

**Subject: PCP Selection**

**Page 1 of 4**

**Objective:**

To ensure that Tuality Health Alliance (THA) Oregon Health Plan (OHP) members are assisted in selecting or changing primary care physicians (PCP) on an as needed basis to provide quality access to care.

It is the goal of THA to have a designated PCP for every member within the first month of enrollment verified by Member Services.

**Policy:**

- I. THA will assist the members in selecting a primary care physician (PCP), or in changing their primary care physician upon request, with the objective of meeting the needs of the members.
- II. THA takes into consideration the cultural and special needs of THA members when assigning PCP's.
- III. THA provides newly enrolled THA members with information about which participating providers are currently accepting new patients.
- IV. THA encourages the member to choose a PCP for physical health services. This allows the member to choose a participating PCP to provide services within the scope of practice that meets the cultural and special needs of the member when such a practice is available.
- V. If the THA member does not choose a PCP within 30 calendar days from the date of enrollment, THA will ensure the member has an ongoing source of primary care appropriate to his or her needs by formally assigning a PCP. THA will document the unsuccessful efforts to elicit the THA member's choice before assigning a member to a PCP.

**Procedures:**

- I. PCP assignment for new members
  - A. A Welcome Packet is sent to all new members within 5 working days of receipt of the enrollment information. This packet instructs the member to call the Plan office for assistance in selecting a Primary Care Physician (PCP), and refer them to the member handbook

regarding selection of PCP.

- B. If the OHP Member does not choose a PCP within 30 calendar days from the date of enrollment, THA's Member Services Representative will automatically assign a THA OHP Member to a PCP.
  - C. OHP Members have the right to change PCP's at will.
  - D. If the (THA Plan office has not heard from the member, Member Services will assign the member a PCP based on the following criteria:
    - 1. Physician practice is open.
    - 2. Physician is appropriate provider for member (i.e. Pediatrician or Family Practice Physician for members under 19 and Internal Medicine)
    - 3. Geographic proximity or closeness to the physician office.
    - 4. Consideration of ethnicity. (Physician or staff who is Bilingual).
    - 5. Special preferences are considered.
    - 6. A review of Plexis claims data to identify previous visits to a PCP or PCP practice.
- II. Notification of PCP Selection  
After the member has selected a PCP or Member Services has assigned a PCP, a member identification card indicating the PCP will be mailed. In addition a report, which identifies members assigned to the provider is sent to the PCP on a monthly basis by THA
- III. Changing PCP's
- A. Procedures for OHP members to change PCPs are outlined in the Member Handbook. OHP members can request a PCP change via a phone call to Member Services. If necessary, Physician Office Staff will be instructed as to the procedures and assistance for members..
  - B. Procedures for all THA OHP members to request a change of PCP are outlined in the member Handbook
  - C. When a THA OHP member requests to change their PCP, Member Services will document the change of PCP in Plexis. If the request to

change a PCP is due to a complaint, Member Services will also log the complaint into the THA -Complaint Log. 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, discussed and if necessary a plan of action will be developed.

- IV. PCP Termination necessitating change of PCP – see Termination of Care Policy
- A. If a PCP terminates the patient/provider relationship, the PCP will notify the member in writing.
  - B. If a specialist terminates the patient/provider relationship, the specialist will notify the member in writing.
  - C. All THA contracted commercial and Medicare plans” Member Services Departments are responsible for assisting their members with this process.

Reference: OAR 410-141-0120  
42 CFR 438.208 (b) (1)  
FCHP 2011 contract Exhibit B Part II Section 1 b Accessibility

**Subject: PCP Selection**

**Page 4 of 4**

Formulated:           October, 1994

Reviewed:            October, 1995  
                          September, 1998  
                          November 2008

Revised:              October, 1999  
                          January 2002  
                          March 2005  
                          January 2011

---

**THA Plan Director**

---

**THA Medical Director**