Managed Care Operations Memorandum  
Special Needs  
MC OPS # HCALL - 07/2009-016

Date: August 1, 2009

Subject: Implementation of specified requirements for the transition of medically fragile young adults from Pediatric to Adult PCPs

To: HealthChoices Physical Health Managed Care Organizations (PH-MCO) - All

From: Joan Morgan, Acting Director, Bureau of Managed Care Operations

Purpose:
This OPS Memo provides guidance to the PH-MCOs for transitioning medically fragile young adults from pediatric to adult Primary Care Providers (PCPs).

Background:
It has been brought to the attention of the Department of Public Welfare (DPW) that in some cases young adults identified as medically fragile who are receiving extensive services under Early and Periodic, Screening, Diagnosis and Treatment (EPSDT), under the direction of a pediatrician or a pediatric specialist, are having difficulty finding an adult provider to direct and manage ongoing medical care upon reaching the member's 21st birthday. PH-MCOs are required by contract to assist any member when needed in locating and selecting a PCP; however, because it is often more difficult for some medically fragile members under the age of 21 to find an appropriate adult PCP, PH-MCOs must take a lead in assisting members and or their guardians in locating and selecting a qualified adult PCP in order to make the transition from a pediatric provider to an adult provider seamless and mutually acceptable to both the member and provider.

Discussion:
The DPW is issuing the following guidelines to all PH-MCOs to ensure a seamless transition from pediatric to adult providers for medically fragile members under the age of 21.

1. PH-MCO is responsible for identifying all medically fragile members who are receiving primary care services from a pediatric provider by at least the member’s 18th birthday.

2. PH-MCO is responsible for outreaching to medically fragile members and or the member’s guardian to assist in identifying a qualified adult provider to transition care from a pediatrician to an adult provider.

3. Members who cannot be transitioned by their 21st birthday will be required to remain in active case management until the transition is accomplished.

4. PH-MCOs are required to develop payment mechanisms to enable both pediatric and adult care
providers to receive payment for medically necessary services provided concurrently during the transition process.

5. PH-MCOs will be required to submit a quarterly operational report to the Department identifying the number of medically fragile members over 21 who are currently under the care of a pediatrician. The format and instructions will be communicated through an operations memo at a future date.

Next Steps:

This information must be provided to all appropriate staff including Medical Directors, Special Needs Coordinators and Utilization Management Directors.

Obsolete:

This MC OPS Memo will remain in effect until further notice.

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Page last updated 8/13/2009