaler prescriptions are automatically opted in to this program. Members can opt out by calling HPSM's Health Promotion Unit at **650-616-2165**. To learn more, visit hpsm.org/asthma or call **650-616-2165**.

Please note that HPSM refers our pediatric members to the County home visiting asthma program. Members can enroll in or out of that program when the County contacts them for the first time. To find out more about the pediatric program, call HPSM's Health Promotion Unit at **650-616-2165**.



BABY + ME PROGRAM

All pregnant women and new moms are eligible for this program. Baby+Me promotes timely care and health for the mother and baby, from the start of pregnancy to birth and beyond. HPSM Health Promotion staff help connect participating pregnant women, new moms and their families to many great community resources. Plus, participants can earn up to \$100 in Target GiftCards™ for going to two appointments.

- Participants who visit their provider within the first 12 weeks of pregnancy get a \$50 Target GiftCard™
- Participants who visit their provider between 1 and 12 weeks after having their baby get a \$50 Target GiftCard™

Check out our Winter 2019 newsletter (tinyurl.com/2yc95h5t) to learn more. Eligible members can sign up for the Baby+Me program at hpsm.org/baby-and-me. Or they can call HPSM's Health Promotion Unit at **650-616-2165** to join or opt out.

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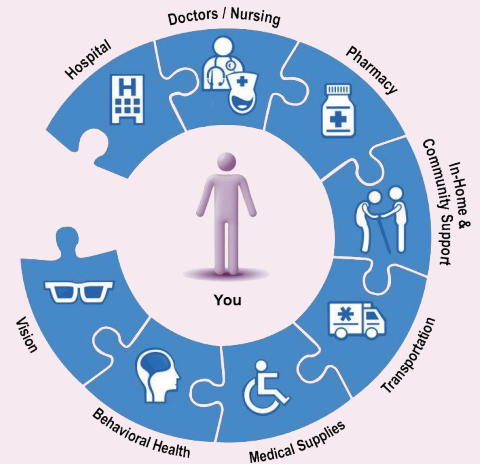
HPSM's PHM Program makes it easier for our providers to help their patients get and stay healthy. As part of PHM, we offer several highly unique support programs as part of our commitment to keeping our community healthy. Here is a look at how these programs help your patients reach their health goals.

CARE TRANSITIONS

This outreach program is for members who have had an inpatient hospital stay and are being discharged home or to another care setting. Coordinating post-discharge care helps the patient's care team better manage their outpatient or post-acute health and avoid readmission. After the member leaves the hospital, a Care Transitions Coach helps them follow their care plan and reduce their chance of returning to the hospital. The Care Transitions Coach:

- Works with the member's case manager and social worker on their care plan
- Helps the member get care from their PCP
- Tells the member's family about what kind of care they may need

A Care Transitions Coach either visits eligible members in the hospital or calls them after their hospital stay to ask if they want to join the program. Members can opt in or out at that time.



COMPLEX CASE MANAGEMENT

Complex Case Management is a program for members with multiple chronic conditions, co-morbidities (presence of two or more medical conditions) and/or co-existing functional impairments (such as sight impairment and mobility limitations). This highly valuable program aims to help members navigate the health care system and improve:

- Overall care delivery
- Health outcomes
- Psychosocial supports to help meet members' mental, emotional and social needs

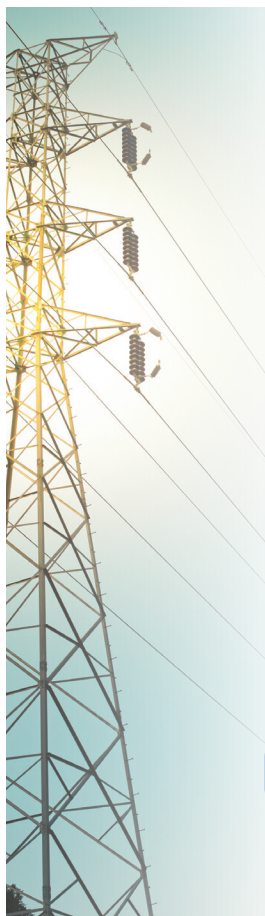
It also promotes connection with HPSM programs, community resources and other healthcare providers. This helps the member move towards reaching their health goals. The program achieves its goals through a partnership between an HPSM Case Manager, the member and their primary care provider (PCP). The Case Manager works with the member and their authorized representatives to:

- Identify and prioritize their problems, goals and interventions
- Identify barriers and develop a solution-focused care plan
- Refer them to helpful resources
- Assist members in managing complex health issues or critical events
- Develop a follow-up schedule within specific time frames

A Case Manager calls eligible members to ask if they want to join the program. Members can opt in or out at that time. To learn more, visit hpsm.org/cc or call 650-616-2060.

If you are interested in referring a member for complex case management, please complete our referral form at hpsm.org/provider-forms.

PROVIDER RESOURCES



PREPARE FOR PUBLIC SAFETY POWER SHUTOFFS

With California wildfire season lasting longer each year, PG&E now schedules planned power outages to prevent fires in high-risk areas. Last year, San Mateo County was directly impacted by these public safety power shutoffs (PSPS), with many providers and members needing extra support for treatment, medical equipment and more.

It's critical to prepare for these events *before* they happen. To help you and your patients create an action plan, we've put together resources at hpsm.org/providers-psps that include:

- Readiness checklists to prepare your facility in case of a PSPS
- Important information on refrigerating medications and running medical equipment during a PSPS
- Ways to stay informed of PSPS events which could impact your facility or patients' homes
- A list of what kind of patients are likely to be impacted by a PSPS and how you can help them prepare
- And more

Thank you for your continued commitment to our community and the safety of HPSM's members.

▶ If there are additional PSPS resources or materials you'd like to see, please contact psinquiries@hpsm.org

WHEN PATIENTS' STATE MEDI-CAL CHANGES TO HPSM MEDI-CAL

HPSM manages the health care of everyone in San Mateo County who is eligible for Medi-Cal (California's Medicaid program). When your patients become eligible for Medi-Cal, they will start with California State Medi-Cal, which is managed by the Department of Health Care Services (DHCS), for a few weeks. The number of weeks this takes depends on when the County approved the member's Medi-Cal application. While the process sometimes happens more quickly or slowly than the timeframes shown below, here's how it works:

BILLING BASICS As a provider, you will bill DHCS and be reimbursed on a fee-for-service basis during the initial period. After a few weeks, members then transition to HPSM Medi-Cal. At that point, members will get an HPSM ID card in the mail. Providers can then bill HPSM for services provided.

If your patients' Medi-Cal application was approved...	Weeks 1 - 4	Weeks 4 - 8	Weeks 9+
...during the first three weeks of the month	State Medi-Cal (DHCS)	HPSM	
...after the third week of the month	State Medi-Cal (DHCS)		HPSM



Questions? Call:	State Medi-Cal (DHCS) 1-800-541-5555	HPSM Medi-Cal 1-800-750-4776 (after the 4th week)
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NEW REQUIREMENTS FOR NURSING FACILITY AUTHORIZATIONS

On August 5th, HPSM hosted our quarterly virtual Nursing Facility Learning Collaborative. During this session, which you can view online at tinyurl.com/2k63pur, HPSM announced a number of new resources to support our nursing facilities. We also shared key take-aways from a recent review and audit of nursing facility claims. This audit was a standard part of our operations, which we announced back in 2019 when we launched a new payment model for nursing facilities.

Now that our nursing facility Quality Payment Program is going into its second year, one of the adjustments we are making is to our documentation requirements. For nursing facility stays going forward, we are implementing a new requirement to submit HPSM members' initial, interim and discharge assessments. These are assessments that facilities are already conducting and, in many cases, already submitting to Medicare. If you have questions about this new requirement, please contact Stephanie Mahler, our Provider Network Clinical Liaison, at Stephanie.Mahler@HPSM.org.

HELP PATIENTS QUIT TOBACCO

Tobacco use and dependence is a chronic, relapsing condition that requires intervention and long-term support. As a healthcare professional, you play a critical role in helping people to quit using tobacco. This is especially important during the continuing pandemic, as smokers face a 40 to 50 percent higher risk of developing severe disease and death from COVID-19. (For details, see the World Health Organization website: tinyurl.com/cm69xke5.)

Try these effective tactics:

- **Advise your patient to quit and refer them to support resources** The California Smoker's Helpline has rebranded itself and is now named Kick It California. This resource provides free services, training and materials to help people quit tobacco. For more information, visit kickitca.org.
- **Prescribe FDA-approved tobacco cessation medication** HPSM covers all of these for adults who use tobacco products.
- **Accentuate the positive** Going tobacco-free is one of the most important actions people can take to improve their health and reduce many adverse health effects. For more information, visit the Centers for Disease Control and Prevention website at tinyurl.com/3863c774.

Patients who need help quitting tobacco can enroll in Kick It California's Text Coaching program (available in English and Spanish) by visiting kickitca.org. They can also join by calling or texting Kick It California:

- English: **1-800-300-8086** or Text "Quit Smoking" or "Quit Vaping" to 66819
- Spanish: **1-800-600-8191** o Mande "Dejar de Fumar" o "No Vapear" to 66819
- Chinese: **1-800-838-8917**
- Korean: **1-800-556-5564**
- Vietnamese: **1-800-778-8440**

Remember: even brief advice from a health care provider increases the chances that a patient will try to quit tobacco!

PROVIDER RESOURCES

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 2021 requests for medical records from providers began in August 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 records (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, you can do so by calling one of our two contracted medical record collection vendors (Change Healthcare and PopHealthCare) that specialize in the record retrieval process.

Change Healthcare: **855-767-2650**

PopHealthCare: **1-866-537-8881**

The following details will help you respond to upcoming requests:

- You may get a record request from Change Healthcare or PopHealthCare rather than HPSM
- Records requested will be from January 1, 2021 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

REMINDER: BALANCE BILLING OF MEDI-CAL BENEFICIARIES IS PROHIBITED



If you are new to working with Medi-Cal, you may not be familiar with the details of balance billing regulations. Balance billing means charging a member for the remainder of a bill that HPSM does not cover – and it is strictly prohibited for all contracted HPSM providers. If it's been a while since you've reviewed your HPSM provider contract, please be aware of these important provisions:

- Medi-Cal payment constitutes payment in full
- Any surcharge for covered services is specifically prohibited for Medi-Cal members, in accordance with California Code of Regulations (CCR) Title 22
- You are prohibited from maintaining any action at law against a member to collect sums that are owed by HPSM to a provider

2021 BLACK BREASTFEEDING WEEK REFLECTIONS AND RESOURCES

August 25-31 was the ninth-annual Black Breastfeeding Week in the U.S. This week of education and advocacy was started by national breastfeeding advocates in response to significant disparities in breastfeeding rates for Black and African American women, which contribute to maternal and infant health disparities in the US. Did you know that in the Bay Area, infant mortality is four times higher for Black and African American women than for white women? That is a truly sobering statistic, but it is a health disparity that providers and care teams can help to close.

Learn more about the history of how racism has impacted maternal health, and how you as a provider can support your patients — visit hpsm.org/provider-maternal-health, where you will find:

- Important resources to combat maternal and infant health disparities
- A recorded learning session co-hosted by HPSM and San Mateo County's Prenatal Advantage Black Infant Health program



KNOW YOUR PATIENTS' MEMBER RIGHTS AND RESPONSIBILITIES

HPSM members have certain rights and responsibilities that HPSM network providers are responsible for knowing. These rights and responsibilities are explained in section two of our Provider Manual, which is online at hpsm.org/provider-manual. You can also request a hard copy of the Provider Manual, including the section outlining member rights and responsibilities, by calling **1-800-750-4776**.

REMINDE YOUR PATIENTS TO GET A FLU SHOT

It's flu season, and a flu shot can keep your patients from getting sick. When you see your patients, ask if they've gotten their flu shot this year. If they haven't, encourage them to get one. The best way to be sure your patients get vaccinated is to give them a shot during their appointment.

While some people just need to be reminded about getting a flu shot, others may be hesitant. Scientific evidence shows that the flu vaccine dramatically reduces susceptibility to the virus, but many people who are exposed to misinformation remain resistant. As a trusted medical authority, your patients are more likely to be open to vaccination if they hear it from you that the flu shot is safe and effective. It's a great opportunity to offer them the COVID-19 vaccine and other shots (such as the pneumonia vaccine) they may be due for. See page 2 of this newsletter for resources to help you become a COVID-19 vaccinator and have crucial conversations with patients to increase their vaccine confidence.

If your patients don't have time to get the flu shot during an appointment, they can still get the flu shot and a COVID-19 vaccine by visiting their local pharmacy. Just remind them to bring their HPSM Member ID with them.



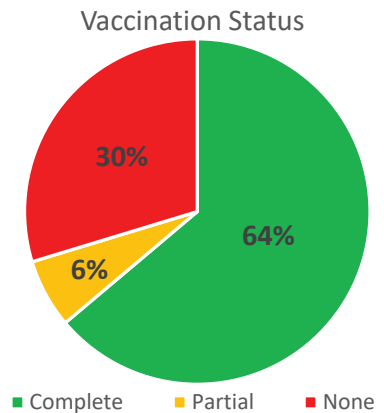
PROVIDER RESOURCES

HPSM MEMBERS' COVID-19 VACCINATION INCREASES BY 11 PERCENT

In the July issue of *HealthMattersMD* (tinyurl.com/4yrnh5s3), we described how HPSM works with our providers and community partners to increase COVID-19 vaccination rates among our members. That article explained our efforts to promote vaccination through in-person events, answering phone inquiries, creating communications and interventions targeting our most at-risk members, including home-based vaccination for the homebound. Here is an update on our progress since then along with a thumbnail overview of our latest plan for moving forward.

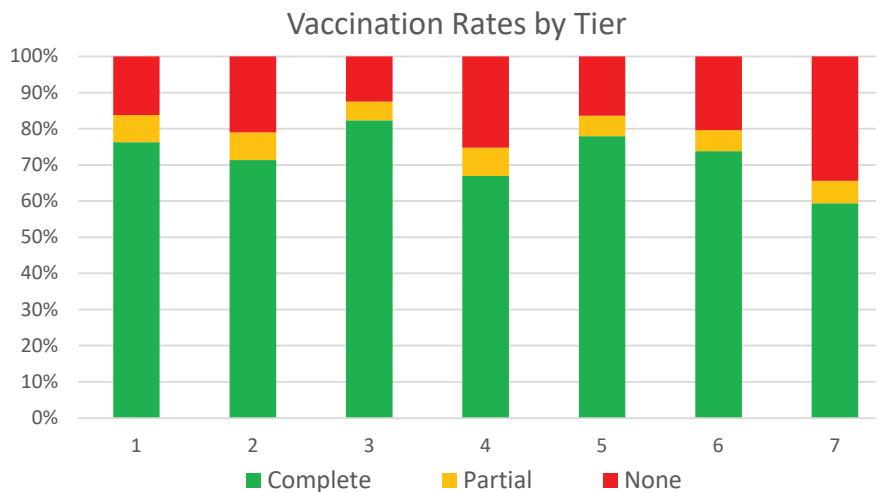
OVERALL MEMBERSHIP

As of September 29th, 70 percent of HPSM members over the age of 12 have received a vaccine – an 11 percent increase since June In addition, 64 percent of our members are now fully vaccinated. In San Mateo County as a whole, more than 94 percent of eligible residents have received at least one vaccine. This disparity is in line with Medi-Cal plans across California, whose members lag behind the state’s general population by as much as 30 percent.¹

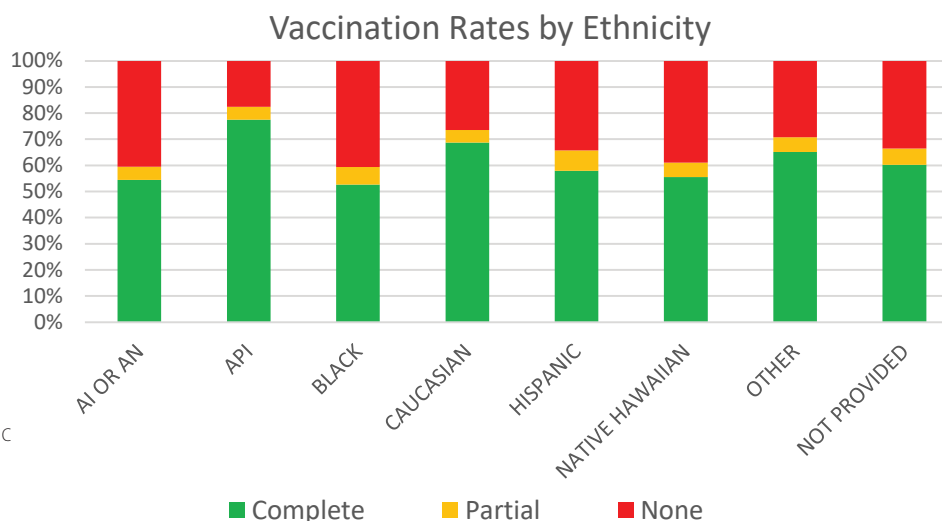


DEMOGRAPHIC BREAKDOWN

Highest-risk members HPSM has been conducting higher-volume outreach to our highest-risk members, and we are seeing these efforts pay off. Over 80 percent of our highest risk (tier 1) members have received at least one dose.

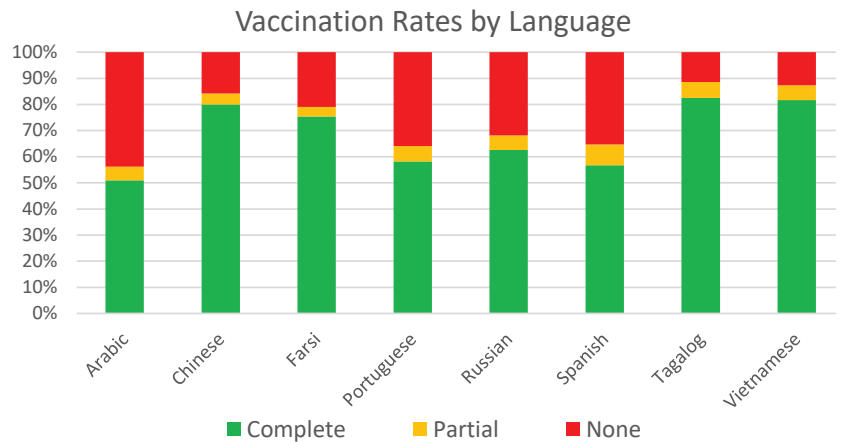


Ethnicity Vaccination rates differ significantly among our members based on the race/ethnicity they identify with. Some of these differences are attributed to age – for example, our members who identify as Asian American and Pacific Islander are on average older, and our older members have higher vaccination rates. However, age does not fully explain these disparities. HPSM is particularly focused on increasing vaccination rates among subpopulations with the lowest rates.

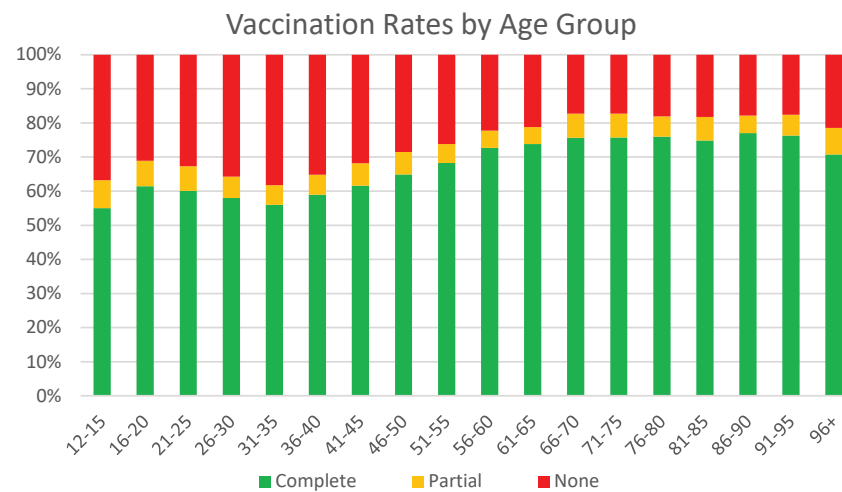


¹ Medi-Cal COVID-19 Vaccinations (for beneficiaries aged 12 years and older): C Department of Health Care Services, August 2021. dhcs.ca.gov/Documents/COVID-19/DHCS-COVID-19-Vaccine-Stats.pdf

Language While the vaccination rates across all of our members have increased in the last quarter, we continue to see lower vaccination rates (<70 percent) among members whose preferred language is Arabic, Portuguese, Russian and Spanish. Some vaccine scheduling platforms are still not available in all of these languages, which highlights how critical it is for providers to communicate with patients about the vaccine in their preferred language. Make sure you're familiar with HPSM's language assistance services (hpsm.org/provider-language-services).



Age Age is a major risk factor for COVID-19. Early on, HPSM incorporated member age into our risk stratification. Members with a higher age are included in our higher risk tiers, and have received additional HPSM outreach about the vaccine. Due to older populations being eligible for the vaccine earlier and due to these additional outreach efforts, over 80 percent of our members over age 65 have received at least one dose.



Geography In most cities within San Mateo County that have a high population density of HPSM members, over 60 percent of members have received at least one dose. However, East Palo Alto and Redwood City continue to perform below the average. More than half of our unvaccinated members live in Redwood City, East Palo Alto, San Mateo and Daly City.

NEXT STEPS

In September, the California Department of Health Care Services (DHCS) approved HPSM's COVID-19 Vaccine Incentive Program (see page 16 for details). This includes significant funding for PCPs to increase their vaccine outreach activities — be sure to review the article on this program, and submit your Plan of Action soon!

In addition to provider funding, HPSM's COVID-19 vaccine roadmap includes the following efforts:

- **Building vaccine confidence and countering misinformation** HPSM is continuing to fine-tune our messaging and online resources to promote positive vaccination messaging, including on social media. Be sure to follow us at facebook.com/healthplanofsanmateo and instagram.com. Also visit hpsm.org/covid-vaccine-resources to download vaccine confidence materials for your clinic!
- **Peer-to-peer discussions** HPSM is partnering with Wider Circle, a local organization specializing in outreach for Medi-Cal/Medicare members, to ramp up community talks and peer-to-peer outreach to help build vaccine confidence.
- **Addressing legal concerns** HPSM is partnering with the Legal Aid Society of San Mateo to provide written materials and guidance at community talks on topics such as workers' rights and rental assistance/eviction protection related to COVID-19. Legal Aid will also provide 1:1 advisory appointments to address employment and immigration concerns about vaccination.

▶ If you have ideas about how HPSM can support your efforts to vaccinate patients or you'd like to learn more, please reach out to Colleen Murphey, HPSM's Network and Strategy Officer, at Colleen.Murphey@hpsm.org

¹Medi-Cal COVID-19 Vaccinations (for beneficiaries aged 12 years and older): California Department of Health Care Services, August 2021. dhcs.ca.gov/Documents/COVID-19/DHCS-COVID-19-Vaccine-Stats.pdf

PCPs: APPLY TODAY FOR FUNDING FROM OUR COVID-19 VACCINE INCENTIVE PROGRAM!

COVID-19 vaccination rates are high in San Mateo County, but HPSM member vaccination rates are 25 percent lower than the general population. To support our providers in leading the fight against COVID-19 and closing this gap, HPSM is offering two funding opportunities to contracted PCPs through our new COVID-19 Vaccine Incentive Program:

1. Upfront funding to support your practice serving as a vaccinator. Registered PCPs will receive **\$10 per unvaccinated assigned member** as of the date that this Vaccination Plan of Action is approved by HPSM.
2. Outcomes funding you can receive, for each HPSM member who is unvaccinated at the date that your Plan of Action is approved and who then receives their first dose. This second type of funding is available whether the member received the vaccine at your clinic or elsewhere. Approved PCPs will receive **\$60 per unvaccinated assigned member who receives their first dose.**

Both types of funding will only be available while this program is active. Currently the program is slated to end on February 28, 2022. We will notify you if it is extended.

Find more COVID-19 vaccination resources, including tools to help you enroll as a vaccinator, print outs to help your office staff with vaccine safety, and materials to build patient's vaccine confidence at hpsm.org/covid-vaccine-resources.

APPLY FOR FUNDING

In order to receive either type of funding, you must submit a Plan of Action briefly describing how you will use the funding. You can download the form at tinyurl.com/4aa78795. Additionally, in order to receive the upfront funding, your practice must be registered as a vaccinator and provide a current Vaccinator ID.

We will accept Plans of Action until January 31, 2022. Please allow 10 business days for your plan to be approved by HPSM, and respond promptly to inquiries from HPSM staff following up on your plan.