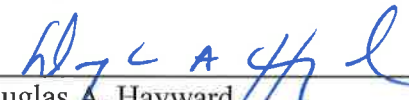




KERN HEALTH SYSTEMS

KERN HEALTH SYSTEMS					
POLICY AND PROCEDURES					
SUBJECT: Provider Education			POLICY #: 4.23-P		
DEPARTMENT: Provider Relations					
Effective Date:	Review/Revised Date:	DMHC		PAC	
05/2000	11/16/2017	DHCS		QI/UM COMMITTEE	
		BOD		FINANCE COMMITTEE	



 Douglas A. Hayward
 Chief Executive Officer

Date 11/16/17



 Chief Operating Officer

Date 11/10/17



 Director of Provider Relations

Date 11/8/17

POLICY:

Provider orientations will be conducted for all Kern Health Systems (KHS) contracted providers and their staff within ten days after KHS has placed a newly contracted provider on active status. However, if an unexpected emergency occurs and the contracted provider is unable to complete the training within the ten day timeframe, the contract effective date will be postponed. Therefore the contracted provider is made aware that they may not provide services to Plan members, until the provider completes training.

Additional provider education will be provided as deemed necessary by KHS, the provider, the Department of Managed Health Care (DMHC), the State Department of Health Care Services (DHCS), or any applicable state and or federal laws included but not limited to All Plan Letters (APL).¹

Provider education will be conducted as required by the DHCS Medi-Cal Contract Exhibit A-Attachment 7 (5).

PROCEDURES:

The Director of Provider Relations with support from the Provider Relations Department staff and

other KHS staff members who may be appropriate, is responsible for planning, coordinating, initiating, monitoring and evaluating any provider communication which will educate the provider with regard to Kern Health Systems' policies and procedures relating to the delivery of health care services and Plan administration. Education may be provided through one-on-one or group presentations, correspondence, bulletins, the *Provider Manual* and updates, training and educational meetings, surveys, and focus groups. Educational materials/sessions may be designed to address certain objectives with specific timeframes (i.e., letters to notify providers of policy changes).

1.0 INITIAL ORIENTATIONS

Initial Orientations are conducted within ten days after KHS has placed a newly contracted provider on active status.² These orientations are conducted one-on-one or in a group setting at contracted provider sites or in local facilities available to handle groups as needed. Providers are required to attend the initial orientation session.

Initial orientations provide at a minimum, the following information³:

A. Overview of Medi-Cal Managed Care and the Two Plan Model

- (i) Goals and Objectives
- (ii) Primary Care Practitioner's Role (PCPs only)
- (iii) Description of the role of HCO and Enrollment Contractor
- (iv) Plan selection/default/conversion

B. KHS Health Plan

- (i) History of Local Initiative
- (ii) Description of KHS Departments and their role with both members and providers
- (iii) Eligibility Verification
- (iv) New Member Entry Program (PCPs only)
- (v) 24 Hour Advice Nurse
- (vi) Access Standards
- (vii) Member Grievances and Provider Disputes
- (viii) Coordination of Health Services
- (ix) Initial Health/Education Assessment (PCPs only)
- (x) Medical Record Confidentiality
- (xi) CHDP Services (PCPs only)
- (xii) Member Health Education Programs and Procedures (PCPs only)
- (xiii) Referrals and Authorizations (CCS)
- (xiv) Inpatient Utilization
- (xv) CPSP and Perinatal Services
- (xvi) Pharmacy/Lab/X-ray
- (xvii) Claims Administration
- (xviii) Encounter data
- (xix) Availability of Interpreter Services
- (xx) Member Rights⁵
- (xxi) Provider Directory Inaccuracies
- (xxii) Smoking Cessation
- (xxiii) Transportation
- (xxiv) Palliative Care
- (xxv) Cultural and Linguistics

2.0 PROVIDER ADMINISTRATIVE MANUAL

Each contract provider receives a *Provider Manual* which includes a copy of supportive Plan policies and procedures and sample forms. Each contract provider also receives a supply of any necessary forms.

3.0 ADDITIONAL METHODS OF PROVIDER EDUCATION

Provider education is provided through the following methods:

- A. KHS Plan Bulletin - These bulletins are distributed on an as-needed basis primarily to provide timely notification of new Plan information, including changes in regulations relating to Medi-Cal Managed Care. Plan Bulletins are posted to the KHS website at kernfamilyhealthcare.com as well as mailed to providers that do not access the internet.
- B. Telephone support through the Provider Relations Department and other pertinent departments.

REFERENCE:

Revision 2017-10: Policy revised by Provider Relations Department to comply with APL 17-004 – added additional regulatory language to ensure compliance with applicable state and federal laws. **Revision 2014-03:** Policy revised by Provider Relations department to comply with 2013 DHCS Medical Audit, deficiency 6.4. **Revision 2011-01:** Added KHS website for source of provider education. **Revision 2004-05:** Revised per DHS/DMHC Medical Audit (YEOct03 – 4.3.1). Additional revisions made as part of routine review. **Formerly:** 4.23 – Provider Orientations (2000-05)

¹ 2004 DHS Contract A-7(5)

² 2004 DHS Contract A-7(5)

³ 2004 DHS Contract A-7(5)

⁵ 2004 DHS Contract A-13(A-C)