

AmeriHealth Caritas Louisiana Enrollee PCP Reassignment Dispute Process

Provider Network Management

9/1/2022

Overview

The Primary Care Practitioner (PCP) shall serve as the Enrollee's initial and most important point of interaction within the ACLA's provider network. A PCP in ACLA's network must be a provider who provides or arranges for the delivery of medical services, including case management, to assure that all medically necessary services are made available in a timely manner.

In an effort to promote accountability for the quality of care of our Enrollees, ACLA assigns Enrollees at the individual primary care practitioner (PCP) level.

Enrollee Reassignment

ACLA conducts a quarterly PCP reassignment to ensure that enrollees are assigned to the most appropriate PCP. The reassignment process applies to all in-network PCPs, all enrollees who have been assigned to the current PCP for at least 90 days, and enrollees who have not seen the assigned PCP within the prior 12 months.

The methodology and corresponding timeframes are:

Month 1 of each quarter

- 15th of the month – ACLA will begin claims analysis on the previous 12 months of PCP wellness visits and PCP sick visits claims history and identify Enrollees eligible for re-assignment

Month 2 of each quarter

- 15th calendar day of the second month of each quarter – ACLA will send panel analysis results to providers for review via portal. If the due date falls on a weekend or a State-recognized holiday, the results will be published on the next business day. Providers have 15 business days to review and respond.

Month 3

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- 16th Business day of the month – ACLA will review any received provider responses and begin the reassignment process
- At the completion of the reassignment process ACLA will send new information to Enrollees and updated panel rosters to providers

Month 4

- By the 15th calendar day after the quarter, ACLA shall report the following to LDH:
- Number of PCPs included in the analysis
- Number of PCPs with at least one enrollee reassigned from their panel
- Number of PCPs with at least one enrollee reassigned to their panel
- The name of any PCP that has no changes to their panel from the reassignment analysis

ACLA's re-assignment methodology will take into consideration:

1. Enrollees over 19 linked to a Pediatrician/PCP with Enrollee age limitations.
 - a. Attribution logic will look at every encounter and assign Enrollee to PCP he or she appears to see most often.
 - b. Followed by Family Link Logic.
 - c. Followed by GEO-Access PCP Assignment Logic

2. Enrollees who have one or more visits to a PCP other than their PCP of record within the same TIN as their assigned PCP will not be re-assigned.
3. Enrollees who have one or more visits to a PCP other than their PCP of record in claims history within the last rolling 12 months including wellness visits and sick visits.
 - a. If Enrollee has not seen their assigned PCP and has seen multiple unassigned PCPs, the Enrollee will be assigned to the PCP with the most visits.
 - b. If Enrollee has the same number of visits with multiple unassigned PCPs the Enrollee will be assigned to most recently visited PCP.
 - c. If Enrollee has one visit to a PCP other than their PCP of record and the unassigned PCP's panel shows closed the Enrollee-PCP relationship takes priority over a closed panel and Enrollee will not be re-assigned.
 - d. If Enrollee has one visit to a PCP other than their PCP of record and the Enrollee self-selected their PCP of record the Enrollee-PCP relationship takes priority and Enrollee will not be re-assigned
4. Enrollees who have not had a visit with their current PCP or any other PCP will not be reassigned.
5. Enrollees who have been assigned to current PCP for at least 90 days.

Provider Notification of Enrollee Re-Assignment

Providers will receive an electronic notification through ACLA's provider portal of PCP re-assignment analysis. Providers will have 15 business days to review and respond via portal.

Providers who disagree with ACLA's data analysis must provide documentation (medical record, proof of billed claim) within 15 business days that they have seen the Enrollee within the last rolling 12 months.

If a provider does not respond, ACLA will begin reassignment process.

The Provider Network Management Department will notify both the Enrollee via letter notification and relinquishing PCP via panel roster of Enrollee reassignment.

Enrollee letter templates are embedded below.



PCP Reassignment for Members with CLEA



PCP Reassignment Letter.CLEA

On-Going Reporting

Following the assignment process, the panel roster report is generated and available within ACLA's provider portal, NAVINET and refreshed on the 15th of each month.

PCP Panel Roster Report

The summary report provides the summary of Enrollees assigned to the PCP's panel.

Enrollees re-assigned to a new primary care provider will be denoted by an electronic indicator in the panel roster under the “New Enrollee” column.

Enrollees auto-assigned to a primary care provider will be denoted by an electronic indicator in the panel roster under the “auto-assigned” column.

The summary report can be pulled via PDF or Excel or CSV, which can be filtered and/or sorted per the provider’s preference.

Provider Requested Review of Panel for Reassignment

By PCP written request, a primary care provider may request a review of their current plan Enrollee linkages outside of the quarterly re-assignment process to ensure the most effective relationship with his or her linked Enrollees.

A written request on your letterhead asking for the removal of the Enrollee from your panel must be sent to the Provider Network Management and must include the following:

- The Group name, applicable practitioner and AmeriHealth Caritas Louisiana provider identification number. Practice location for which they are requesting review (if multi-site groups)
- The requesting PCP’s signature

Provider will receive an automatic acknowledgment of plan receipt of request. A comprehensive review of Enrollee panel to include claims/data mining will be accomplished within 30 days of receipt of the written request, during which time the PCP must continue to render services to assigned panel.

Following review, the Provider Network Management Department contact the provider to discuss the findings and timeframes associated with addition of new Enrollees to panel, if applicable. ACLA will notify the Enrollee of new PCP assignment and when the transfer is effective.

Requests for panel review outside of quarterly algorithm should be directed to PCPAssignment@amerihealthcaritas.com

PCP Request to Freeze or Limit Enrollee Panel

AmeriHealth Caritas Louisiana recognizes that a PCP will occasionally need to limit the volume of patients in his/her practice in the interest of delivering quality care. Each PCP office must accept at least 50 Enrollees but may specify after 50 the number of Enrollees/PCP linkages they will accept from AmeriHealth Caritas Louisiana. Our system will automatically close the PCP Panel once a PCP has reached the specified number of linkages. A PCP may also forward a request to limit or stop assignment of Enrollees to his/her panel if his/her circumstances change.

We encourage our providers to offer evening and Saturday hours. AmeriHealth Caritas Louisiana will offer the additional reimbursement under the Medicaid Professional Fee Schedule adjunct codes.

Providers may contact the Provider Network Management Department to freeze or limit their Enrollee linkages, by written request and must include the following:

- The Group name, applicable practitioner and AmeriHealth Caritas Louisiana provider identification number. Practice location for which they are requesting review (if multi-site groups)

- Limitation requested & the requesting PCP's signature
- The Group name, applicable practitioner and AmeriHealth Caritas Louisiana provider identification number. Practice location for which they are requesting review (if multi-site groups)
- The requesting PCP's signature

Provider requests to freeze or limit Enrollee assignment should be directed to PCPAssignment@amerihealthcaritas.com.

The requesting provider will receive an automatic acknowledgment of plan receipt of request. Plan will review request and determine action. Freeze/panel limitation will be accomplished within 30 days of receipt of the written request, during which time the PCP must continue to render any needed emergency care to assigned Enrollees.

Contact Information

Provider Network Management

PCPAssignment@amerihealthcaritas.com