### C.13 Enrollee Selection of Primary Care Provider (PCP)

#### **REQUIREMENT: RFP Section 60.7.C.13**

13. Enrollee Selection of Primary Care Provider (PCP) (Section 23.0 Enrollee Selection of Primary Care Provider)

- a. Describe the Vendor's proposed approach to helping Enrollees to identify and make voluntary selections of PCPs, within specified timeframes, who meet their needs, ensure continuity of care. Include information about differences in the Vendor's approach, if any, to supporting Enrollees without Supplemental Security Income (SSI), Enrollees who have SSI and Non-Dual Eligible, and Enrollees under Guardianship through the selection process.
- b. Describe the Vendor's PCP auto-assignment algorithm for Enrollees who do not make a voluntary selection, including how the Vendor will ensure an Enrollee's continuity of care.
- c. Describe the Vendor's approach for processing provider change requests, to include:
  - i. Enrollee request after initial assignment,
  - ii. For cause,
  - iii. When Enrollees regain eligibility,
  - iv. When the Provider is terminated, and
  - v. For a Provider request.
- d. Describe the Vendor's approach to identifying, outreaching to, and educating Enrollees who do not receive services from their PCP within one (1) year of enrollment with the PCP. What information and support will the Vendor provide to Enrollees to obtain services?

### Molina's Enrollees will be able to make informed decisions in their selection of a PCP who best meets their needs and preferences through Molina's flexible and accommodating approach.

Developing positive, ongoing relationships with their primary care providers (PCPs) positively impacts Enrollees' health and wellbeing. This is particularly important in states like Kentucky that have high rates of preventable emergency department (ED) visits and hospitalizations, and underutilized preventive healthcare services. Our more than 25 years of experience assisting Medicaid Enrollees in selecting the "right" PCP, coupled with expert systems and technical capabilities, will enable our Enrollees to have a PCP who both meets their needs and preferences, and maximizes their health and well-being.

Molina Enrollees will be able to select PCPs in a comprehensive network that includes family practice and general practice physicians, internists, obstetricians and gynecologists, pediatricians, physician assistants, advanced practice registered nurses, Federally Qualified Health Centers (FQHCs), and rural health clinics (RHCs). Molina's network also includes patientcentered medical homes (PCMHs). *To encourage certification by NCQA*, *The Joint Commission, or URAC, we will provide financial support and incentives to help PCP practices become certified PCMHs*.

We will employ various strategies to encourage Enrollees to

### Molina will support Enrollees in selecting a PCP through

- Providing user-friendly ways to change PCPs, including calling our Call Center or online through our Enrollee Web portal or mobile app
- Allowing Enrollees to change PCPs at any time without restrictions on the number of changes
- Making PCP changes effective immediately
- Allowing Enrollees to select a specialist as their PCP
- Auto-assigning Enrollees to the most appropriate PCP using all available sources of information

develop close relationships with their PCPs. Our approach is based on successful strategies Molina has employed in other Medicaid markets and informed by focus groups we held in Kentucky with Medicaid Enrollees and providers. For example, we learned that some Enrollees do not fully understand what their health plan offers, including the option to change their PCP. *Our hands-on, local approach will help Enrollees understand their Medicaid benefits and use them to improve their health status.* 

Molina will educate our network PCPs on timelines and the importance of preventive healthcare services as well as the opportunity to receive financial rewards for achieving quality improvement objectives. Our provider incentives focus on, among other measures, improving health outcomes through preventive care measures for Enrollees, including those who have chronic healthcare issues; avoiding potentially preventable admissions, readmissions, and ED visits; and maternal and fetal health to better manage overall healthcare outcomes. For Enrollees, we will promote our Healthy Rewards program that offers gift cards for attending certain preventive care services, such as adolescent well-care visits and adult annual preventive screenings.

We have thoroughly reviewed the requirements contained in Attachment C, Draft Medicaid Managed Care Contract and Appendices, Section 23.0, Enrollee Selection of Primary Care Provider (PCP), and we will meet or exceed requirements.

#### a. HELPING ENROLLEES IDENTIFY AND MAKE VOLUNTARY PCP SELECTIONS



We recognize the importance of helping Enrollees select their own personal PCP and will provide Enrollees with one-on-one assistance and helpful information to make their selection. We understand that dual eligible Enrollees and Enrollees who are presumptively eligible are not required to have a PCP; however, if they would like to have an assigned PCP, we will assist them in selecting one who best suits their needs and preferences. For all other Enrollees, including those with Supplemental Security Income (SSI) coverage who

are not dually eligible, we will help them identify, select, and connect with PCPs who meet their needs and preferences through a series of proactive steps that engage and empower each Enrollee.

Much of our approach to helping Enrollees identify and select a PCP applies to all Enrollees who will have a PCP—Enrollees without SSI, Enrollees who have SSI and are non-dual eligible, and Enrollees under guardianship. We describe our proposed approach below, followed by some of the key ways we support Enrollees who have SSI and are non-dual eligible, and Enrollees under guardianship.

Enrollees can select and change their PCP at any time by calling our Call Center, online through our Enrollee Web portal or mobile app, or during a face-to-face encounter with a Molina employee.

Molina will mail all new Enrollees, guardians, or authorized representatives a confirmation letter and Molina Welcome Kit

within five business days of Molina's notification of a new Enrollee. Welcome Kits will be available in English, Spanish, and each prevalent non-English language and alternative formats. We will mail this in the Enrollee's preferred language when we have that information. This combined mailing will include:

- Effective date of enrollment
- Role of Molina
- Enrollee identification card
- Site and PCP contact information, if already assigned
- Steps and time frame to select a PCP and the auto-assignment process if a selection is not made
- Information on how to change PCP
- How to obtain referrals
- Benefits of preventive healthcare
- Overview of Molina's Population Health Management program
- Molina's Enrollee Handbook
- List of covered services
- Directions on accessing the Web portal and online directory

Molina's Welcome Kit will include information on the benefits of a PCP; that Enrollees can remain with their assigned PCP (if the PCP participates in Molina's network and is appropriate for them); how to select a PCP that will meet their needs; and how to change a PCP if they wish. Enrollees will be able to select and change their PCP at any time by calling our Call Center; online through our Enrollee Web portal (MyMolina.com) or Molina Mobile app; or during a face-to-face encounter with a Molina

employee. Our Welcome Kit will include an explanation that if the Enrollee does not select a PCP, Molina will assign a PCP that best meets their needs. The Welcome Kit will also explain that Enrollees can change PCPs at any time, exceeding the Contract requirement of waiting 90 days after initial assignment. *To make sure Enrollees are satisfied with their PCP, we will not limit the number of times an Enrollee can change PCPs.* Building and maintaining a trusting ongoing relationship will increase preventive care and maximize treatment effectiveness. This also exceeds the Contract, which allows MCOs to limit PCP changes to once a year. These provisions will not apply to Enrollees who are in Molina's PCP lock-in program.

We will also encourage Enrollees to select a PCP if they do not have one during our new Enrollee welcome calls. *As part of our local health plan model, new Enrollee welcome calls will be made by our Kentucky staff from our Louisville office.* If the 834 transaction file we receive from the Department includes the Enrollee's preferred language, we will conduct the welcome call in the Enrollee's preferred language. *We will make at least three attempts to reach the new Enrollee within the first 30 days of receiving notification of a new Enrollee.* During this call, we will welcome them to Molina and we will:

- Verify Enrollee demographic information
- Share information on covered services, Molina programs (such as our Population Health Management program), and value-added services (such as Molina's Healthy Rewards program)
- Encourage a preventive healthcare visit with their PCP within 90 days of enrollment with Molina
- Assist in scheduling the initial PCP and other provider appointments
- Explain the benefits of Molina's Enrollee Web portal and mobile app, and how to access them
- Answer any questions, and address any immediate service needs

During the welcome call, our customer service representative will also educate and encourage Enrollees to receive preventive health services and explain the benefits of establishing a relationship with a PCP. We will assist Enrollees in making the most appropriate PCP selection based on previous or current PCP relationships to promote continuity of care; PCPs of other family members enrolled with Molina; and medical history, language needs, provider location, and other factors that are important to the Enrollee, such as gender of the PCP. If the Enrollee already has an assigned PCP, they have the choice to remain with that PCP, or we will offer them the opportunity to change to another PCP if they wish.



**New Enrollees will also be able to select or change their PCPs at one of six regionally based Molina One-Stop Help Centers.** We will hold new Enrollee orientation sessions at these centers at varying times to accommodate Enrollee availability. We will also provide interpretation services to meet Enrollee needs. In addition to helping Enrollees select or change PCPs, we will demonstrate how to use our Enrollee Web portal and help them register an account; explain how Enrollees can use our mobile app to access services and

information (such as viewing/printing ID cards and changing PCPs), and help them download the app to their personal device; review Molina's Population Health Management program; and answer questions, address concerns, and resolve any barriers to access they may have. We will also take this opportunity to conduct a private Health Risk Assessment and Enrollee Needs Assessment if they have not been completed. All our Community Resource Centers will be compliant with the Americans with Disabilities Act (ADA).

#### Selecting and Changing PCPs Through Molina's Enrollee Web Portal

We will have a secure Enrollee Web portal for our Kentucky Enrollees to access plan benefits and update contact information, as well as change their PCP. We will educate Enrollees on this Web portal through various means, including our new Enrollee Welcome Kit, Enrollee Handbook, and through visits to a Molina One-Stop Help Center. Upon registration, Enrollees can access the secure, HIPAA-compliant Enrollee Web portal 24/7 for personalized health information and reminders, self-service features, and educational resources. Exhibit C.13-1 includes a screenshot of the home page of our Enrollee Web portal.



Exhibit C.13-1. Enrollees Can Change PCPs from Our Enrollee Web Portal

#### Selecting and Changing PCPs Through Molina's Mobile App

Enrollees will be able to change their PCPs through our newly enhanced Molina Mobile app. We will educate Enrollees on the benefits of the mobile app and how to use it through various means, including during visits to a Molina One-Stop Help Center where we will help them download the app to their personal device. After signing in, Enrollees simply tap "Change primary care provider" from the home screen and follow the prompts.

The Molina Mobile app will also provide Enrollees with a host of additional features to help them make meaningful, informed decisions about their health. *Enrollees will be able to view reminders for preventive services (for example, immunizations, cancer screenings, and flu shots), access a "Symptom Checker," and view a list of medications.* 



#### **Additional Supports for Molina Enrollees**

Molina will provide specialized support to all Enrollees in selecting a PCP, including Enrollees who are elderly or disabled receiving SSI and are not dually eligible. This includes:

- Molina One-Stop Help Centers that are ADA compliant to meet the needs of Enrollees with physical disabilities
- Written Enrollee materials in alternative formats such as Braille, audio, or large print upon request; we can also provide audio disks to accommodate our Enrollees with vision impairments or who have low vision
- TTY/TDD and relay services for Enrollees who are deaf or hard of hearing
- Online and printed provider directories that include specialty type (such as geriatrics) and physical accessibility symbols to help Enrollees select a provider that meets their needs. When accessing Molina's online directory, Enrollees will be able to search for providers with wheelchair-accessible offices
- Allowing Enrollees to select a specialty physician as their PCP

## Supporting All Enrollees with Specialized Needs

Molina's field-based staff will meet with Enrollees and assist them with

- Selecting or changing their PCP
- Using their PCP and other providers appropriately
- Understanding covered services and benefits
- Navigating the healthcare system
- Connecting to community-based services
- Meeting face-to-face with one of our regionally based Molina Community Health Workers, nurse practitioners through our Care Connections program, or embedded care managers

Although particularly useful to Enrollees with SSI, our field-based Molina Community Health Workers, nurse practitioners, and embedded care managers will be available to help all Enrollees navigate the healthcare system and advise them on how to use their PCP and when to use urgent and emergency services. They will make sure necessary appointments are scheduled and attended, and that Enrollees understand and are prepared for them.

**Molina Community Health Workers will play an important role in improving health literacy** and helping Enrollees access services appropriately and navigate the healthcare system. They will also connect Enrollees to community-based resources, education, advocacy, and social support. Molina Community Health Workers are longtime members of the community they serve and therefore understand the community's culture, language, and norms. Further, *our Care Connections program will include a team of nurse practitioners who will meet Enrollees in their homes or at mobile or pop-up clinics.* The nurse practitioners will provide face-to-face outreach, education, and wellness and preventive services.

We will also *embed care managers in PCP sites* and other care sites. Our care managers will engage Enrollees and identify needs and barriers, assess Enrollee's understanding of their health, educate Enrollees on their conditions, refer Enrollees to programs, ensure Enrollees understand their PCP visit, and make sure Enrollees understand written information provided at their appointment, such as prescription bottles and appointment slips).

#### Selecting a Specialist as a PCP

We understand that sometimes an Enrollee's healthcare needs are best met by having a specialty physician serve as their PCP. Situations in this category include when an Enrollee has gynecological or obstetrical healthcare needs, a disability or chronic illness, or has been identified as having special healthcare needs.

We will assist Enrollees in this process and facilitate the selection of a network specialist to serve as their PCP that meets their needs and preferences. Molina will contact the specialist and confirm that they agree to serve as the Enrollee's PCP. The specialist must also agree to provide or arrange for all

services provided by our PCPs, including primary and preventive care. Molina sees value in Enrollees receiving primary care from a specialist with whom they are connected and have an established relationship. This increases the likelihood they will receive preventive services and regularly attend appointments. It can also help reduce barriers to care, reduce the number of appointments Enrollees need to attend, and promote continuity of care.

#### SUPPORTING ENROLLEES WHO HAVE SSI AND ARE NOT DUAL ELIGIBLE

Enrollees who have SSI and are not dual eligible will receive all the same support described above, including the process to select a PCP who will meet their needs and preferences. If an Enrollee who has SSI and is not dual eligible does not select a PCP, Molina will assign an appropriate PCP to the Enrollee and notify the Enrollee in writing, including instructions on how they can change PCPs. If we receive a request from the Enrollee to change their PCP within 30 days of the date we assigned them to a PCP, we will make the effective date of the new PCP retroactive to the Enrollee's effective date with Molina. All other requests to change PCPs will be effective immediately.

#### SUPPORTING ENROLLEES WHO ARE UNDER GUARDIANSHIP

We know Enrollees who are in adult guardianship are prone to frequent moves. In accordance with Contract requirements, Molina will use the Enrollee's county of residence to determine PCP selection and assignments. The county of residence will be where the Enrollee is living and will not change due to brief absences of less than one month. When we are notified of a change in county of residence, we will immediately assess whether the Enrollee's current PCP falls within access standards; if not, we will contact the Enrollee/caregiver or representative from the Department for Aging and Independent Living to help select a new PCP. We will honor all requests from the Department for Aging and Independent Living to change PCPs.

As with our other Enrollees, those in adult guardianship may change PCPs at any time. We support Enrollees in adult guardianship in making their own decisions about the care and services they receive with the assistance of their guardian. We will also provide Enrollees with one-on-one support to select their PCP, such as through our field-based Molina Community Health Workers, nurse practitioners, or embedded care managers.

#### SUPPORTING ENROLLEES WHO ARE DUAL ELIGIBILE

Molina's affiliate health plans manage services for more than 60,000 dual eligible Enrollees through the Financial Alignment Duals Demonstration project plan, the most of any MCO in the nation, and more than 41,000 through Medicare Dual Eligible Special Needs Plans. We will leverage tried-and-true processes and best practices to make sure our dual eligible Enrollees' needs are met and coordinated with their Medicare PCP. Since dual eligible Enrollees are not required to select a PCP, they will be excluded from Molina's PCP selection process, including auto-assignment.

We will explain to dual eligible Enrollees that it is optional to have a PCP with Molina; however, because of the value that PCPs offer Enrollees, we will explain the benefits of a PCP and encourage Enrollees to develop an ongoing relationship with a PCP of their choosing.

## b. PCP AUTO-ASSIGNMENT ALGORITHM FOR ENROLLEES WHO DO NOT MAKE A SELECTION

If an Enrollee has not made a voluntary selection of a PCP, Molina will auto assign the Enrollee to a PCP within 24 hours of our receipt of the HIPAA 834 transaction file. Dual eligible Enrollees and Enrollees who are presumptively eligible are not required to have a PCP. Molina's PCP auto-assignment algorithm matches Enrollees to PCPs who best meet their needs through a thoughtful, coordinated, and timely approach.

#### **PCP AUTO-ASSIGNMENT PROCESS**



Upon loading the daily HIPAA 834 transaction file from the Department, we will identify Enrollees who do not have a PCP indicator on the file. Before assigning a PCP, our PCP auto-assignment process will check all available channels for Enrollee PCP selection, such as the Enrollee eligibility and enrollment file, PCP assignment supplemental files, Customer Relationship Management system, interactive voice response system, and Web portal.

If there is no identified PCP, we engage our auto-assignment process. *Our PCP assignment always attempts to reassign an Enrollee to a PCP who has historically provided services to them to promote continuity of care.* If we do not have any information on an Enrollee's historical relationship with a PCP, we start the auto-assignment process. First, we try to keep family members together by assigning the Enrollee to the PCP that also is assigned to the oldest family member that has Molina eligibility. If there is no family member PCP information, we will assign the Enrollee to the closest network PCP within 30 miles or 30 minutes of the Enrollee's residence in accordance with Contract requirements. We will consider travel routes in making assignments and base the assignment on the following Contract requirements:

- The need of children and adolescent Enrollees to be followed by pediatric or adolescent specialists
- Any special medical needs, including pregnancy
- Any language needs made known to Molina
- Area of residence and access to transportation

We will also verify whether the PCP has any age or gender restrictions and confirm they are accepting new Enrollees before assignment. Molina will provide every Enrollee auto-assigned to a PCP a written notice that informs the Enrollee that they have been assigned a PCP along with the PCP's name and office telephone number.

We understand if we assign an Enrollee to a PCP before offering them the ability to self-select a PCP, and we receive a request from the Enrollee for a PCP reassignment within 30 days, the reassignment will be retroactively effective to the date of the Enrollee's assignment to Molina.

Exhibit C.13-2 illustrates our PCP auto-assignment process for Enrollees who meet criteria for having a PCP assigned to them.



Exhibit C.13-2. PCP Auto-Assignment Process

#### **Tracking Data to Confirm Enrollee Assignment**

We generate internal reports at the end of the assignment process to ensure all Enrollees (except for dual eligible Enrollees and Enrollees who are presumptively eligible) are appropriately assigned to a PCP. Our Enrollment Operations team will apply any required manual interventions for PCPs not assigned to Enrollees due to certain exceptions, such as if the location of the Enrollee's address is unknown or we are unable to assign the Enrollee to the PCP selected on the 834 file.

The entire enrollment cycle, including PCP assignment, is ultimately recorded and managed through QNXT, our core integrated healthcare information management system, which integrates all Enrollee information to help identify a PCP that can best meet the Enrollee's needs.

We will submit quarterly reports to the Department on the number of eligible individuals who are assigned a PCP in accordance with Contract requirements.

#### **ENSURING CONTINUITY OF CARE**

Molina recognizes the importance of continuity of care, especially with the relationship Enrollees have with their PCP. During the self-selection and auto-assignment processes, one of our first activities is to determine if an Enrollee is currently connected to a PCP. We will encourage Enrollees to remain with their PCP as long as the Enrollee is satisfied with the PCP and they believe the PCP is meeting their needs. While Molina will maintain a comprehensive network of PCPs, we recognize there will be

instances where an Enrollee is connected with a PCP who is not in Molina's network. In these cases, Molina will work with the provider and invite them to join our network, so the Enrollee can continue to receive services from them. If the provider does not join our network, then Molina offers various support methods, as mentioned in the response to subpart C.13.a., to aid the Enrollee in selecting a new PCP. Once a Molina network PCP is selected, either by self-selection or auto-assignment, our activities to ensure a smooth transition to the new PCP will include

- Honoring existing prior authorizations, including those from out-of-network providers, for up to six months or until there is a change in condition or Enrollee reassessment
- Assisting Enrollees with scheduling appointments with the new PCP

#### c. APPROACH FOR PROCESSING PROVIDER CHANGE REQUESTS

We will offer Enrollees various methods to change PCPs, so they can choose the method that best suits their needs. Enrollees can change their PCP by writing Molina, telephoning our Call Center, or during a face-to-face encounter with our staff. In addition to these methods required by the Contract, Molina will also allow Enrollees to change PCPs by logging into our Enrollee Web portal (MyMolina.com) or using our Enrollee mobile app. *To facilitate prompt access to care with the PCP of their choice, we will make PCP changes effective immediately.* 

Molina will maintain comprehensive written policies and procedures to allow Enrollees to change PCPs. This includes the following changes:

- Upon Enrollee request after initial assignment
- For cause
- When an Enrollee regains eligibility
- When the provider is terminated from Molina's provider network
- Upon provider request

We understand that Enrollees have the right to change their PCP 90 days after the initial assignment and once a year regardless of reason. *Molina will allow Enrollees to change PCPs at any time and for any reason, exceeding the minimum Contract requirement.* This will ensure Enrollees are matched with a PCP who will meet their needs and preferences and drive improved health outcomes. This will not apply to Enrollees who are in a lock-in program.

#### c.i. UPON ENROLLEE REQUEST AFTER INITIAL ASSIGNMENT

As noted above, Enrollees will have various methods to change PCPs. If the Enrollee calls our Kentuckybased toll-free Call Center, a customer service representative will assist them in selecting a new PCP. For callers whose primary language is not English, we offer over-the-phone interpretation. TTY/TDD services are also available for callers who are deaf or hard of hearing.

Our Call Center customer service representatives will first confirm that the request to change PCPs is not related to a grievance. If it is related to a grievance, the customer service representative will gather the appropriate information in accordance with Molina's grievance policies and procedures and assist them with the PCP change if they would still like to proceed. We will process Enrollee requests to change PCPs using the following steps:

- 1. Educate the Enrollee that the PCP change will become effective immediately to meet their needs and preferences
- 2. Verify the following information with the Enrollee
  - a. The name of the PCP the Enrollee would like to be assigned to
  - b. Any specific provider criteria, such as gender, language, specialty, and/or distance preferences)

- 3. Query the PCP's status, including participation in Molina's network, panel status, and age restrictions. If the PCP is not in Molina's network, accepting new Enrollees, or is not qualified to treat Enrollee needs (for example, the Enrollee is an adult and is requesting a pediatrician), we will inform the Enrollee of this and help them select a network PCP that might better meet their needs
- 4. Select the Enrollee's chosen PCP in our Customer Relationship Management / QNXT system
- 5. Explain that a new Enrollee ID card will be issued and mailed to them. Enrollees can also print a current ID card directly from their MyMolina account by registering through www.molinahealthcare.com and through our Molina Mobile app
- 6. Assist with any further questions or concerns the Enrollee has related to the PCP assignment or otherwise
- 7. Document any additional call notes, as appropriate, in the system. For instance, this may include providing information about benefits and assisting with transportation
- 8. Restate expectations with the Enrollee, confirm actions taken, and close the call

#### c.ii. FOR CAUSE

Molina understands Enrollees can change their PCP at any time for good cause. Good cause includes when the Enrollee was denied access to needed medical services, received poor quality of care, or does not have access to providers qualified to treat his or her healthcare needs.

Exceeding Contract requirements, Molina will allow Enrollees to change PCPs at any time, without restrictions on the number of changes, provided they are not in Molina's PCP lock-in program. To facilitate prompt access to care, we will make PCP changes effective immediately, exceeding minimum Contract requirements to have the assignment occur no later than the first day of the second month following the month of the request.

Molina will monitor Enrollee grievances about PCPs, as we do with all our Enrollee grievances. Enrollee grievances related to a potential quality of care or service will be promptly forwarded to our Quality Improvement and Provider Services departments, respectively. Each department will follow written protocols, including provider outreach, as appropriate, to address the concern.

#### c.iii. WHEN AN ENROLLEE REGAINS ELIGIBILITY

When an Enrollee regains eligibility and is assigned back to Molina, we will first look for a PCP indicator on the HIPAA 834 transaction file. If the enrollment file does not include an indicator of a PCP, we will re-assign the Enrollee to the last PCP they were assigned to when enrolled with Molina (provided the Enrollee had been enrolled with Molina during the last 12 months). *We will assign Enrollees to their historical PCP, even if the PCP's panel is closed, to honor their previous preference and ensure continuity of care.* 

We will assign Enrollees to a new PCP, using our auto-assignment process described in our response to subpart C.13.b., in these instances:

- The historical PCP no longer participates in Molina's provider network.
- The Enrollee's residence has changed such that the new address and historical PCP would violate the accessibility standards defined in Attachment C, Draft Medicaid Managed Care Contract and Appendices, Section 28.4, Provider Network Access and Adequacy.

#### c.iv. WHEN THE PROVIDER IS TERMINATED FROM MOLINA'S NETWORK

Molina will make sure Enrollees transition smoothly to a new PCP when their PCP is terminated from our network. We will terminate any PCP who:

- Engages in an activity that violates any law or regulation that results in suspension, termination, or exclusion from the Medicare, Medicaid, or KCHIP programs
- Has a license, certification, or accreditation terminated, revoked, or suspended

- Has medical staff privileges at any hospital terminated, revoked, or suspended
- Engages in behavior that is a danger to the health, safety, or welfare of Enrollees

We understand the Department reserves the right to direct Molina to terminate or modify any PCP agreement when the Department determines it to be in the best interest of the Commonwealth.

Upon notice of a PCP's termination from our network, our Enrollment team will query QNXT, our core system application, to identify Enrollees who are assigned to the PCP and those who have regularly used the services of the PCP. We will mail Enrollees written notice of a PCP's termination within:

- Fifteen days of the effective date of a PCP's voluntary termination, exceeding the Contract requirement of 30 days
- Fifteen days of the effective date of a PCP's involuntary termination

The notice will include information on how to select a new PCP; how Molina will assist the Enrollee in selecting a new PCP; and our auto-assignment process if they do not select one.

Unless a PCP is terminated for cause or upon direction by the Department, we will allow Enrollees to continue an ongoing course of treatment from the PCP for up to 60 calendar days from the date they are notified of a PCP's termination or pending termination or for up to 60 calendar days from the date of the termination, whichever is greater. We will extend this continuity of care period when clinically appropriate. Moreover, we employ single case agreements with non-participating providers to ensure continuity of access to care while we contract with the provider. Our care management software is configured to support continuity of care requirements, including alerts to notify care managers of outstanding PCP assignment needs and alerts if regular appointments or necessary lab tests are missed or maintenance prescriptions are not filled that may indicate a need for intervention.

Molina will terminate PCPs from our provider network in accordance with the terms and conditions detailed in Attachment C, Draft Medicaid Managed Care Contract and Appendices, Section 28.10, Termination of Network Providers. We will provide timely and complete notice to the Department according to Contract requirements.

#### c.v. UPON PCP REQUEST

We understand PCPs have a right to request an Enrollee's disenrollment from their Molina panel and be re-assigned to another PCP under the circumstances detailed in Section 23.6 of the Draft Contract and that Molina has the authority to approve all transfers. Our new provider orientation and Provider Manual will include an explanation of this right, and we will make the request process available to any provider that chooses to exercise it.

To initiate an Enrollee's disenrollment, PCPs must submit a written request to Molina. The request must include the requesting PCP's name and contact information, Enrollee's name and ID number, and an explanation of the reason for the request. Molina will send the PCP written acknowledgment of our receipt of the request. From the time of the request to disenroll an Enrollee from the PCP's panel and until the new PCP can serve the Enrollee, the initial PCP must continue to serve the Enrollee, barring any ethical or legal issues.

Molina monitors Enrollee grievances to identify trends of PCPs disenrolling them from their panel. If we identify a trend, their assigned provider services representative will reach out to the provider to resolve any issues within Molina's control that are causing the dis-enrollments, so we can support the PCP in maintaining positive, ongoing relationships with Enrollees.

Once an Enrollee selects or is assigned to a new PCP, our Provider Services team will contact the new and previous PCPs to ensure continuity of care and facilitate a transfer of medical records, as indicated.

# d. IDENTIFYING, OUTREACHING TO, AND EDUCATING ENROLLEES WHO DO NOT RECEIVE SERVICES FROM THEIR PCP WITHIN ONE YEAR

We help our Enrollees to establish solid relationships with their PCPs and will encourage Enrollees, beginning with their initial enrollment, to seek services from their PCP. In fact, many of our value-added services are designed to incentivize and reward Enrollees to seek preventive care; however, we will employ measures to identify, outreach to, and educate Enrollees who have not received services from their PCP within their first year of enrollment with their PCP.

Molina's Provider Engagement Team will run reports to identify Enrollees who have not received preventive services from their PCP. This will identify Enrollees who have not received services from their PCP within one year of enrollment with the PCP, as well as those Enrollees with HEDIS gaps in care. This information will be available to PCPs through our provider Web portal and upon request. We will provide this information to the PCPs and Molina staff to conduct targeted outreach and engagement. Our Provider Engagement Team will personally reach out to PCPs and offer to assist them in getting the Enrollee in for a visit. *All PCPs will also be able to run their own HEDIS missed services reports for their assigned Enrollees through Molina's provider Web portal.* 

Molina provides the following information and support to help Enrollees obtain PCP services, including:

- Making *outbound calls to Enrollees* to educate them on the importance of establishing a relationship with their PCP and encouraging them to make an appointment. As indicated, we will offer to help them make an appointment.
- Hosting *Molina Days* to increase provision of preventive care services to Enrollees in their communities. Molina Days will be community-based mini-wellness fairs at provider offices to encourage Enrollees to come in for well visits, immunizations, and other preventive services.
- *Reinforcing the importance of preventive healthcare services through our interactive voice response* system that provides useful preventive healthcare tips and information.
- Sending *targeted reminder mailings* to Enrollees who are not on schedule for preventive health or chronic care screenings and tests.
- Using *Molina Inbound Call Alerts* to identify Enrollees who have missed an important screening or preventive service. An alert identifying a gap in preventive services will be attached to Enrollee records in our system and viewable to all staff (including care managers and Call Center customer service representatives) with valid access to Enrollee information. When on a call with an Enrollee, our staff will see the alert and remind the Enrollee (or their provider) that the Enrollee is due or overdue for a service and offer to assist them with scheduling a PCP appointment.

- Conducting face-to-face outreach using our field-based Molina Community Health Workers to encourage PCP visits as well as improve health outcomes and drive appropriate utilization of services, including EDs, by providing social support and linking Enrollees with resources. Molina Community Health Workers will also review Enrollees' overall living situations to determine the impact of social determinants of health as well as possible remediation of those factors. They will work in varied environments, visiting Enrollees in their homes and accompanying them to PCP and specialist appointments.
- Conducting visits through our Care Connections nurse practitioners in Enrollee homes or at mobile or pop-up clinics. We will have a Care Connections team of nurse practitioners in Kentucky that will provide face-to-face outreach, education, and wellness and preventive services. Services will include conducting annual physical exams; reviewing medical history,

## Encouraging PCP Visits Through Healthy Rewards

Molina's Healthy Rewards program, a value-added service, will provide gift cards for Enrollees who attend

- Adult annual well visits
- Well-child visits
- Annual preventive dental visits
- Annual diabetes exams
- Annual chlamydia screenings
- Prenatal and postpartum visits
- Follow-up PCP visits

medications, and social determinants of health; conducting assessments of pain and functional status; assessing Enrollee psychosocial well-being; and identifying and closing gaps in care, such as A1C testing and diabetic retinal exams for Enrollees with diabetes.

- *Embedding Molina care managers in PCP sites* and other key care sites to engage Enrollees and provide education and assistance to improve health literacy and health outcomes. This will prove especially beneficial to practices with high Enrollee admission/readmission rates, high rates of healthcare disparities, low rates of referral to Molina care management, and high rates of Enrollees with chronic conditions. Molina care managers will engage actively with Enrollees, providers, and provider office staff to identify and address Enrollee needs and barriers, including their understanding of their health and ability to navigate the healthcare system. Care managers will educate Enrollees on their health conditions, refer Enrollees to programs (e.g., diabetes disease management), ensure Enrollees' understanding of their provider visits and next steps, and make sure Enrollees understand information provided to them (e.g., prescription bottles and appointment slips).
- *Educating Enrollees on how to use Molina's Mobile app, which provides health tips,* including reminders for health screenings and prevention services, such as immunizations and physicals. It also provides easy access to Enrollee care plans and assessments, allowing Enrollees to keep up to date on their needed screenings and treatments.
- *Engaging Enrollees through social media* to quickly communicate with a specific audience across multiple platforms with a targeted message. We also post helpful health and wellness articles and quick health tips from trusted sources. We are active on the following platforms: Facebook, Twitter, Instagram, YouTube, Pinterest, LinkedIn, and Yelp.

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