

Contra Costa Health Plan

Utilization Management

Title: Processing Impacted Specialty Referrals

Policy #: UM 15.047

Origin Date: 11/02/07, 11/21/07, 7/7/10, 2/7/13

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Revised:

Reviewed: Lynn Soloway RN, Auth & UM Director

Reviewed: 5/2015, 3/2016, 01/2017, 01/2018, 01/2019

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Presented in UM Committee: 5/2022, 06/2024

Applies to:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> All | <input type="checkbox"/> BHC/HCI/MCE | <input checked="" type="checkbox"/> Commercial | <input checked="" type="checkbox"/> Healthy Families |
| <input checked="" type="checkbox"/> Medi-Cal | <input checked="" type="checkbox"/> Medicare | <input type="checkbox"/> N/A | <input type="checkbox"/> Other State Sponsored |

Regulatory/Accreditation:

- | | | | |
|------------------------------|--------------------------------|-------------------------------|--------------------------------|
| <input type="checkbox"/> CMS | <input type="checkbox"/> DHCS | <input type="checkbox"/> DMHC | <input type="checkbox"/> MRMIB |
| <input type="checkbox"/> N/A | <input type="checkbox"/> Other | <input type="checkbox"/> URAC | |

Units:

- | | | |
|--|---|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Advice Nurses | <input type="checkbox"/> All Staff |
| <input type="checkbox"/> Business Services | <input checked="" type="checkbox"/> Authorization/CM/UM | <input type="checkbox"/> Health Ed/Cultural Ling. |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Member Services | <input type="checkbox"/> Planning, Survey, Reg Affairs |
| <input type="checkbox"/> Provider Affairs | <input type="checkbox"/> QM/QI | |

OPS Council Approval Date & Sign Off

POLICY & PURPOSE

In an effort to provide members with timely access to specialty services, Contra Costa Health Plan (CCHP) developed a method to identify and process requests for specialty services that have limited availability (aka “impacted”) in either the Contra Costa Regional Medical Center (CCRMC) Network or Community Provider Network (CPN). Upon identification of members who are waiting beyond a specific timeframe for an initial specialty appointment, CCHP will attempt to facilitate the referral to another contracted provider. In general, CCRMC is responsible for notifying CCHP when and which specialty services in the CCRMC Network are impacted. Likewise, CPN providers are responsible for notifying CCHP when their services are impacted.

PROCEDURE

If CCHP is notified that any particular specialist is not able to provide timely access as required by DHCS and DMHC guidelines, CCHP shall work to ensure that patient receives timely access to the needed service. The HPAR shall work with the nurse responsible to call contracted CPN providers to find the patient a specialist who can see the patient within the regulatory requirements to meet timely access requirements. If the UM team has trouble finding a provider after 3 documented attempts, the UM team may reach out to Provider Relations for further assistance.

For Impacted CCRMC Specialty Services

When specialty care services at CCRMC are impacted, the specialty care queue reviewer at CCRMC will flip Medi-Cal members from internal to external and choose a specialty care provider. Commercial A, Commercial IHSS, and other Commercial patients (outside of Commercial B) must stay at CCRMC. Thus, the specialty care reviewers will assess capacity and flip accordingly. CCHP will then review and process these referrals to the selected CPN provider. If not CPN provider is chosen, then CCHP will process to all contracted, nontertiary CPN providers in the member’s network based on the member’s insurance.

For Impacted CPN Specialty Services

For impacted CPN specialty services, CCRMC can accommodate some impacted CPN specialty services in the CCRMC Network.

On a regular basis, the Specialty Champion or Director of Ambulatory Care will inform UM and Provider Relations which specialty services can be accommodated in the CCRMC Network. If there is capacity for a particular specialty, the UM staff will direct the referral, including demographic information on the member and any pertinent clinical information, to the appropriate CCRMC Specialty workqueue.

When both CCRMC and CPN Specialty Services are Impacted

If both CCRMC and CPN do not have capacity, Provider Relations shall work to find additional providers who will either accept Letters of Agreement or contract to increase the capacity in that specialty area. UM will work with Provider Relations to leverage all available providers, including tertiary care providers, to guarantee timely access.

Summary of Processing Timelines for RMCN to CPN Referrals and Responsible Party

Task	Responsible Party	Timeframe
1. Identify CCRMC impacted specialty clinic(s) via workqueue	Designated Specialty Champion	Ongoing as indicated.
2. Identify CPN impacted specialist	CPN Specialist	Ongoing as indicated
3. Identify CCRMC or CPN specialists that can accept referrals if there is receipt of a complaint of lack of timely access.	UM HPAR and Nurse, with assistance from Provider Relations, as needed	Within 1 business day of CCHP receiving notice of lack of timely access for a particular member. Member must receive appointment within regulatory requirements.