

November 2, 2015

Adding an Affiliate or Partner Provider

- Beginning of a month
- Immediate

Adding a Program Provider at the Beginning of a Month

Policy

This process begins on December 1, 2015 and is based upon Section 2.3(L) of the Contract and is used when an UMP Plus ACP Network (ACP Network) is adding an Affiliate or Partner as a Program Provider with a separate tax identification number (TIN) to its network.

The Health Care Authority (HCA), ACP Networks, and the Uniform Medical Plan third party administrator (UMP TPA) will use this process to add a Program Provider.

An ACP Network may request the addition of a Program Provider before the first of the months described in Section 4(a).

Sending the form in the process constitutes providing notice as specified in Section 2.3(L).

A minimum of two months, as shown in this example, is needed to add an *Affiliate* Provider:

Date	Activity
April 1	ACP Network uses the form to submit the required notice in Section 2.3(L)
April 15	ACP Network sends Monthly Provider Change Roster (Change Roster) to HCA
April 30	HCA sends Change Roster to UMP TPA
June 1	UMP TPA prepares for implementation in May and implements by June 1

Whenever feasible, the ACP Contract Manager will provide the HCA Contract Manager with a timely “heads up” that a Partner Provider will be added to the network. The HCA will only use the information to prepare for the review of the Partner Provider.

If any due date in the process lands on a non-business day, then the due date defaults to the last business day before the due date.

This process is not used when an ACP Network is adding a practitioner, for example, a primary care physician, to an existing Program Provider.

This process is also not used when an Affiliate or Partner Provider that is a Clinically Integrated Network adds a TIN Provider.

This process is not used when an already approved TIN changes or consolidates.

Process

1. ACP Network emails the form to the HCA. The ACP Network Contract Manager or

designee emails form 012015ACP to the HCA's ACP Operations Mailbox, HCAACPOps@hca.wa.gov.

- a. The form must be emailed no later than the first of a month two full months before the effective date. For example, if the effective date of an Affiliate Provider will be June 1, then the form must be emailed no later than April 1.
2. HCA receives the notice. HCA enters the form into the Provider Network Tracking Log. The HCA has 3 business days, starting with the business day after the notice is received by the HCA Contract Manager to:
 - a. Review the form.
 - b. Object to the Program Provider's designation.
 - c. Decline the Program Provider.
3. Resolving concerns. Throughout the process the HCA may discuss with ACP Network staff concerns about the notice or Change Roster and how to resolve them.
4. HCA reviews the form and communicates any discrepancies to the ACP Network.
 - a. The PEBB ACP Account Manager verifies within the allotted 3 business days that
 - i. The HCA received an *Affiliate* Provider on the form at least 2 months before that provider's effective date.
 - ii. The HCA received a *Partner* Provider that has one of the following combination of dates:
 1. By March 1 to add a Partner Provider with a May 1 effective date, or
 2. By August 1 to add a Partner Provider with an October 1 effective date.
 - iii. If identified by the ACP Network as a Provider in multiple networks, verify that exclusive attribution is assigned within only one ACP Network and excluded in all other ACP Networks.
 - iv. The PEBB ACP Account Manager sends an email to the ACP Network Provider Roster Point Person that notes any discrepancies in the exclusivity assignment or effective date.
 1. PSHVN: Ilir Cerekja, Ilir.Cerekja@virginiamason.org
 2. UWMedACN: Michele Fisher, mafisher@uw.edu
 - b. HCA may object to the designation of the provider as an Affiliate or Partner Provider. Within the allotted 3 business days, the HCA Chief Medical Officer may object to the ACP Network's designation of the Program Provider based upon the definitions of Partner or Affiliate Provider in Section 2.3(I).
 - i. The HCA Chief Medical Officer may object by sending an email to the ACP Network Contract Manager and ACP Network Provider Roster Point Person and copying the HCA Contract Manager and HCAACPOps@hca.wa.gov.
 1. The email must include a reason(s) for objecting to the

designation.

- ii. If an HCA objection is not removed by the date an ACP Network must send the Change Roster, by the 15th of the month in which the form was received, then the ACP Network:
 1. May not execute a Program Provider agreement, and
 2. Will not add the Program Provider.
 - iii. The ACP Network or the HCA may initiate the dispute resolution process in Section 3.14 to resolve a dispute about objecting to the designation of a Program Provider.
- c. HCA declines the Program Provider. Within the allotted 3 business days, the HCA Chief Medical Officer may send an email to the ACP Network Contract Manager, and the ACP Network Provider Roster Point Person the HCA Contract Manager, and HCAACPOps@hca.wa.gov that declines the addition of the Program Provider. In the email, the HCA Chief Medical Director must state the reason(s) for declining the Program Provider.
- i. The HCA Medical Director may decline the addition of a Program Provider if the addition would compromise the safety or quality of care provided to ACP members.
 1. In making the assessment, the HCA Chief Medical Officer may consider the information available, such as the Program Provider's historical delivery of health care services and information available through these sources:
 - a. The Washington Health Alliance Community CheckUp and Your Voice
Matters: www.wacommunitycheckup.org
 - b. CMS Hospital
Compare: <https://www.medicare.gov/hospitalcompare/search.html>
 - c. Leapfrog Hospital Survey
Results: <http://www.leapfroggroup.org/cp>
 - d. Foundation for Health Care Quality
data: www.qualityhealth.org
 2. The ACP Network may initiate the dispute resolution process in Section 3.14 to resolve a dispute about declining a Program Provider.
5. HCA does not object or decline the Program Provider. Within the allotted 3 business days, if the HCA Chief Medical Officer does not decline the addition of the Program Provider, then the provider will become a Program Provider in the ACP Network on the applicable effective date.
- a. Absence of communication within the allotted 3 business days is confirmation that the HCA has not objected or declined the Program Provider.

- b. When a Partner Provider is added: Within 15 business days of the HCA Chief Medical Officer's email, the PEBB ACP Account Manager includes a note to the list of forthcoming contract changes to add the Partner Provider to Exhibit 4.1.
6. ACP Network sends a Change Roster to the HCA. The ACP Network Roster Point Person emails a new Program Provider in the Change Roster to the HCA at HCAACPOps@hca.wa.gov.
 - a. The Change Roster may be emailed no later than the 15th of a month at least 1½ months before the Program Provider's effective date. For example, if the effective date on the Change Roster is June 1, then the Change Roster may be emailed no later than April 15.
7. HCA receives and reviews the entire Change Roster. The PEBB ACP Account Manager uses the HCA Reviews Monthly Provider Change Roster process to review the Change Roster.

Immediate Addition of a Program Provider

Policy

An ACP Network may propose to immediately add an Affiliate or Partner Provider and the HCA and UMP TPA will make all reasonable and expeditious efforts to accommodate the addition of the Program Provider.

Process

An ACP Network and HCA may mutually agree to immediately add a Program Provider.

1. ACP Network contacts the HCA. The ACP Contract Manager emails the HCA Contract Manager and proposes to immediately add a Program Provider and proposes an effective date.
2. Operational and Communications Action Plan. The ACP Network, HCA, and UMP TPA develop an operational and communications action plan that includes at least the following:
 - a. The effective date of the Program Provider.
 - b. A communication plan that specifies necessary information and messages for enrolled members, elected officials, managers, staff, health care providers or other stakeholders.
 - c. Necessary tasks to be performed by the ACP Network, HCA, and UMP TPA.
 - d. The PEBB ACP Account Manager will be the lead for preparing the plan and will manage the action plan.

FORM 012015ACP

Adding an Affiliate or Partner Provider to an ACP Network

Provider Name:	
Provider Tax Identification Number (TIN):	
Affiliate or Partner?	
Effective Date: (ACP Network assigns anticipated effective date)	
Is the Provider in more than one Network? If so, please confirm whether exclusive to your Network for attribution	
Approximate Number of Health Care Providers: Approximate Number of PCPs: Approximate Number of Specialists: Name(s) of Hospitals:	
Name(s) of Service Area Counties to be Covered:	