

HEALTH PLAN OF SAN JOAQUIN			
Subject: PCP Assignment			
Department: Provider Services			Policy #: PRO11
Applies to: Medi-cal, H/F, and Commercial Plans			Scope:
Effective Date: 02/01/96	Revised Date: 08/13/08	Approved by: <i>Signature on file</i> (Title of Sr. Exec.responsible)	

PURPOSE:

Health Plan of San Joaquin (HPSJ) is required to ensure all eligible members are assigned to a Primary Care Physician (PCP).

- A. Newly eligible members
- B. Members terminated from current PCP
- C. Members who have requested a new PCP

POLICY:

- A. HPSJ requires its new members to choose a PCP. Members are given approximately 30 days to contact Member Services to choose a PCP.
- B. Members who have been terminated from their PCP will be reassigned to a new PCP from HPSJ Member Services Department.
- C. Members can asked to be assigned to a new PCP.

PROCEDURES:

- A. Provider Services will receive notification from the Information Systems (IS) Department approximately the third week of each month that the auto assignment file is ready for processing. The location of the file is noted in the Provider Services Workflow (PSW).
 - 1. Provider Services will then prepare the file for assignment. The file is copied and saved (preparation is detailed in the PSW).
 - 2. Provider Services will then review the file of providers accepting new patients.

B. Provider Services will use the following criteria when making the auto assignment:

1. Language, age, and gender of member
2. Current list of Primary Care Physicians (PCP) accepting new patients
3. Language, age and gender restrictions for provider's office
4. Physicians panel capacity
5. Geographic accessibility (travel time and distance) based on members home zip code
6. Availability of traditional and safety net providers
7. Cultural and ethnicity of member and provider

Priority is given to matching the language and cultural needs of the member with a provider that meets their language and culture

C. Providers may terminate a member from their practice

1. Providers cannot terminate a member because of medical condition
2. Providers must submit request for member termination in writing, request must provide explanation for termination
3. Request will be reviewed and determination will be jointly made by HPSJ and provider
4. Providers must notify members in writing that they are terminating their Ccare and giving the member 30 days to choose another PCP
5. Members Services will contact member and attempt to assign member to a Nnew PCP.
6. Unsuccessful contact with the member will place member in an auto assignment criteria

D. Members can choose to be assigned to a new PCP

1. Members will need to call Member Services Department and speak with a representative.
2. PCP changes or reassignments can only be made during the first 3 days of month. If it is beyond that the assignment will take place the first of the following month.

3. Exceptions to above assignment do occasionally take place for the if the following criteria is met:

- Members have not seen their current PCP in the current month of of the request, and the member is sick and needs to be seen
- Member does not approve of previous auto assignment
- Member previously requested a change and system did not take previous request

REFERENCE:

- A. DHS Contract, Exhibit A, Attachment 13, #17
- B. MRMIB Contract, Section II, G
- C. 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>
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