
Subject: PCP/PCPCH Selection

Objective:

- I. To ensure that Tuality Health Alliance (THA) Oregon Health Plan (OHP) members are assisted in selecting or changing primary care providers (PCPs)/ patient centered primary care home (PCPCH) on an as-needed basis for the provision of quality access to care.
- II. It is the goal of THA to have a designated PCP/PCPCH for every member within the first month (30 days) of the member's enrollment.

Policy:

- I. With the objective of meeting member needs, THA will assist members in selecting a PCP/PCPCH or in changing a upon request.
- II. THA encourages members to choose their own PCP/PCPCHs, thus allowing members to establish care with providers who best meet their cultural and special member needs. THA shall specifically allow any American Indian or Alaska Native (AI/AN) member to choose a PCP that is an Indian Health Care Provider provided that the following criteria are met:
 - a. The Indian Health Care Provider is participating as a PCP within the THA Provider Network;
 - b. The Indian Health Care Provider has the capacity to provide primary health care services to the AI/AN member; and
 - c. The AI/AN member is eligible to receive services from the Indian Health Care Provider.
- III. THA provides newly-enrolled members with accessibility information about participating providers (e.g., which PCP/PCPCHs are currently accepting new patients).
- IV. If a THA member does not choose a PCP/PCPCH within 30 calendar days from his/her date of member enrollment, THA will ensure that the member has an ongoing source of primary care that is appropriate to his/her needs by formally assigning a PCP/PCPCH. THA will document the unsuccessful efforts to elicit the THA member's choice before PCP assignment.
- V. THA considers the cultural and special needs of members when assigning PCP/PCPCHs to them.

Procedures:

- I. *PCP/PCPCH Selection and Assignment*
 - a. In addition to the new member information sent by Health Share, a Welcome Packet is sent by THA to all new members of the plan. The packet instructs members to call the THA office for assistance in selecting a PCP/PCPCH; the packet includes a and information on how to access the Provider Directory that lists PCP/PCPCHs that are currently accepting new patients.

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- b. THA Member Outreach Representatives attempt to contact each new member of the plan within 30 days of becoming enrolled on the plan. Member Outreach educates the member on where to access the Provider Directory and assists with finding a PCP/PCPCH. If the member does not choose a PCP/PCPCH within 30 calendar days from the date of enrollment or is unable to be contacted, the THA Member Outreach Representative will automatically assign a PCP/PCPCH to him/her. The assignment is based on the following criteria:
 - i. PCP/PCPCH practice is open;
 - ii. PCP/PCPCH is an appropriate provider (i.e., a pediatrician or family practice provider for members under 19 years of age);
 - iii. Member's geographic proximity to the PCP/PCPCH office;
 - iv. Consideration of ethnicity (i.e. a bilingual provider and/or staff for non-English speaking members); and
 - v. A review of THA claims data identifies previous visits to a PCP/PCPCH (i.e., assignment to the same PCP/PCPCH may be made to ensure continuation of care).
 - c. Members have the right to change PCP/PCPCHs at will.
- II. *Notification of PCP/PCPCH Selection/Assignment*
- a. After the member has selected or been assigned to a PCP/PCPCH, a member identification card indicating the name and contact information of that provider will be mailed to the member.
 - b. THA sends a report of the members assigned to a PCP/PCPCH to that provider on a monthly basis.
- III. *Changing PCP/PCPCHs*
- a. Members may view the procedure for changing PCP/PCPCHs as it is outlined in the Member Handbook.
 - b. Members can request a PCP /PCPCH change by calling THA Member Services.
 - c. THA Member Services will document the change of PCP/PCPCH in Plexis.
 - d. If the request to change a PCP/PCPCH is due to a complaint, Member Services will also log the complaint into the THA Complaint Log.
 - e. The change requests will be summarized and reviewed by the THA Quality Management Committee on a quarterly basis. Any problems or trends will be reviewed and, if necessary, a plan of action will be developed.
- IV. *PCP Termination Necessitating PCP Change*
- a. Refer to *THA Policy VIII-4: Provider Termination of Care*
 - b. If a PCP/PCPCH terminates the patient-provider relationship, the PCP/PCPCH will notify the member in writing.

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References: 42 CFR 438.208 (b)(1)
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Health Share of Oregon Tuality Health Alliance Contract

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