


SUBJECT: PCP Selection Criteria	
BUSINESS OWNER: Quality Improvement	Page 1 of 4
APPROVED BY: Accreditation Team  <u>Joshua Plavin, MD (Dec 8, 2021 07:14 EST)</u> <hr/> Joshua Plavin, MD, MPH, MBA Vice President and Chief Medical Officer	Approved by: Accreditation Team 11/15/2021
	Effective: 01/15/2013
	Revised: 10/2019, 3/2021, 11/2021
	Next Review Date: 11/2023
	Applies To: All Lines of Business
REGULATORY/ACCREDITATION LINKS: 2022 NCQA HPA Standards and Guidelines NET 2A, NET 5A-B	
POLICY LINKS: Accessibility of Services and Providers Administrative Standards Practitioner Credentialing Policy Clinical Practice Guidelines	

1. Policy

A primary care provider (PCP) is a health care provider who, within that provider's scope of practice as defined under relevant state licensing law, provides primary care services, and who is designated as a primary care provider by a managed care organization.

Primary care services include services provided by providers specifically trained for and skilled in first-contact and continuing care for persons with signs, symptoms, or health conditions, not limited by problem origin (biological, behavioral or social), organ system or diagnosis. Primary care services include health promotion, disease prevention, health maintenance, counseling, patient education, care planning and the diagnosis and treatment of acute and chronic illnesses.

Blue Cross and Blue Shield of Vermont (Blue Cross) presents the primary care provider selection criteria as an upfront guide to help providers understand the Blue Cross requirements for contracting to hold a panel of Blue Cross primary care patients and Blue Cross's expectations

when functioning as a PCP with Blue Cross members. Blue Cross uses this policy when considering provider applications for admittance and continuation in the network as a PCP. Blue Cross also uses this information to inform the resolution of member complaints received by Blue Cross about providers. This policy enumerates the general qualifications, responsibilities and expectations of clinicians contracted to provide primary care services to Blue Cross members. Those providers contracted and participating as PCPs in the Blue Cross network prior to January 15, 2013 are exempt from these criteria while maintaining their credentialed status with Blue Cross.

2. Scope

This policy affects all providers applying as PCPs in the Blue Cross network. The criteria apply to applicants with the following degree-types:

- Medical Doctor (MD)
- Doctor of Osteopathy (DO)
- Naturopathic Doctor (ND)
- Advanced Practice Registered Nurse (APRN)
- Physician Assistant (PA)

3. Degree-Specific Qualifications

- a. Medical Doctors and Doctors of Osteopathy:** MDs and DOs must have earned board certification or completed a residency program in one of the following disciplines in order to practice as a PCP in the Blue Cross network: family medicine, internal medicine, pediatrics or geriatrics.
 - b. Naturopathic Doctors:** The nature and content of an ND's education and training qualify this practitioner to function as a PCP. Successful completion of the licensing exam and credentialing process make NDs eligible to apply and contract as a PCP within the Blue Cross network.
 - c. Advanced Practice Registered Nurses (APRNs):** APRN means a licensed registered nurse authorized to practice in the applicable state who, because of specialized education and experience is endorsed to perform acts of medical diagnosis and to prescribe medical, therapeutic or corrective measures under administrative rules adopted by the board in the applicable state. Blue Cross will approve APRN's to be PCPs in the Blue Cross network if their education, experience, training, and resources are sufficient to safely and effectively perform PCP care to Blue Cross members. APRNs permitted to hold a primary care patient panel in the network must have certification in one of the following areas: adult nurse practitioner (ANP), family nurse practitioner (FNP), nurse practitioner (NP), gerontological nurse practitioner (GNP) or pediatric nurse practitioner (PNP). Blue Cross will consider APRNs with training in other specialties to practice within the network as a PCP under certain circumstances. Member needs and provider training will be considered when making the decision.
- 4. Physician Assistants (PAs):** PAs must have a "practice agreement" in place with a MD or DO, in accordance with Vermont State law (Title 26: Chapter 31). Blue Cross does not accept practice agreements in which the PA employs the MD or DO and has a business relationship with the MD or DO. The relationship between the PA and MD or DO must be free of any conflicts of interest. Blue Cross requires full-disclosure of any employment relationships involved upon the Blue Cross request. In the case of a PA working independently (i.e., not within the same practice as the MD/DO with whom the PA has a practice agreement), Blue

Cross will require the PA to submit, at the time of enrollment, the name of the MD or DO with whom the PA has a practice agreement.

5. PCP Responsibilities and Expectations

- a. **Accepting New Patients:** PCPs cannot hold members liable for any costs associated with provider pre-screening of members as an approach to practice management. PCPs shall accept as new patients Blue Cross Members who select or are appropriately referred to Practice Group, and shall continue to treat current patients should they become Blue Cross Members, unless PCP provides Plan with sixty (60) days prior written notice that the practice or an individual PCP is unable to accept new patients. A PCP practice may not close their practice to Blue Cross Members unless the practice is closed to all new patients. When providers have concerns related to successfully caring for a member, the provider may set clear boundaries related to the care they will provide. Providers should facilitate member referrals for the care they are unable to provide to members.
- b. **Participation in the Directory:** Blue Cross requires all PCPs to participate in the Blue Cross provider directory. The directory indicates that a provider acts in a PCP capacity with Blue Cross members. The directory also indicates if the PCP currently accepts new patients onto their primary care panel. Provider's participating under the Veteran's Administration do not participate in the directory.
- c. **Clinical Practice Guidelines:** Blue Cross adopts nationally recognized clinical practice guidelines related to its quality improvement projects and requires providers to follow them. These guidelines represent the scientific basis on which Blue Cross assesses PCP activities and outcomes. Please refer to Blue Cross's *Clinical Practice Guidelines* policy for more details. Providers can access these guidelines electronically via the provider portal or request paper copies from the Blue Cross.
- d. **Quality Management:** Blue Cross expects a PCP to be "specifically trained for and skilled in comprehensive first contact and continuing care for persons with any sign, symptom, or health condition not limited by problem origin (biological, behavioral or social), organ system or diagnosis [American Academy of Family Practitioners (AAFP), 2011]". Blue Cross requires all PCPs to meet these qualifications in order to fulfill this purpose:
 - i. Provider must complete the Blue Cross credentialing process for successful admission into the Blue Cross provider network. Please refer to the Blue Cross *Practitioner Credentialing Policy*.
 - ii. Provider must have some training and experience in family practice, internal medicine or pediatric medicine.
 - iii. Provider must have 24-hour on-call coverage, which cannot be an answering machine directing patients to the emergency room. Providers can find Blue Cross required standards for afterhours care in the *Accessibility of Services and Provider Administrative Service Standards* policy.
 - iv. Provider must generally practice a minimum of three days or 24 hours per week.
 - v. Provider must have access to the provision of hospital care for their patients beyond emergency room use. Any provider who does not possess direct admitting privileges to a network hospital must deliver proof of an admitting agreement made with a practitioner who maintains admitting privileges.
 - vi. Blue Cross may grant exceptions to providers who are board certified and practice in underserved areas. Blue Cross will grandfather Blue Cross providers designated as PCPs

prior to January 15, 2013 who do not meet the specific requirements for their degree-type based on a history of successful practice.

- e. **Compliance:** Blue Cross expects a PCP to comply with all contractual obligations and policies and procedures including those in the provider manual.
- 6. **Distribution of Criteria to Providers:** Blue Cross distributes this criteria and office site criteria to network practitioners and appropriate staff members. The quality improvement and provider relations departments facilitate publication of these criteria in the provider manual which is available on the Provider Resource Center.
- 7. **Biennial Review:** The Accreditation Team reviews these criteria biennially and as needed to ensure consistency with current business practice and to incorporate the latest regulatory and accreditation standards.