



Title:	Notification of Participating Provider Terminations				
Department/Line of Business:	Provider Network Management / All Lines of Business				
Approver(s):	VP, Provider Network Management				
Location/Region/Division:	SWHP				
Document Number:	SWHP.PNO.002.P				
Effective Date:	12/18/2020	Last Review/ Revision Date:	12/18/2020	Origination Date:	11/18/2014

LINE OF BUSINESS

This document applies to the following line(s) of business:
All Lines of Business

DEFINITIONS

When used in this document with initial capital letter(s), the following word(s)/phrase(s) have the meaning(s) set forth below unless a different meaning is required by context. Additional defined terms may be found in the BSWH P&P Definitions document.

Ancillary Provider – an establishment that offers auxiliary or supplemental services used to support diagnosis and treatment of a patient's condition.

Hospital/Facility – an establishment that offers services, facilities, and beds for diagnosis, treatment or care for illness, injury, deformity, abnormality, and/or pregnancy; includes clinical laboratory services, diagnostic x-ray services, treatment facilities (such as surgery or obstetrical care or both), and/or other definitive medical or surgical treatment of similar extent.

Network – a group of doctors, hospitals, and other medical care providers that a specific managed care plan has contracted with to deliver medical services to its members.

Participating Providers – providers who have signed a Participating Provider Agreement with SWHP/FirstCare to furnish covered services to members.

Physician – a professional who practices medicine, which is concerned with promoting, maintaining, or restoring human health through the study, diagnosis, and treatment of disease, injury, and/or other physical and mental impairments.

Practitioner – a person who practices medicine or one of the allied health care professions.

Provider - a Physician, Practitioner, group of Physicians and/or Practitioners, a Hospital/Facility, an Ancillary Provider, or other supplier of medical services.

POLICY

Scott & White Health Plan (SWHP) and FirstCare Health Plan (FirstCare) notifies members in writing when a Participating Provider terminates or is terminated from the provider network. For Medicare Advantage Participating Providers, SWHP/FirstCare also notifies the Centers for Medicare and Medicaid Services (CMS) when there is a significant change in the network due to a no-cause provider termination.

PROCEDURE

Notification to Members

For all lines of business, excluding SWHP/FirstCare Medicare and SWHP/FirstCare Medicaid:

- In the event that a Participating Provider terms from the provider network, SWHP/FirstCare sends each member currently being treated by the provider a written notice of the termination at least thirty (30) days prior to the termination effective date, if reasonable under the circumstances.
- If notification of termination from Participating Provider is less than thirty (30) days from the termination effective date, or if SWHP/FirstCare receives notification of termination after the termination effective date, then SWHP/FirstCare notifies members within thirty (30) calendar days after SWHP/FirstCare is notified, if reasonable under the circumstances.
- If SWHP/FirstCare terminates a Participating Provider for reasons other than at the provider's request, then SWHP/FirstCare may not notify members of the termination until the effective date of the termination or until after a review panel makes a formal decision on whether or not the termination is upheld or denied. However, if the termination of the Participating Provider is related to imminent danger or harm of patients, then SWHP/FirstCare may notify members currently being treated by the provider immediately through a written notice.

For SWHP/FirstCare Medicaid Only:

- SWHP/FirstCare makes good faith efforts to provide written notice of the termination of a Participating Provider within fifteen (15) calendar days after receipt or issuance of the provider's termination notification to each member who receives his/her primary care from or is seen on a regular basis by the Participating Provider.
- SWHP/FirstCare sends the written notice of termination to members on a PCP's panel and members who have had two or more visits with the Participating Provider for home-based or office-based care within the last twelve (12) months.

For SWHP/FirstCare Medicare:

- SWHP/FirstCare makes good faith efforts to provide written notice of the termination of a Participating Provider at least thirty (30) days prior to the termination effective date.
- If notification of termination from Participating Provider is less than thirty (30) days from the termination effective date, or if SWHP/FirstCare receives notification of termination after the termination effective date, then SWHP/FirstCare notifies members within thirty (30) calendar days after SWHP/FirstCare is notified, if reasonable under the circumstances.
- SWHP/FirstCare sends the written notice of termination of a PCP and non-PCP to members who have had one or more visits with a Participating Provider within ninety (90) days of the termination date.

Notification to CMS

For SWHP/FirstCare Medicare Only:

- SWHP/FirstCare notifies its CMS Account Manager of any no-cause provider terminations that we deem significant, at least ninety (90) days prior to the effective date of the termination. If notification of termination from Participating Provider is less than thirty (30) days from the termination effective date, or if SWHP/FirstCare receives notification of termination after the termination effective date, then SWHP/FirstCare notifies CMS within thirty (30) calendar days after SWHP/FirstCare is notified, if reasonable under the circumstances.

For SWHP/FirstCare Medicaid Only:

SWHP/FirstCare notifies HHSC within five (5) days after termination of:

1. a primary care provider (PCP) contract that impacts more than ten (10) percent of members or
2. any Provider contract that impacts more than ten (10) percent of its Network for a provider type by service area and program.

SWHP/FirstCare also notifies HHSC of Provider terminations in accordance with UMCM Chapter 5.4.1.11, "Provider Termination Report."

ATTACHMENTS

None.

RELATED DOCUMENTS

None.

REFERENCES

Centers for Medicare and Medicaid Services (CMS), Medicare Managed Care Manual (MMCM), Sections 110.1.2.2 – Notification to CMS and 110.1.2.3 – Notification to Enrollees

Title 42 §422.111 (e) Changes to provider network

Health and Human Services Commission (HHSC), Uniform Managed Care Contract (UMCC), Section 8.1.4.9 – Termination of Provider Contracts

Health and Human Services Commission (HHSC), Uniform Managed Care Contract (UMCC), Section 5.4.1.11 – Provider Termination Report

Texas Department of Insurance (TDI), Texas Insurance Code (TIC) Section 843.309 for HMO and Section 1301.160 for PPO

The information contained in this policy is confidential and proprietary and may not be shared without the express permission of the Scott and White Health Plan. Further, the information contained in this document should not be considered standards of professional practice or rules of conduct or for the benefit of any third party. This document is intended to provide guidance and, generally, allows for professional discretion and/or deviation when the individual health care provider or, if applicable, the "Approver" deems appropriate under the circumstances.