## Policy and Procedure

<table>
<thead>
<tr>
<th>Policy Name:</th>
<th>Personnel Training: Pre Authorization / Referrals</th>
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<tbody>
<tr>
<td>Effective Date:</td>
<td>Revision Date:</td>
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<td>Department(s)/Site(s):</td>
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<td>Document Owners:</td>
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<td>Relevant Law/Standard:</td>
<td>California Department of Health Care Services under Title 22, California Code of Regulations, Section 53230. (Requires the review and certification of Primary Care Practitioner (PCP) sites.) Department of Health Care Services (DHCS) All Plan Letter 20-006, Site Reviews: Facility Site Review and Medical Record Review</td>
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### Purpose:

To ensure that referrals for specialty care and medical procedures are processed in a timely manner, the site will have a process for the timely processing of internal and external referrals, consultant reports and diagnostic test results.

### Policy:

An organized, timely referral system is clearly evident for making and tracking referrals, reviewing reports, providing/scheduling follow-up care and filing reports in medical records. Referral informational resources are readily available for use by site personnel. Site staff can demonstrate (e.g., “walk through”) the office referral process from beginning to end. Systems, practices, and procedures used for handling referrals will vary from site-to-site.

### Procedure:

I. Referral Forms

   A. The staff has an organized, timely referral system clearly evident for making and tracking referrals, physician review of reports, and providing and/or scheduling follow-up care.

      * Appropriate referral forms shall be available at the Primary Care Physician site. The practitioner shall complete the referral form and attach all relevant medical information. Refer to the attached Health Plan specific referral forms.

   B. Primary Care Physician offices are required to maintain a "Referral Tracking Log" or an appropriate tickler system. Refer to the referral tracking log attached.

      * The PCP must ensure timely receipt of the specialist's report or medical procedure report. Reports must be in the patient's medical record within thirty (30) days from the date of the procedure or appointment. If the PCP site has not
received the report within 30 days, the PCP/staff will contact the specialist or procedure site to request a copy of the report.

C. PCP shall ensure that referral informational resources, i.e. Health Plan Specialty and Network Directory are readily available for use by site personnel.

The following elements should be included within the referral system:

- Patient Name
- Date of Referral
- Referral Type
- Appointment Date
- Appointment Kept or Failed

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First Name Last Name – Title

Date

First Name Last Name – Title

Date

Resources:

Go to [www.sfhp.org](http://www.sfhp.org), Provider Resources, Authorizations, Pre-Authorizations, and then Authorization Forms for members assigned to SFHP for Utilization Management

The material in this document is a knowledge-sharing tool provided by the FSR team to enhance compliance with Facility Site Review requirements. All content is for informational purposes and may be used and/or modified according to site-specific practices. Ensure appropriate review and approval by site management prior to adoption.