

**PIMA HEALTH SYSTEM
STANDARD AND PROCEDURE**

SUBJECT: Provider Site Visit	Provider Services
APPLICABLE TO: Acute Care, LTC-Institutional, HCBS, CSS	
EFFECTIVE DATE: 01/10 APPROVED BY: Patricia Alvarez Hurley by Signature	
SUPERSEDES: 4/98, 1/01, 4/02, 5/03, 10/03, 10/04, 10/05, 03/07, 05/09, 07/09	PS-I-0011

I. STATEMENT OF PURPOSE:

To outline Pima Health System (PHS) site visit evaluation procedures and ensure effective provider interaction with the intent of increasing provider communication, and compliance with PHS and AHCCCS Standards and Procedures.

II. STANDARD:

Provider Services and designated PHS associates shall conduct site visits to subcontracted providers including primary care providers, specialists, clinics and home and community based services. Provider site visits and any related correspondence shall be documented and filed or referenced in the designated Provider Services file.

III. PROCEDURES:

A. PHS site visit schedule:

- 1. PHS Acute Care and LTC as applicable:** Routine site visits shall be scheduled at least every two (2) years.
 - a.** The initial site visit will be conducted within ninety (90) days of the contract effective date and thereafter at least once every two (2) years.
 - b.** The initial site visit for Primary Care, OB/Gyn and dental contracts shall include a medical record and facility review and will be performed prior to the completion of the providers credentialing process.

- 2. Adult Foster Care (AFC):** Annual unannounced home inspections for regulatory compliance, annual home visits for monitoring compliance with the Pima County Agreement & client satisfaction, and home visits, as needed during the year by the Assisted Living Facility program staff. Case Management staff are in the home every ninety (90) days to assess the needs of the ALTCS members living in the home.

3. **Assisted Living Homes (ALH):** Annual home visits for monitoring compliance with the Pima County Agreement & client satisfaction, and home visits, as needed through-out the year by the Assisted Living Facility program staff. Case Management staff are in the home every ninety (90) days to assess the needs of the ALTCS members living in the home.
 4. **Assisted Living Centers (ALC's):** Annual on-site visits for monitoring compliance with the Pima County Agreement & client satisfaction, and on-site visits, as needed throughout the year by the Assisted Living Facility program staff. Case Management staff assess the ALTCS members every ninety (90) days on-site.
 5. **Attendant Care (ATT):** Monitored on site every month for the first three (3) months, and every ninety (90) days thereafter. Additional visits are made as needed. Case managers monitor the clients in the ATT program every ninety (90) days.
 6. **Community Services System (CSS):** Annual monitoring programmatic, financial and case file review.
- B.** Site visits will usually be scheduled at least one week prior to the visit.
- C.** Site visit documentation, discussion, and evaluation items:
1. **Acute Care and LTC** as applicable: Refer to **Exhibit A** site visit form and reference PHS Standard and Procedure **QM-I-A, Credentialing/Recredentialing** for PHS Quality Management site review forms.
 2. **AFC, ALH and ALC:** Refer to PHS Standard and Procedure, **ALF-I-0005, Compliance Monitoring Adult Foster Care Homes & ALF-II-0002, Compliance Monitoring Assisted Living Home, Assisted Living Center.**
 3. **CSS:** Refer to PHS Standard and Procedure, **PS-I-0027, Subcontractor Monitoring.**
 4. Appointment standards and wait time (as displayed on Exhibit A Site Visit form) are reviewed with medical providers at each site visit.
 5. All items on the site visit form (Exhibit A) are reviewed with the providers at each visit as applicable.
- D.** Provider issues and concerns brought up during the site visit shall be followed up promptly. Results shall be communicated to the Provider, either verbally or in writing, as soon as possible but no later than 30 days from the visit. For provider issues in AFC and ACH (Refer to PHS Standard and Procedure, **ALF-III-0005, Reporting and Investigation of Concerns Involving Adult Foster Care Homes, Assisted Living Homes, or Assisted Living Centers**).

- E.** Site visits for Acute Care and LTC as applicable entered and tracked in the Provider Services database. Site visits in Assisted Living Facilities (ALF) are entered into the provider file case note summary. AFC license expirations are tracked in the ALF tracking database. Site visits for CSS are filed in the CSS provider file and tracked in the CSS Long Term Care database.
- F.** If site visits cannot be scheduled by Provider Services Representatives, staff will mail a packet of updated PHS information to the provider with a cover letter advising them to review and call with any questions or concerns. A copy of the letter will be filed in the contract file and site visit binder.
- G.** Site visits are not required for providers whose corporate office or practice site is outside the service area and for providers who do not have an office site (e.g., hospital based and mobile service providers, etc.). Visits may be waived or postponed by the Provider Services Manager if the provider has very limited utilization by PHS. Provider Representatives are available by phone or email with these providers. A special meeting with the provider can be arranged if necessary.
- H.** Site visits are completed at the time of monitoring visits performed with home and community based service providers in accordance with the established monitoring schedule (refer to Standard and Procedure PS-I-0027, Subcontractor Monitoring).
- I.** Site visits with contracted nursing homes are conducted by the PHS Quality Management Department (refer to Standard and Procedure QM-V-A, Quality Management Site Review).

EXHIBIT A

Initial Provider Orientation/Training

Ongoing Provider Site Visit

PIMA HEALTH SYSTEM PROVIDER SERVICES PROVIDER SITE VISIT REPORT

PROVIDER NAME: _____

SITE ADDRESS: _____

TELEPHONE: _____

DATE OF VISIT: _____

PROVIDER REPRESENTATIVE: _____

IN ATTENDANCE: _____

PROVIDER ISSUES	CHECK IF REVIEWED	COMMENTS	ACTION
PHS Overview		Case Management program info _____	
ALTCS vs. Ambulatory		Just the Facts	
Referral Forms and Procedures		Delivered referral forms _____	
- Specialty Referrals		Medical Supplies order form _____ (LTC)	
Provider Listings		Delivered PPL dated _____	
Prior Authorization		Prior Auth Staff List	
		PA Requirements	
Provider Assistance Forms		Delivered Forms _____	
PCP		EPSDT forms _____	
OB Care			
DENTAL		CHILDREN - EPSDT -	
		Adult -Emergent or Medical need	
Medical Record Keeping Practices		Evidence that charts are organized and orderly	
Chart Started _____		Face Sheet _____	
PCP/Provider Orders _____		Applicable diagnostic/evals done _____	
Plan of Treatment _____		Summary of progress towards goals _____	
Date & Description of service provided _____		Signature / initials of provider of service _____	
Medical Record Security		Maintained in secure area _____	
Electronic Medical Records		Procedures to preserve and store data _____	
Facility Review		Handicapped parking available _____	
(New PCP, OB/GYN, & Dentist Site)		Handicapped access: doors, rooms, bathrooms _____	
		Office is clean/orderly _____	
		Lighting and ventilation adequate _____	
		Waiting room capacity adequate _____	
		Routine appt's no more than 5 per hour _____	
Advanced Directives		Left a copy of AD booklet _____	
Behavioral Health		BH Coord info sheet _____	
		Discussed family involvement in TX w/ minors and w/ adults with their permission. Need to identify member strengths, needs and decision making in service planning.	
Bilingual Staff		Discussed LEP services	
- Physician		PCP language(s)	
- Nursing Personnel		Office staff languages	
- Office Support			
Provider Survey		Left a blank survey _____	
Transportation		Emergent/Non-Emergent	
Eligibility Verification Process		On-Line _____ Telephonic _____	
		PCP Panel Inquiry handout _____	

PROVIDER ISSUES	REVIEWED	COMMENTS	ACTION
Electronic Billing/EFT		Already billing with EDI _____	
Billing/Payment Issues (e.g., accuracy of coding, co-insurance amounts)			
Provider Manual		Manual _____ Discuss/Refer to PHS Website _____ Contact person for updates _____	
Information - Member Handbooks Newsletters-		LTC/Ambulatory provider & member	
Appointment Standards		Appt Stand Monitoring (see below) PCP: ____ Emergency w/in same day. ____ UC w/in 2 days. ____ Routine w/in 21 days. Maternity: ____ 1st Tri w/in 14 days. ____ 2nd Tri w/in 7 days. ____ 3rd Tri w/in 3 days. ____ High Risk w/in 3 days of Identification or immediately if emergent Specialty: ____ Emergency w/in 24 hrs. ____ UC w/in 3 days. ____ Routine w/in 45 days.	
Office Wait Time		Wait Time noted _____ PCP & Specialist: ____ Wait Time does not exceed 45 minutes	
Non-Discriminatory Policy			
Formulary/Pharmacies Available		Formulary auth form _____ Handout on website formulary _____	
Minority/Women Owned Business		If yes, report to Deanna _____	
Insurance - Prof. Liability (Org Cred) - Commercial		Verified with contracts prior to visit _____ Obtained updated copies _____	
License - state &/or federal		Verified with contract prior to visit Obtained updated copy _____	
Medicare Cert. (Org Cred)		Verified with contracts prior to visit _____	
Accreditation (Org Cred)		Obtained updated copies _____	
Provider Credentialing		Reviewed list of affiliated MDs, etc. _____	
Provider Registration - National Provider ID (NPI) - Provider Panel Update		Obtain Copies of NPI's _____ PCP Panel Inquiry handout _____	
Fraud and Abuse - Members - Providers			
HIPPA Review		Observe waiting area, staff discussions, fax, medical records area, and office area	
Key Phone # Listing		Forms Delivered _____	
ADA			
Marketing Activities			
Corporate Compliance Updates		Compliance Info Delivered _____ False Claims Act Info Delivered _____	
Cultural Competency			

Additional Training

____ Accepted

____ Declined

Updated information to be sent to: _____.

Written follow-up mailed to Provider on: _____.

Comments entered in computer on _____, by _____.