

PROVIDER Bulletin



December 15, 2018

This Provider Bulletin applies to the lines of business and provider types checked below:

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| <input checked="" type="checkbox"/> PHP (Medicare) | <input checked="" type="checkbox"/> Primary Care Physicians | <input checked="" type="checkbox"/> Specialists |
| <input checked="" type="checkbox"/> PHC (Medicaid) | <input type="checkbox"/> Ancillary | <input checked="" type="checkbox"/> Hospitals |



Please consider this Provider Bulletin as the Plan's formal announcement that Quality Medical Consultant Group: QMC Cares has been selected as our hospital vendor, **effective January 1, 2019**.

Effective January 1, 2019, QMC Cares will replace FLACS of TeamHealth (FLACS + IPC) for coordination of inpatient care services for PHC (Medicaid) and PHP (Medicare) enrollees. QMC Care is authorized to manage inpatient care for PHP & PHC members throughout initial Consult, Admission, Follow-up and Discharge at your facility, in the absence of the enrollee's primary care physician.

PHP & PHC looks forward to working with you in providing our enrollees the quality service in the joint effort between your facility and the QMC Cares.

We are confident QMC Care will optimize the coordination of inpatient care for our members and deliver outstanding healthcare services on behalf of our network. If you have any questions or concerns, please do not hesitate to contact me or anyone from our Medical Utilization Department here at PHP & PHC, at 1-866-990-9322. **All information may be faxed to 1 (888) 972-5340.**

UTILIZATION MANAGEMENT NOTIFICATION

- Authorization is required for all Hospital or facility based care (Acute, Observation, Sub-acute/Rehab, SNF, Long Term Care and Hospice)
- Hospital must notify PHP/PHC of all admissions WITHIN 24 HOURS OR NEXT BUSINESS DAY.

REQUIRED INFORMATION FOR ALL INPATIENT ADMISSIONS

- Hospital Face Sheet/Demographic Sheet
- Admitting Diagnosis, Admitting Physician with contact phone number
- History and Physical
- ER notes, Admission orders, Consultations
- Laboratory and Diagnostic Results
- Physician orders, including discharge orders with discharge diagnosis
- Level of Care (e.g., transition from observation to inpatient, hospice, acute to swing/subacute, ambulatory to observation)
- Progress notes (to include any discharge planning)
- Timely notification of Discharge Plan (at least 24 hours in advance). Utilization review notes from Hospital or other applicable entity substantiating documentation to support medical necessity for admission. PHP/PHC uses McKesson InterQual Criteria Sets.

This Provider Bulletin is not intended to replace or conflict with any requirements outlined in your signed Agreement with AHF, PHP or PHC. If you have any questions or suggestions contact the Provider Relations Department at 954.522.3132 or email to remon.walker@positivehealthcare.org.