

Procedure Title: Choice of Primary Care Provider

Department: Government Programs **Business Unit:** State Public Programs

Approved By: Director of State Public Program Products

Approved Date: 10/10/2013 **Original Effective Date:** 10/10/2013

Review Date(s) (no changes) 12/19/2017, 6/1/2021

Revision Dates: 11/2/2015, 12/9/2016, 11/6/2019

PRODUCTS AFFECTED:

Minnesota Senior Health Options (MSHO) – Medica DUAL Solution[®]

- Minnesota Senior Care Plus (MSC+) Medica Choice CareSM MSC+
- Special Needs BasicCare (SNBC) Medica AccessAbility Solution[®]
- Special Needs BasicCare (SNBC) Integrated Medica AccessAbility Solution Enhanced®

DEFINITIONS:

Primary Care Provider (PCP): Provider or licensed practitioner, pursuant to Minnesota Rules, Part 4685.0100, subpart 12a, or nurse practitioner, or physician assistant pursuant to Minnesota Rules, Part 4685.0100, subpart 12b.

PURPOSE

To assure that all Care Systems, Agencies, and Counties/Tribes that provide Care Coordination for Medica members have a policy and/or procedure to ensure Medica members are offered a choice of Primary Care Provider (PCP) appropriate to his or her needs that is formally dedicated for supervision and coordination of the health care services furnished to the member.

POLICY

Care Systems, Agencies, and Counties/Tribes that provide Care Coordination for Medica members are required to have procedures in place to guarantee that Medica members are offered a choice of PCP appropriate to his or her needs that is formally dedicated for coordinating the health care services furnished to the member.

PROCEDURE

- 1. All members of Care Coordinated Products (CCP) are encouraged to obtain a designated source of Primary Care.
- 2. During the Initial Health Risk Assessments (HRA), the Care Coordinator (CC) will determine if the member has selected a PCP.
 - a. If the member does have a PCP selected, the CC should document chosen PCP on the Care Plan.
 - b. If the member does not have a chosen PCP, the CC should facilitate a conversation about the benefits of establishing a relationship with a PCP.
 - i. The CC may help facilitate finding a PCP for the member.

- 3. Medica's Model of Care (MOC) places a high priority on preventive care and establishing a relationship with a PCP. Medica MSHO and SNBC Integrated members are able to designate PCP on their enrollment form.
 - a. MSHO and SNBC Enhanced members may change PCP as often as monthly if desired.
 - i. Notification must be received by the 15th of the month for a change to occur the following month.
 - ii. If notification is received on the 16th of the month or later, the change will become effective the first day of the 2nd month following notification.
 - b. If the member wants a PCP who is not part of the Medica network, s/he will need to either select a network PCP or move to another Health Plan at the next enrollment opportunity.
- 4. Medica MSC+ members are encouraged to choose a designated source of primary care, and are able to change their choice of primary care at any time These members do not fill out a separate Medica enrollment form.
- 5. Medica SNBC members are not required to designate a PCP on their enrollment form.
 - a. Medica SNBC members may change PCP at any time.
 - b. If the member wants a PCP who is not part of the Medica network, s/he will need to either select a network PCP or move to another Health Plan at the next enrollment opportunity.
- 6. SNBC and SNBC Enhanced member's PCP may be a specialist, if that is who the member sees most often, based on their diagnoses.
- 7. The CC will confirm the member's choice for Primary Care annually or with changes in condition.
- 8. In some instances, a change from one designated PCP to another designated PCP may require a transfer to a different Care System, Agency, or County for Care Coordination.

Cross References:
DHS MSHO/MSC+ Contract
DHS SNBC Contract

Rev. 06/21

© 2016-2021 Medica.