

<b>HEALTH PLAN OF SAN JOAQUIN</b>			
<b>Subject: Leave of Absence/ PCP Covering</b>			
<b>Department: Provider Services</b>			<b>Policy #:</b>
<b>Applies to: MCL, H/F and Commercial Plans</b>			<b>Scope:</b>
<b>Effective Date:</b> 05/24/06	<b>Revised Date:</b> 08/12/08	<b>Approved by:</b>  <i>Signature on file</i> (Title of Sr. Exec.responsible)	

**PURPOSE:**

To ensure adequate coverage for all members assigned to a Primary Care Physician (PCP), in the event the PCP will be unavailable to treat his/her members.

- A. Notification of Leave of Absence (LOA)
- B. Covering Physician
- C. Notification to internal HPSJ departments

**DEFINITIONS:**

Leave of Absence (LOA) is defined as a complete absence from the PCP practice for medical, personal or other reasons, including vacation greater than 2 weeks.

**POLICY:**

- A. PCP must submit written notice to Health Plan of San Joaquin (HPSJ) for all absences greater than two weeks at a time.
- B. PCP must notify all HPSJ members for absence greater than two weeks.
- C. PCP must arrange for adequate coverage by a participating provider in the appropriate specialty for the practice. (section 4.1.6 of contract)
- D. Provider's practice will be closed to new member assignment for LOA greater than 30 days.
- E. Providers who will be on LOA for greater than 90 days may require reassignment of members to another PCP.

**PROCEDURES:**

- A. PCP must submit written notice to HPSJ for all LOA greater than 2 weeks.
  - 1. Notice must include duration of LOA and covering physician information.
  - 2. Upon receipt of notice Provider Services will create Customer Contact Log (ccl) and document notification and covering physician information.
  - 3. Provider Services will contact provider to confirm receipt of notice and to ensure provider has also planned for proper notification to assigned members via phone message and site (e.g., signs, notices).
  - 4. Notice to members should include duration of LOA, covering PCP’s name, phone number, office address and hours.
  
- B. PCP must provide adequate coverage by a participating provider in the appropriate specialty for the practice.
  - 1. Covering physician shall accept and abide by the terms and conditions of Primary Care Physician Medical Service Agreement.
  
- C. Provider Services will notify all affected internal departments.
  - 1. Provider Services will close PCP practice to new member assignment for all LOA greater than 2 weeks. Existing members will be able to be assigned during this time.
  - 2. Provider Services will notify Provider Maintenance (PM) of any system changes that may be required via ccl.
  - 3. Provider Services may request that PCP’s who are on LOA greater than 90 days have members reassigned to another PCP, this is will be at the discretion of the Director of Customer Service and Manager of Provider Services.

**REFERENCE:**

- A. Primary Care Physician Medical Service Agreement
- B. Provider Manual

<i>Created by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>
<i>Shamel 05/24/06</i>	<i>Shamel 08/12/08</i>				