



**Patient Review and Coordination  
Program**

**Managed Care  
Guide**

**February 2021**

# Version 10.0

## Document Change Control Table

| Author                | Page                  | Change       | Reason  | Date       |
|-----------------------|-----------------------|--------------|---|------------|
| HRSA/<br>DHS/<br>OQCM | All                   | Version<br>1 | Creation of document  | 01/25/2008 |
| HRSA/<br>DHS/<br>OQCM | 2 & 3                 | Version<br>2 | Clarify PRC placement for members enrolled in a voluntary health plan and members in an address confidentiality program.<br><br>Added effective date of amended PRC WAC.  | 02/28/2008 |
| HRSA/<br>DHS/<br>OQCM | 2, 4,<br>5, 7,<br>& 8 | Version<br>3 | Addition of appeal denial and appeal approval letters<br><br>Clarify plan restriction for Native American and Basic Health Plus members<br><br>Development of timeline for appeals and hearings   | 09/02/2008 |
| HRSA/<br>DHS/<br>OQCM | 4, 7,<br>8, 9         | Version<br>4 | Clarification of staying with one MCO for one year<br><br>Revision of timeline for appeals and hearings<br><br>Revision of PO Box and zip code  | 9/10/2009  |
| HRSA/<br>DHS/<br>OQCM | ALL                   | Version<br>5 | Division Name change from Health and Recovery Services Administration (HRSA) to Medicaid Purchasing Administration (MPA).<br><br>System changes to Provider One for benefit query.<br><br>MCOs' compliance with concurrent notifications to DSHS/MPA/PRC regarding enrollees.<br><br>Clarification as to provider assignment including name, physical address and telephone number of primary care provider, narcotic prescriber, pharmacy and hospital for nonemergent care.<br><br>Necessity of National Provider Identification numbers (NPI) for all providers of care included with communications to DSHS/MPA/PRC,<br><br>Mailbox and contact information changes for DSHS/MPA/PRC. | 07/08/2010 |
| HCA/<br>MPOI/<br>SPI  | ALL                   | Version<br>6 | Name Change from Medical Purchasing Administration (MPA) to Health Care Authority. (HCA)<br><br>MCOs' compliance with concurrent notifications to HCA/SPI/PRC regarding enrollees.<br><br>Mailbox and contact information changes for HCA/SPI/PRC<br><br>Update of procedures<br><br>Update name of letters<br><br>Update of what letters to be e-mailed to HCA/SPI/PRC and what letters to be entered on the monthly spreadsheet   | 06/19/2018 |

|                               |                     |               |  |            |
|-------------------------------|---------------------|---------------|--|------------|
| <b>HCA/<br/>MPOI/<br/>MCR</b> | ALL                 | Version<br>7  | Change from Section of Program Integrity to Medicaid Compliance Review within Medicaid Program Operations and Integrity (MPOI)<br><br>Update to new mailbox and fax number for contact information<br><br>Update regarding appeal requests verbally and 10-day rule<br><br>Update of placing client in PRC with a 10-day notice from date of initial placement and/or appeal denial. | 12/17/2018 |
| <b>HCA/<br/>MPOI/<br/>MCR</b> | 5, 8<br>4<br>7<br>9 | Version<br>8  | Update regarding appeal requests and 10-day rule<br><br>Exception for staying with MCO for 1 year<br><br>Added "Switch Plan" letter to monthly spread sheet<br><br>Updated "Note" regarding when both appeal request and appeal determination to be sent to HCA/MPOI/PRC   | 01/17/2019 |
| <b>HCA/<br/>MPOI/<br/>MCR</b> | 3<br>8              | Version<br>9  | Added when MCO PRC Guide will be sent to MCO's<br><br>Added timeline for Switch Plan letters   | 06/09/2020 |
| <b>HCA/<br/>MPOI/<br/>MCR</b> | 4<br><br>5          | Version<br>10 | Added under Compliance when an enrollee with private insurance is excluded from review for PRC.<br><br>Appeal update for PRC. Date appeal request was received verbally or in writing. (verbally with no written follow-up from client (CFR update 12/2020).   | 02/16/2021 |

# Introduction

This guide describes the requirements for Managed Care Organizations (MCOs) to develop, manage and maintain a Patient Review and Coordination (PRC) Program. The PRC Program is a health and safety program designed to help medical assistance clients (Apple Health) use health care services appropriately through coordinated health care. When Apple Health clients are enrolled in PRC, they are assigned to one primary care provider (PCP) and/or one controlled substances prescriber, one pharmacy for all prescriptions and/or one hospital for non-emergent care, and/or other providers such as a mental health professional, dental, or any

combination of providers to facilitate the client's health care.

Washington Administrative Code (WAC) 182-501-0135 authorizes contracted MCOs to review Apple Health client records and enroll them in a PRC program.

This guide will be updated and sent to the MCO's whenever the guide is updated with any new PRC guidelines. All updates to the document are tracked in the Document Change Control Table. The guide is also available under Forms and Publications.

# Compliance

MCOs must develop policies and procedures and ensure compliance with WAC 182-501-0135. HCA/MPOI/PRC staff is available to provide technical assistance for developing, implementing, and maintaining MCO policies and procedures.

At a minimum, MCO policies and procedures must include the following information:

- How enrollees are identified for the PRC Program. Excluding enrollees with private third-party insurance.
- Guidelines for appropriate utilization of medical services, products, and resources.
- Process for placing enrollees in the PRC Program, including a review of medical necessity.
- Process for placing an enrollee under 18 in the PRC program (HCA/MPOI/PRC must approve of the placement before an enrollee under 18 can be placed in PRC).
- The process for sending notices to enrollees.
- Notification and coordination with health care providers; and
- The appeals and hearings process and coordination with HCA/MPOI/PRC.

## Client Letters

MCOs must develop enrollee notification letters. Refer to WAC 182-501-0135 for guidance in the development of letters. Format and content of all enrollee letters must have prior approval from HCA/MPOI/PRC. The following letters are required for enrollees that the MCO is considering for placement in the PRC program.

- 1) Letter of concern that includes:
  - a. General information about the program.
  - b. Reason for concern related to enrollee's use of medical services.
  - c. Guidelines for appropriate utilization of health care services, products, and resources; and
  - d. Education and explanation of medically necessary use of services, products, and resources.
- 2) PRC placement letter (Initial Placement) that includes:

**NOTE:** All communications to HCA/MPOI/PRC are required to contain all National Providers Identification numbers (NPI) of providers including:

- Assigned primary care provider.
- Specific clinic (to which PCP is associated).
  - Prescriber of controlled medications.
  - Pharmacy.
- Hospital for non-emergent care.

- a. Reason for PRC placement, including State criteria regarding appropriate utilization of health care services.
- b. General information about the PRC Program.
- c. Length of PRC placement.
- d. Requirement that enrollees stay with the same MCO for one year (exceptions include: a voluntary MCO program, Move outside MCO service area, Native American or in an address confidentiality program).
- e. Appeal and hearing rights.

**Note:** An enrollee placed in the PRC Program must remain in the program regardless of whether the enrollee changes MCOs or becomes Apple Health Fee for-Service client (FFS). Family members are excluded from the requirement to stay with the same MCO for a year.

- 3) Initial provider assignment letter or combined PRC placement letter/initial provider assignment letter that includes:
  - a. Assigned primary care provider, one pharmacy for all prescriptions, controlled substances prescriber, hospital for nonemergent care, starting 10 days from the date of initial provider assignment letter or combined PRC placement letter/initial provider assignment letter.
  - b. Notification that the assignment to PRC is for one year.

**Note:** Enrollees have 30 days from the start of any assignment to change any provider if the enrollee did not choose the provider.



- 4) Change in provider (Provider Change) letter that includes:
  - a. New assigned primary care provider, pharmacy, controlled substances prescriber and hospital, if applicable.
  - b. The name, phone number, physical address for each new provider; and
  - c. Effective date of change of assignment.

**Note:** The National Provider Number (NPI) for all assigned providers are not included on any communications forwarded to enrollee members.

- 5) Continued PRC placement letter (Continued Placement) that includes:
  - a. Reason for the continued PRC Program placement.
  - b. Length of continued PRC placement; and
  - c. Appeal and hearing rights.

HCA recommends that the letter include the following: explanation of the criteria per WAC 182-501-0135 for medical services, the enrollee's record of healthcare utilization that meets or exceeds the guidelines, other factors which support continued placement including at-risk behaviors involving harm to self or others, addictions or abuse involving drugs or alcohol, noncompliance and/or disruption of provider services associated with broken medication contracts.

- 6) End of PRC placement letter *or* "**end of restriction**" after review of records has established appropriate patterns of health care utilization should include the following:
  - a. Effective end date.
- 7) Current PRC client (Switch Plan) who is newly enrolled in MCO letter that includes:
  - a. Welcome PRC enrollee to the new MCO.
  - b. Remind enrollee of continued placement in the PRC Program.
  - c. Include current or new assigned primary care provider, pharmacy, controlled substances prescriber, hospital for non-emergent services and/or other provider(s).
- 8) Appeal Acknowledgment Letter which includes:

- a. Date appeal request was received verbally or in writing. (verbally with no written follow-up from client (CFR update 12/2020).
  - b. If 10-day rule applies
  - c. How long appeal can take
  - d. Information on where more medical information can be sent.
- 9) Appeal Upheld - PRC placement letter that includes:
  - a. Denial of appeal request.
  - b. Placement or continued placement in the PRC Program; (Initial placement 10 days from date of appeal denial if 10-day rule applied when appeal requested)
  - c. State hearing rights.
- 10) Appeal Overturn - PRC removal letter that includes:
  - a. Removal of enrollee from the PRC Program
  - b. Enrollment in Case Management (if applicable)

**NOTE** Concurrent notification of PRC enrollment information and any status changes concerning enrollees in PRC must be sent HCA/MPOI/PRC and as appropriate, associated MCOs. All communications must maintain confidentiality per HIPAA requirements.

## Enrollee Educational Materials

MCOs shall develop educational materials for PRC enrollees, which have been approved by HCA/MPOI/PRC to include:

- a. Explanation of appropriate use of health care services.
  - b. Placement with assigned providers.
  - c. Placement period.
  - d. Reference to WAC 182-501-0135; and
  - e. Appeal and hearing rights.
- 1) Explanation of the appropriate use of healthcare services including:
  - a. Placement with an assigned provider and that all primary care services must be accessed through assigned provider/clinic.
  - b. Placement with one pharmacy for all prescriptions, and/or one hospital for



nonemergent care and/or one controlled substance prescriber.

- c. The need to obtain referrals from the enrollee's assigned PCP/clinic for services other than primary care.
  - d. Warning that accessing services without the referral might result in enrollee being responsible for payment of services.
  - e. The period the enrollee will be in the PRC program.
- 2) A list of services that do not require a referral, such as dental, optometry, mental health, drug and alcohol treatment, medical equipment, and family planning.
  - 3) Specific educational materials on accessing mental health services and drug and alcohol treatment, including phone numbers and/or email contact information.
  - 4) Discussion about the appropriate use of the emergency department.
  - 5) MCO contact information, including availability of care coordination services.
  - 6) Reference to WAC 182-501-0135.
  - 7) Appeal and hearing rights.

## Provider Educational Materials

The MCO shall develop educational materials for providers including the MCO's pharmacy benefit manager. MCOs may use provider manuals, provider newsletters, and other materials to educate network providers about the PRC program. At a minimum, include:

- 1) General information about the PRC program:
  - a. Explanation of what it means when enrollees are placed in the PRC program.
  - b. Explanation regarding the established guidelines for appropriate utilization of medical services, products, and resources.
  - c. Reference to WAC 182-501-0135.
- 2) Specific information regarding how the provider can find out if an enrollee is in the PRC program and to which providers the enrollee is assigned.
- 3) The process to follow when referring a PRC enrollee to a specialist.
- 4) The steps the pharmacy should take if a PRC enrollee shows up at an unassigned pharmacy.
- 5) Information for referring enrollees to PRC.
- 6) Criteria per WAC 182-501-0135.

The screenshot shows a web browser window titled 'Benefit Enquiry - Windows Internet Explorer'. The URL is 'http://test.providerone.wa.gov/3uat/CNSIControlServlet'. The page has a navigation menu with tabs: My Inbox, Admin, Provider, Claims, Reference, Client, TPL, Drug Rebate, Rate Setting, PA, Managed Care, Cash Receipt, Payroll. The main content area shows a 'Welcome' message and a 'Message(s):' section. A table titled 'Restricted Client Information' is displayed, with columns for Provider Name, Provider Phone Number, Period Start Date, and Period End Date. Below the table is a pagination control showing 'Viewing Page 1' and 'Next >>'. A message below the table reads 'Message(s): Client is restricted to certain Providers'. The page ID is 'pgProvMedicaid(Client)'.

| Provider Name        | Provider Phone Number | Period Start Date | Period End Date |
|----------------------|-----------------------|-------------------|-----------------|
| First Provider Name  | (##) ###-####         | 05/23/2005        | 12/31/2999      |
| Second Provider Name | (##) ###-####         | 02/03/2005        | 12/31/2999      |
| Third Provider Name  | (##) ###-####         | 05/26/2005        | 12/31/2999      |
| Fourth Provider Name | (##) ###-####         | 02/01/2004        | 12/31/2999      |
| Fifth Provider Name  | (##) ###-####         | 02/03/2005        | 12/31/2999      |

# Coordination of PRC Placement

Enrollees are required to remain in the same MCO for one year unless they move outside the MCO's service area and the MCO is not available in the new location, or the assigned provider no longer participates with the MCO and is available in another MCO. Placement with the same MCO for one year is applicable at any time during the restriction period if an enrollee is placed in PRC by an MCO, if the enrollee goes from FFS to an MCO, or if an enrollee goes from one MCO to another MCO.

The following enrollees are excluded from the requirement to stay with the same MCO for one year:

- 1) Enrollees in the Address Confidentiality Program (ACP), a program designed to protect domestic violence clients.
- 2) Native American enrollees.

Coordination of enrollee placement is essential for the health and safety of the enrollee. MCOs must:

- Coordinate concurrent PRC placement and provider assignment information with HCA/MPOI/PRC.
- Communicate in a timely manner with other MCOs to facilitate coordinated care for PRC enrollees who change MCOs.
- Coordinate with other private and public health care organizations, including DSHS administrations. MCOs may release information to other covered entities such as providers, or hospitals, or a business associate of the covered entity acting on behalf of the covered entity if:
  1. A common relationship exists between the individual whose personal health information (PHI) is being disclosed and the Covered Entity.
  2. The PHI being disclosed pertains to such a relationship.

3. The PHI will be used for the purpose of treatment, payment, and/or health care operations.
4. The PHI disclosed is the minimum necessary amount needed to perform the task.

The MCO may choose to place the enrollee in the PRC program at any time during the month. Provider One enables updates to be made daily and the status effective immediately. MCO provider assignments in Provider One can be updated daily and therefore, enrollees who leave a MCO, enroll in another MCO, or become FFS will remain in the PRC Program.

The following list includes the letters to be emailed to HCA/MPOI/PRC at the same time the letter is mailed to the enrollee. Including:

- PRC placement /provider assignment letter
- Appeal Acknowledgement letter
- Appeal denial letter
- Appeal approval letter

The following letters will be entered onto the monthly spreadsheet, which is due by the 10<sup>th</sup> of each month thru MC Tracker.

- Change in provider assignment letter
- Continued PRC placement
- End of PRC placement
- PRC Placement /Provider assignment letter
- Switch Plan

**Note:** Enrollee identifying information such as date of birth (DOB) or Provider One Client ID is not required on enrollee letters. However, notifications sent directly to HCA/MPOI/PRC require this information to correctly identify and update the status of enrollees in Provider One.

## New MCO Enrollee Already in PRC

A situation where an enrollee's assigned providers are entered in Provider One and *then* the enrollee changes to another MCO, the new MCO may locate the PRC enrollment information in Provider One.

- MCOs will need to check Provider One to determine if a new PRC enrollee has joined their MCO. Specifically, a PRR indicator is passed to the MCO on the 834 file daily. It can be found in the 2300 loop in the HD segment



on the 9th data element. This results in a monthly enrollment roster with the indicator Y for PRR (PRC) or N for not restricted on the file.

- The MCOs are responsible to determine if the assigned providers are network providers. The MCO should send a “Switch Plan” letter to the assigned provider (s) and enrollee. If the assigned providers need to be changed, MCOs must work with the enrollee to make the

necessary changes to comply with the guidelines as established by WAC 182-501-0135. Switch Plan letters should be sent to the new PRC enrollee within 5 business days after receipt of the Switch Plan spreadsheet from HCA.

## Appeals and Hearings

### MCO Enrollee Appeals and Administrative Hearings about PRC Placement

#### General Points:

- Managed care enrollees must exhaust the MCO’s internal appeal process prior to requesting an Administrative Hearing.
- Managed care enrollees cannot change MCO’s until the appeal or Administrative Hearing is resolved and there is a final ruling.
- Managed care enrollees may also file an expedited appeal with the MCO.

#### Enrollee Requests an Appeal with the MCO about PRC Placement

The enrollee has 60 days from the date of the PRC restriction notice to request an appeal about PRC placement through the MCO appeal process.

If the enrollee files an appeal about PRC placement within 10 days of the date of the PRC restriction notice, the enrollee is not placed in PRC during the processing of the appeal.

- If the enrollee appeal is upheld (i.e., the enrollee is successful in his/her quest to remain out of PRC) the enrollee is not placed in the PRC program and an “appeal overturned” letter is sent. The enrollee may be placed in the MCO’s case management or care coordination program.
- If the enrollee appeal is denied (i.e., the appeal decision is to place the enrollee in PRC) the enrollee is placed in PRC 10 days from the

date of the appeal decision letter and the appeal decision letter is sent to the enrollee.

If the enrollee files an appeal about PRC placement between 11 and 60 days of the date of the PRC restriction notice, the enrollee is placed in PRC during the processing of the appeal.

- If the enrollee appeal is upheld (i.e., the enrollee is successful in his/her quest to remain out of PRC) the enrollee is removed from the PRC program and an “overturned” appeal decision letter is sent also telling the enrollee of the removal date from PRC. The enrollee may be placed in the MCO’s case management or care coordination program.
- If the enrollee appeal is denied (i.e., the appeal decision is to place the enrollee in PRC is upheld) the enrollee remains in PRC and an appeal decision letter is sent to the enrollee.

#### Enrollee Requests an Administrative Hearing about a Denied PRC Placement Appeal

The enrollee has 120 days from the date of the MCO appeal denial decision letter to request an Administrative Hearing about the decision of the MCO to place the enrollee in PRC.

If the enrollee files an Administrative Hearing request within 10 days of the date of the denied appeal decision letter and the enrollee had filed the appeal request within 10 days of the Initial Placement letter, the enrollee is not placed in PRC while awaiting the hearing.

- If the Administrative Hearing decision is to overturn the appeal (i.e., the enrollee is





successful in his/her quest to remain out of PRC) the enrollee is not placed in the PRC program. The enrollee may be placed in the MCO's case management or care coordination program.

- If the Administrative Hearing decision is to uphold the appeal (i.e., the hearing decision is to place the enrollee in PRC) the enrollee is placed in PRC with a 10-day notice.

If the enrollee files an Administrative Hearing about the decision of the MCO to place the enrollee in PRC between 11 and 120 days of the date of the denied appeal decision letter, the enrollee is placed in PRC while awaiting the hearing.

- If the Administrative Hearing decision is to overturn the appeal (i.e., the enrollee is

successful in his/her quest to remain out of PRC) the enrollee is removed from the PRC program and an "end of restriction" letter is sent. The enrollee may be placed in the MCO's case management or care coordination program.

- If the Administrative Hearing decision is to uphold the appeal (i.e., the hearing decision is to place the enrollee in PRC) the enrollee remains in PRC.

**Note:** Notification to HCA/MPOI/PRC is requested when an appeal concerning PRC placement is filed by an enrollee, and the outcome of that Appeal. Both notifications should be on the same day as the notification is sent to the Enrollee.

## HCA/MPOI/PRC Contact Information

Address: HCA/MPOI/PRC Program  
PO Box 45530  
Olympia, WA 98504-5530

Phone: 1-800-562-3022 ext. 15606

Fax: 360-507-9230

Email: [PRR@hca.wa.gov](mailto:PRR@hca.wa.gov)

Website:

- Billers-Providers: [hca.wa.gov/prc](http://hca.wa.gov/prc)
- Clients: [hca.wa.gov/prc-for-clients](http://hca.wa.gov/prc-for-clients)

