

Comprehensive Behavioral Health Management/College Health IPA/ Policy and Procedure Manual	
Policy Name: Referral Suspension	Network Management
Date: 07-10	Page: 1 of 3
Reviewed by QI Committee: 07-10	Policy Number: NM-3
Revised by QI Committee:	

Purpose: To define the rationale under which Comprehensive Behavioral Health Management/College Health IPA (CBHM/CHIPA) may temporarily suspend referrals to a contracted provider and outline the procedures for notification and reinstatement of open referral status.

Definitions:

Referral Suspension – a temporary hold of new referrals to a contracted provider as a quality management activity. Provider remains contracted with CHIPA.

Provider Termination – a dissolution of provider contract with CHIPA

Suspension of Privileges – a temporary suspension of a provider’s ability to treat any members of a specified health plan.

Policy:

1.0 Rationale for Referral Suspension

- 1.1 Contracted provider has received two formal complaints/grievances within a six-month time frame, which represent poor quality of service or care.
- 1.2 A complaint/grievance filed against a contracted provider involves a significant quality of care concern, which has the potential for negative treatment outcomes
- 1.3 Provider has not responded to requests for information related to the investigation of a complaint/grievance or quality management concern
- 1.4 Provider has not submitted records for completion of medical record audit and may be in breach of contractual obligations regarding Utilization and Quality Management activities.
- 1.5 Health plan has notified CBHM/CHIPA that provider’s referral status is on hold.

2.0 Procedure

- 2.1 Upon determination that rationale is present for referral suspension a Suspended Status is entered into the provider record and the Suspended Referral Log by the Manager of Network Management
 - 2.1.1 Referral suspension rationale related to a specific health plan will result in referral suspension only for that specific health plan. Provider may still receive referrals from other health plans.
 - 2.1.2 Referral suspension rationale related to the provider’s contract with CHIPA will result in referral suspension for all health plan referrals.

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- 2.2 A certified letter with return receipt is sent to the provider. The letter includes
 - 2.2.1 Rationale for suspension
 - 2.2.2 Time frame for suspension – not to exceed 30 calendar days, unless directed otherwise by health plan credentialing department.
 - 2.2.3 Contact information for further discussion of suspension
 - 2.3 At the end of the complaint/grievance investigation and/or 30 calendar days, whichever comes first, one of the following actions will take place
 - 2.3.1 Provider has either complied with requests for information and/or the complaint/grievance investigation has not found any rationale for termination. The suspended status will be removed and provider will be notified by phone.
 - 2.3.2 Provider will be found in breach of contract for failure to comply with the Utilization or Quality Management activities at which point the Suspended Status will become a Termed Status. Provider will receive written notification regarding termination and arrangements made for transition of care of any patients currently in treatment.
 - 2.3.3 Health Plan will refer provider to their Credentialing Committee for further review of Credentialing Status. The Suspended Status will be continued until the health plan has made a final determination regarding Credentialing Status. Provider will be provider notified in writing via certified letter with return receipt. The letter will include
 - 2.3.3.1 Reasons for continuation of suspension
 - 2.3.3.2 Estimated time frame for suspension
 - 2.3.3.3 Health plan representative contact information
 - 2.4 Following completion of the Health Plan Credentialing Committee review, one of the following actions will take place
 - 2.4.1 Suspended status will be removed and provider will be notified by phone regarding the update
 - 2.4.2 Provider will be termed from the Health Plan network panel at which point the Suspended Status will become a Termed Status. Provider will receive written notification regarding termination and arrangements made for transition of care of any patients currently in treatment.
- 3.0 Documentation

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- 3.1 Referral status changes are completed within the electronic database and a brief note entered regarding the date and rationale for any change
 - 3.2 Documentation regarding complaints/grievances and/or quality management investigations are filed in the hard copy Provider File
 - 3.3 The Manager of Network Management maintains a Provider Referral Suspension Log, which contains provider name and licensure, date of suspension, rationale for suspension, and 30-day follow-up. Log is updated monthly with a copy forwarded to the Medical Director for review. A monthly report regarding the number of providers on Referral Suspension is presented during the Network Committee Meeting.
- 4.0 Suspension of Privileges is imposed when a serious quality of care concern is identified by the credentialing health plan and it determines that the provider may not continue to provide services to members while the case is under Credentialing Committee review. College Health IPA is not delegated for these decisions. All communication with the provider is done by the health plan. When notified by a health plan of the suspension of privileges, CHIPA takes immediate steps to identify and notify members in active treatment with the provider and facilitates transition of care to another contracted provider.