2016 PIP DQ3: Provider Roster Updates

Frequently Asked Questions

Q1. There is a provider on my list who has not worked here in a very long time. How did that happen?

A1. Providers and medical groups have been communicating changes to SFHP ("inbound" communication) since first participation. However, if a termination/separation was missed on either end, the provider may stay on SFHP's directory in error, until the listing is noticed.

SFHP has done comprehensive roster review with most parties every year. The provider group sent us the roster, and we checked it against our directory. However, the method remains inbound communication, and susceptible to the same flaws. This PIP measure is the first time *we are sending you* our directory (outbound communication), and we are grateful for all the inaccuracies you can catch.

SFHP will be fixing every inaccuracy based on your feedback, and after the first back-and-forth in Quarter 1, the rest of the rounds should be much easier.

Q2. Some Nurse Practitioners have a primary specialty such as "Internal Medicine," while others have "Nurse Practitioner." What does this mean?

A2. SFHP's roster system requires at least one specialty. While all physicians have a specialty, we have found from the credentialing process that some NPs do not have declared specialties. Therefore we have a general "nursing" specialty we can use in the absence of anything more specific.

If you have an NP on your roster cited as "Nurse Practitioner" specialty, but they do have a specialty, please correct the roster.

Q3. How shall I <u>indicate changes</u> I need to tell you about?

A3. There are two equally-acceptable ways to indicate changes:

> <u>Method 1:</u> Use the DQ3 B.C_Supporting Information template sent with your quarterly roster and on the PIP website. For every provider record that needs to change, identify the row, and the change to be made.

> <u>Method 2:</u> Please add a column **to the left** of the providers' names, and describe the changes to be made. Narrative is fine, e.g. "License is actually NP38472339. Speaks French, not Russian. Hours of clinic are M-F 9-5, but open late on Tuesdays to 8pm"

Q4. What is the benefit of all this scrutiny on specialist directories? What caused this measure to get harder this year?

A4. Your provider roster is a list from the same provider directory that members can search when choosing a health plan, or choosing a network in SFHP. If there is inaccuracy, members see it too.

Furthermore, California Senate passed a law that takes effect on July 1, 2016 (SB 137) that greatly increases the requirements for health plans to do provider directory quality assurance. There are two very important changes in this law.

First, for the first time ALL listings must be individually published, including PCPs, specialists, mental health practitioners, urgent care clinics, hospitals, and other (aka ancillary). Before now, we only published PCPs with full details – the rest were in summary.

Second, the law requires that all health plans have a two-way (outbound and inbound, see FAQ #1) affirmative contact with each provider, or provider representative, to confirm the accuracy of the provider's listing. We would rather not reach out to every provider personally, and we imagine you would rather not have that happen either. The methods in DQ3 allow SFHP to satisfy the law without that kind of drastic imposition.

Q5. What providers should appear on the roster?

> **Some providers on the list are urgent care providers or precept residents only and do not have patient panels. Should these providers be included? Several are currently listed as PCPs.**

A5. All providers who are <u>credentialed</u> with SFHP will appear on the roster. At this point, we are unable to differentiate between PCPs, covering providers, part-time providers, etc.   Providers should be removed from the roster when they are terminated from SFHP, which only happens when they are no longer seeing SFHP members.

The following providers should be excluded from the roster: contractors, courtesy staff, fellows, and residents.

Q6. From what dates is the information included on the roster?

A6. The information on the roster includes all providers credentialed with SFHP as of the last day of the quarter.

Q8. For Element M) Date listed with SFHP, is that the date that SFHP adds the provider to the directory or is that the date we notify SFHP of the provider addition (e.g. send add form)?

A8. The date provided for this element should be the date you notified SFHP of the addition.