



The Physician Alliance

Organized Systems of Care/Personal Choice PPO Product Inclusion Criteria

PCP Practice Inclusion Criteria:

1. A PCP practice must be BCBSM Patient Centered Medical Home (PCMH) designated.
2. All primary care physicians in a PCMH designated practice will be included (including those who join the practice post designation).
3. If a practice loses its PCMH designation in one year, the practice will be put on probation for one year to allow them time to be re-designated. Practices on probation will receive a letter of probationary status.
4. If the practice is not PCMH designated for two consecutive years, the practice will be removed from the OSC when the OSC physician list is updated and will receive a certified letter of notification.
5. Regardless of PCMH status, all pediatric practices are included due to the lower acuity of the pediatric population.
6. In mixed practices only PCPs are included, unless the specialists meet the below criteria.

Specialist Inclusion Criteria:

OSC PCMH-N eligible specialties are:

Allergy	Ophthalmology
Cardiology	Oncology/Hematology
Chiropractic	Orthopedics/Orthopedic Surgeons
Critical Care	Otolaryngology
Dermatology	Pain Management
Emergency Medicine	Physical Medicine/ Muscular skeletal Medicine
Endocrinology	Podiatry
Gastroenterology	Psychiatry
General Surgery	Psychology
Infectious Disease	Pulmonology
Neonatal Care	Rheumatology
Nephrology	Sleep Medicine
Neurology	Sports Medicine
Obstetrics/Gynecology	Urology

1. Specialty types included in the OSC are those listed above.
2. The physician must be from one of the specialty types listed above **PLUS** be recognized as one of the following:
 - a. Received BCBSM Valued Based Reimbursement (VBR) recognition.

OR

 - b. Received a ≥ 3 star rating in TPA Specialist Service Excellence Award (SSEA) in Care Coordination.



3. All specialty physicians who received the VBR in a practice will be included in the OSC along with any new physician in the practice of the same specialty type who joins the practice between VBR and SSEA recognition periods.
4. If a practice loses its VBR recognition or doesn't meet the ≥ 3 star rating in TPA SSEA, the practice will be put on probation for one year to allow them time to meet the requirements. Practices on probation will receive a letter of probationary status.
5. If the physician is without VBR recognition or doesn't receive a ≥ 3 star rating in TPA SSEA for two years, the physician will be removed from the OSC and receive a certified letter of notification.

Note: Once the rules above are applied, an analysis of specialty types will be performed to ensure that there is adequate coverage of specialty types to provide a comprehensive network. This analysis will be performed before any specialists are removed from the OSC. If representation from a specialty type is deemed to be below the required percentage for the plan, that specialty type may be grandfathered into the network. For these grandfathered practices, a PRT will develop a performance improvement plan to assist the practice with meeting the above criteria within a specific timeframe.

Additional OSC Criteria:

If a physician or practice leaves TPA's Physician Group Incentive Program (PGIP), they will be removed from the OSC network and therefore removed from the Blue Cross Personal Choice PPO product.

Appeals Process:

- 1) Practices/physicians have the right to appeal this action within 30-days following the receipt of notice of dismissal from the OSC.
- 2) Failure to appeal within 30-days following receipt of the dismissal notification shall constitute a waiver of the appeal rights, and shall constitute acceptance of this dismissal.
- 3) The physician is required to send a certified letter to TPA's PPAE committee requesting an appeal within 30 days.
- 4) The letter must include reasons that the physician believes he/she is not being given fair treatment (technicality, erroneous data, special circumstances, etc.) and why he/she should be considered for appeal.
- 5) The regional medical director (RMD) will review the letter and contact the physician for more information or discussion if needed.
- 6) The RMD will bring the requested appeal to PPAE and PPAE would review the information and then consider the appeal. The appeal would be either overturned or the original decision for dismissal from the OSC would stand.
- 7) A certified letter will be sent to the physician informing he/she of the appeal decision.
- 8) If PPAE supports the original decision for dismissal, and the physician continues to want to appeal to TPA's board, step 3 and 4 would be repeated at TPA board level. The PPAE chairperson would present the letter and other pertinent information to TPA board for review.
- 9) TPA board will then consider the appeal and either overturn the original decision of PPAE or stand by the original decision for OSC dismissal.
- 10) A certified letter will be sent to the physician informing he/she of TPA's board's decision.

Approved by PPAE – November 10, 2016