



# **Patient Review and Coordination Program Guide**

**April 2012**

Version 7.0

## Document Change Control Table

Author of Change	Page	Change	Reason	Date
HRSA/DHS/OQCM	All	Version 1	Creation of document	01/25/2008
HRSA/DHS/OQCM	2 and 3	Version 2	1) Clarify PRC placement for members enrolled in a voluntary health plan and members in an address confidentiality program. 2) Added effective date of amended PRC WAC.	02/28/2008
HRSA/DHS/OQCM	2, 4, 5, 7, and 8	Version 3	1) Addition of appeal denial and appeal approval letters 2) Clarify plan restriction for Native American and Basic Health <i>Plus</i> members 3) Development of timeline for Appeal and Hearing	09/02/2008
HRSA/DHS/OQCM	4, 7, 8, and 9	Version 4	1) Clarification of staying with one MCO for one year 2) Revision of timeline for Appeal and Hearing 3) Revision of PO Box and zip code	9/10/2009
HCA PRC/DHS/OQCM	ALL	Version 5	1) Division Name Change from Health and Recovery Services Administration (HRSA) to Medicaid Purchasing Administration (HCA PRC). 2) System changes to ProviderOne for benefit query. 3) MCO compliance with concurrent notifications to HCA PRC regarding medical assistance clients.	07/08/2010

			<p>4) Clarification as to provider assignment including: name, physical address and telephone number of primary care provider, narcotic prescriber, pharmacy and hospital for non-emergent care.</p> <p>5) Necessity of National Provider Identification numbers (NPI) for all providers of care included with communications to HCA PRC,</p> <p>6) Mailbox and contact information changes for HCA PRC.</p>	
HCA/DHS/OQCM/PRC		Version 6	<p>1) Name Change to Health Care Authority</p> <p>2) Concurrent notification of PRC medical assistance client status and provider assignment changes to HCA-PRC</p>	July 2011
HCA/DHS/OQCM/PRC	All	Version 7	<p>1) WAC 182 501 0135</p> <p>2) Appeal Acknowledgment letter.</p>	March 2012

## INTRODUCTION

This guide describes the requirements for the Managed Care Organization (MCO) to develop, manage, and maintain a Patient Review and Coordination (PRC) Program. The Health Care Authority (HCA) PRC is a health and safety program designed to help medical assistance clients use health care services appropriately through coordinated health care. When medical assistance clients are placed in PRC they are assigned to one or more of the following: one primary care provider (PCP) and assigned clinic; one prescriber of controlled substances; one pharmacy for all prescriptions; one hospital; and other providers to facilitate the client's health care.

Washington Administrative Code (WAC) 182-501-0135 authorizes the contracted MCO to review medical assistance client records to determine placement in the PRC program.

### Compliance

The Managed Care Organization (MCO) must develop policies and procedures to ensure compliance with WAC 182-501-0135. HCA 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:

1. How medical assistance clients are identified for PRC;
2. Guidelines for appropriate utilization of medical services and criteria for PRC placement;
3. Process for placing medical assistance clients in PRC, such as health care utilization comparison with state criteria including a review of medical necessity and at-risk factors as referenced in WAC 182-501-0135;
4. Process for sending PRC letters to medical assistance clients;
5. Process for notification to HCA PRC within three business days regarding all medical assistance client PRC status changes, such as initial placement, continued placement, end of PRC placement, notice of appeal and hearing rights, and all provider changes;
6. Notification and coordination with health care providers; and
7. The appeal and hearing process and coordination with HCA PRC.

### Client Letters

**Note:** All correspondence to HCA PRC require the National Providers Identification numbers (NPI) of all health care providers, including:

1. Assigned primary care provider (PCP)
2. Assigned clinic (to which PCP is associated)
3. Prescriber of controlled substances
4. Pharmacy
5. Hospital

The MCO is required to develop PRC program letters for medical assistance clients. Refer to the appropriate PRC Letter Checklist and WAC 182-501-0135 for guidance in the development of these letters. Format and content of all PRC program letters for medical assistance clients must have prior approval from HCA PRC. The following letters are required:

1. Letter of concern that includes:
  - a. General information about the program;
  - b. Reason for concern related to 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. Initial placement letter that includes:
  - a. Reason for PRC placement, including State criteria;
  - b. General information about PRC;
  - c. Length of PRC placement of at least 24 months;
  - d. Requirement that medical assistance clients stay with the same MCO for one year, except if medical assistance client moves out of service area (refer to WAC 182-501-0135 8 (b) (i-ii));
  - e. Family members are excluded from the requirement to stay with the same MCO for a year; and
  - f. Appeal and hearing rights.

**Note:** Medical assistance clients placed in PRC for at-risk require notification, including reason, sent to HCA PRC within three business days.

**Note:** A medical assistance client placed in PRC must remain in the program regardless of whether the medical assistance client changes the MCO or becomes a Medicaid Fee-for-Service (FFS) client.

3. Initial provider assignment letter that includes:
  - a. All assigned providers, such as one PCP and assigned clinic, one pharmacy for all prescriptions, one prescriber of controlled substances, one hospital; and
  - b. Notification that the assignment to PRC providers is for one year.

**Note:** For initial PRC placement only, the medical assistance client has 30 days from the start date of provider assignment to change to the available MCO provider(s) of their choice if the medical assistance client did not choose the provider(s).

4. Change in provider assignment letter that includes:
  - a. New PCP and assigned clinic, pharmacy, prescriber of controlled substances, and hospital, if applicable;
  - b. Name, phone number, and physical address for each new provider; and
  - c. Effective date of provider(s).

**Note:** The National Provider Identification Number (NPI) for all assigned providers should be included on all communications forwarded to HCA PRC, but not on the medical assistance client letters.

5. Continued placement letter that includes:
  - a. Reason for the continued PRC placement;
  - b. Explanation of the criteria per WAC 182-501-0135 for medical services;
  - c. The medical assistance client's record of health care utilization that meets or exceeds the guidelines, and/or shows if they are at-risk;
  - d. Length of continued PRC placement (i.e., 36 months for second placement and 72 months for each additional placement); and
  - e. Appeal and hearing rights.
  
6. End of PRC placement letter after review of records establishes appropriate patterns of health care utilization includes:
  - a. The reason for removing the medical assistance client from PRC; and
  - b. The effective end date.
  
7. MCO welcome letter (i.e., PRC client newly enrolled in MCO either from FFS or another MCO) includes:
  - a. Welcome PRC medical assistance client to the new MCO;
  - b. Remind medical assistance client of continued placement in PRC; and
  - c. Include current or new assigned provider(s) with effective date.
  
8. Appeal acknowledgment letter includes:
  - a. Acknowledgment of appeal request;
  - b. Information regarding timeliness of request and associated status regarding placement (WAC 182-501-0135); and
  - c. HCA hearing rights.
  
9. Appeal denial/placement letter includes:
  - a. Denial of appeal request;
  - b. Initial placement with effective date, or continued placement in PRC; and
  - c. HCA hearing rights.
  
10. Appeal approval/placement removal letter includes:
  - a. Approval of appeal request; and
  - b. Effective date of removal from PRC, if applicable.

**Note:** Concurrent notification of PRC enrollment information and any status changes concerning medical assistance clients in PRC must be sent to HCA PRC and the MCO, as appropriate. All communications must maintain confidentiality per HIPAA requirements.

### **Medical Assistance Client Educational Materials**

The MCO must develop educational materials for PRC medical assistance clients which HCA PRC approves. Educational materials should include:

1. Explanations of the appropriate use of health care services including:
  - a. Placement with an assigned provider and all primary care services must be accessed through the assigned provider or assigned clinic;
  - b. Placement with one prescriber of controlled substances, one pharmacy for all prescriptions, and one hospital;
  - c. Obtaining referrals from the medical assistance client's assigned PCP for services other than primary care;
  - d. Warning that accessing services without a referral might result in the medical assistance client being responsible for payment of services; and
  - e. The placement period of time the medical assistance client will be in PRC.
2. A list of services that do not require a referral such as dental, eye care by an optometrist, eye glasses, mental health services, drug and alcohol treatment, family planning, transportation, and health department services (WIC, immunizations, etc.).

Note: Some of these services/referrals will not apply to WMIP medical assistance clients.

3. Educational materials on accessing mental health services and drug and alcohol treatment including phone numbers or email contact information.
4. Education 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. The MCO may use provider manuals, provider newsletters, and other materials to educate network providers about PRC. At a minimum include:



## **PRC PROGRAM EXCEPTIONS**

Medical assistance clients excluded from the requirement to stay with the same MCO for one year are Native American medical assistance clients, clients in the Basic Health program, and medical assistance clients in the program designed to protect domestic violence clients.

Address Confidentiality Program (ACP),  
257 PO BOX,  
Olympia, WA 98507.

## **COORDINATION OF PRC PLACEMENT**

Medical assistance clients 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, including;

- If a medical assistance client is placed in PRC by an MCO;
- If the medical assistance client goes from FFS to an MCO; or
- If a medical assistance client goes from one MCO to another MCO.

Coordination of medical assistance client placement is essential for the health and safety of the medical assistance client. The MCO must:

- Coordinate concurrent PRC placement and provider assignment information with HCA PRC within three business days of the welcome letter.
- Communicate in a timely manner with the other MCO to facilitate coordinated care for PRC medical assistance client who changed to another MCO.
- Coordinate with other private and public health care organizations. The MCO 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, or health care operations; and
  4. The PHI disclosed is the minimum necessary amount needed to perform the task.

The MCO may choose to place the medical assistance client in PRC at any time during the month. ProviderOne enables updates to be made daily and the status effective immediately. MCO provider assignments in ProviderOne are updated daily. Medical assistance clients who leave the MCO, enroll in another MCO, or become FFS will remain in PRC.

The following list includes the PRC letters for medical assistance clients faxed or emailed concurrently to HCA PRC:

- Initial placement letter (formerly restriction)
- Provider assignment letter
- Change in provider assignment letter
- Continued placement letter
- End of PRC placement letter
- MCO welcome letter (i.e., switch FFS to MCO or MCO to MCO)
- Appeal acknowledgment letter
- Appeal denial letter
- Appeal approval letter

**Note:** Medical assistance client identifying information such as date of birth (DOB) or ProviderOne Client ID is **not** required on medical assistance client letters. However, notifications sent directly to HCA PRC **require** this information to correctly identify and update the status of medical assistance clients in ProviderOne.

#### **NEW MCO MEDICAL ASSISTANCE CLIENT ALREADY IN PRC**

If a medical assistance client's assigned providers are entered in ProviderOne and *then* the medical assistance client changes to another MCO, the new MCO may locate PRC enrollment information in ProviderOne.

- The MCO will need to check <https://www.waproviderone.org/> to determine if a new PRC medical assistance client has joined their MCO. A PRR indicator is passed to the MCO on the 834 file. It can be found in the 2300 loop in the HD segment on the ninth data element. This results in a monthly enrollment roster with the indicator **Y** for PRR (PRC) or **N** for not restricted on the file.
- MCOs are responsible to determine if the assigned providers are network providers. The MCO should send notification to the assigned provider(s) providing the information that the medical assistance client is already placed in PRC. If the assigned providers need to be changed, the MCO must work with the medical assistance client to make the necessary changes to comply with the guidelines as established by WAC 182-501-0135.

## APPEAL AND HEARING

### General Points:

- Managed care medical assistance clients must exhaust the MCO's internal Appeal process prior to requesting an HCA Administrative Hearing.
- Managed care medical assistance clients cannot change MCOs until the Appeal or HCA Administrative Hearing is resolved and there is a final ruling.
- Managed care medical assistance clients may also file an expedited Appeal with the MCO.

### Appeal and Hearing Specifics

Medical assistance client requesting an appeal:

For initial placement, a medical assistance client may request an appeal disputing placement in PRC.

- If the medical assistance client requests or files for an Appeal within 10 days from the date of the PRC notice letter the medical assistance client will not be placed in PRC, pending the appeal outcome decision by the MCO.
- If the medical assistance client files for an appeal request between 11 and 90 days from the date of the PRC notice letter, the medical assistance client will be placed in the program 10 days after the date of the PRC notice letter, pending the appeal decision outcome.

For continued placement, a medical assistance client may request an appeal disputing placement in PRC.

- The medical assistance client has 90 days from the date of the letter to ask for an appeal and the medical assistance client will continue to remain in PRC pending the appeal decision (i.e., MCO clinical representative reviews utilization health care records and then there is a decision to release from PRC or continue PRC).
- If the medical assistance client loses the appeal decision, the medical assistance client receives an appeal denial letter and must remain in PRC. They have an additional 90 days from date of the letter to request a hearing.
- If the medical assistance client wins the appeal decision, then the medical assistance client receives an appeal approval letter which serves as notification of their release from PRC.

Medical assistance client lost appeal and requests a hearing:

- The medical assistance client, regardless of placement status (initial or continued placement, and in or out of PRC), has 90 days from the date of the appeal denial letter to file for a hearing.
- For initial placement, the medical assistance client was not placed in PRC because the appeal was requested timely and they file for a hearing within 10 days from the date of the appeal denial letter, the medical assistance client will remain out of PRC pending the hearing outcome.

- For initial placement with an untimely appeal request, the medical assistance client has already been placed in PRC. The medical assistance client will continue to be in PRC pending the hearing outcome.
- The continued PRC medical assistance client requesting a hearing, or disputing a second or third PRC placement will stay in PRC pending the hearing outcome.

**The following information must be provided to medical assistance clients:**

- Calling the Office of Administrative Hearing (OAH) at 1-800-583-8271 or visiting [www.oah.wa.gov](http://www.oah.wa.gov)
- Providing to OAH the reason for the hearing request
- Legal representation information from the nearest Legal services office or NW Justice Clear line at 1-888-201-1014
- The WAC of 388-538-112 which explains the hearing process
- Concurrent notification sent to HCA PRC regarding appeal and hearing requests and outcomes and all medical assistance clients' status changes.

**Note:** HCA PRC requires notification regarding appeals or hearings filed by a medical assistance client concerning PRC placement and the outcomes.

**Note:** The MCO is an independent party and is responsible for its own representation in any hearing, independent review, Board of Appeal, and subsequent judicial proceedings.

### **HCA PRC CONTACT INFORMATION**

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

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

Fax: (360) 725-1969

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

Website: <http://hrsa.dshs.wa.gov/PRR>