

Patient Review and Coordination Program

Managed Care Guide

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Introduction

This guide describes the requirements for Managed Care Organizations (MCO) to develop, manage and maintain a Patient Review and Coordination (PRC) Program. The PRC Program is a health and safety program that coordinates care and ensures clients enrolled in PRC use services appropriately and in accordance with agency rules and policies. When Apple Health (Medicaid) clients are enrolled in PRC, they are assigned to one primary care provider (PCP) and a pharmacy for all prescriptions 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. [See PRC WAC 182-501-0135](#) for additional provider assignments.

This guide will be updated and sent to the MCOs whenever the guide is updated with any new PRC guidelines.

Compliance

MCOs must develop policies and procedures and ensure compliance with WAC 182-501-0135. Health Care Authority (HCA)/Medicaid Programs Division (MPD)/PRC staff are 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 the age of 18 in the PRC program (HCA/MPD/PRC must approve of the placement before an enrollee under the age of 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/MPD/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/MPD/PRC. The following letters are required for enrollees the MCO is considering for placement in the PRC program.

- 1) A 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) Initial Placement letter that includes:
 - 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 (ACP)).
 - e. Appeal and hearing rights.

Note: All communications to HCA/MPD/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.

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. The start date is 10 days from the date of initial provider assignment letter or combined PRC placement letter/initial provider assignment letter.
 - b. Notification 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) 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 placement letter that includes:
 - a. Reason for the continued PRC Program placement.
 - b. Length of continued PRC placement; and
 - c. Appeal and hearing rights.

Note: HCA recommends the letter include the following: explanation of the criteria per WAC 182-501-0135 for medical services, the enrollee's record of health care 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 non-compliance of medication contracts.

- 6) End Restriction letter 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 -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 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/MPD/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/MPD/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 health care services including:
- a. Placement with an assigned provider and 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 when necessary.
 - d. Warning that accessing services without 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 not requiring a referral, such as dental, emergency services, optometry, behavioral health, substance use disorder treatment, medical equipment, health department, hospice, long term care, emergent and non-emergent transportation, and family planning.
- 3) Specific educational materials on accessing behavioral health services and substance use disorder 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 takes 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 application titled "Benefit Enquiry" in a Windows Internet Explorer browser. The application has a navigation bar with tabs: My Inbox, Admin, Provider, Claims, Reference, Client, TPL, Drug Rebate, Rate Setting, PA, Managed Care, Cash Receipt, and Payroll. The "Client" tab is selected. Below the navigation bar, there is a "Welcome" message and a "Path" field showing "MyInbox/ Client List/ Demographic Detail/ Client Eligibility Inquiry/ Client Benefit Level". The "Client Id" is "#####VA" and the "Name" is "Client Name".

Below the "Welcome" message, there is a "Menu" section with a "Printer Friendly Version" link. A "Message(s):" section is visible, followed by a "Restricted Client Information" section. This section contains a table with the following data:

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

Below the table, there is a "Message(s):" section with the text "Client is restricted to certain Providers". At the bottom of the page, there is a "Page ID: pgProvMedicaid(Client)" and a "Trusted sites" status bar.

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 fee-for-service (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) American Indian/Alaskan Native (AI/AN) 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/MPD/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 the Department of Social and Health Services (DSHS). 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. ProviderOne enables updates to be made daily and the status effective immediately. MCO provider assignments in ProviderOne 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/MPD/PRC at the same time the letter is mailed to the enrollee. Including:

- Initial Placement
- Appeal Acknowledgement
- Appeal denial
- Appeal approval

The following letters will be entered onto the monthly spreadsheet, which is due by the 10th of each month through MC Track.

- Provider Change
- Continued placement
- End Restriction
- Initial Placement
- Switch Plan

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

New MCO Enrollee Already in PRC

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

- MCOs will need to check ProviderOne 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 initial placement letter, 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 their request 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 initial placement letter, 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 their request 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 their request 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 their request to remain out of PRC) the enrollee is removed from the PRC program and an end 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/MPD/PRC is requested when an appeal concerning PRC placement is filed by an enrollee, and the outcome of the appeal. Both notifications should be on the same day as the notification is sent to the enrollee.

Contact HCA/MPD/PRC

- **Phone:** 1-800-562-3022 ext. 15606
- **Email:** PRC@hca.wa.gov
- **Online:**
 - Billers-Providers: hca.wa.gov/prc
 - Clients: hca.wa.gov/prc-for-clients