

2021 SHCA Plan Changes – Applicable to Medical Home Model Plans Referral Administration – Important Information and Frequently Asked Questions

Background

Certain employer groups have elected to adopt a medical home model plan design for 2021. This plan design change applies to the following SHCA employer groups only:

- **Stanford University Faculty & Staff**
- **Stanford Health Care**
- **Lucile Packard Children’s Hospital Stanford**

These SHCA plans, administered by Aetna, **require all members to designate a Primary Care Physician (PCP)**. The designated PCP is responsible for coordinating patient care and directing referrals to in-network specialists. **Most specialist visits will require a referral from the designated PCP.** This change does not apply to other SHCA employers such as University Healthcare Alliance, SHC-ValleyCare, PCHA, Cisco, Google, or Intel.

All SHCA plans (with the exception of Intel) will continue to use the [Aetna National Precertification](#) list. Please note that a referral is not a substitute for a service that requires precertification. Aetna is responsible for prior authorizations and precertification for all SHCA plans.

Applicable to Stanford University Faculty & Staff ONLY - the following services also require pre-certification, effective January 1, 2020:

- CT, CTA (Computed Tomography, Computed Tomography Angiography)
- MRI, MRA (Magnetic Resonance Imaging, Magnetic Resonance Angiography)
- PET (Positron Emission Tomography)

Specialty Visit Referrals Required – Stanford University Faculty & Staff, SHC, and LPCH SHCA enrollees

Specialist visits for all members (including new and existing patients) require a referral from the member’s designated PCP. This includes specialist visits in a hospital clinic setting. Referrals are not required for direct access services, such as routine eye care and Ob/Gyn services. See the **Direct Access** list for more information.

Stanford Health Care and University Healthcare Alliance Epic Users: Submitting A Referral in Epic

A referral order to the specialist is required in Epic. Once the referral order is in Epic, an automated workflow will route the referral submission to Aetna, SHCA’s plan administrator.

Non-Epic and other Users: Submitting A Referral to Aetna

PCPs can submit a referral in real-time directly to Aetna’s provider portal, Availity (www.availity.com). Paper referrals can be faxed directly to Aetna to 1-859-455-8650.

Tips for Submitting a Referral through Availity – Taxonomy code

Referrals may be issued to either a specific provider, using his or her national provider identifier (NPI) or to specialty type, using a taxonomy code. Services can be rendered by any in-network SHCA provider under that taxonomy code. For example, a referral can be submitted to Dr. Jones (cardiologist) using her specific NPI or using the taxonomy code for cardiology, 207RC0000X. Taxonomy codes can be found here: <https://taxonomy.nucc.org/>

Aetna’s guidelines for submitting patient referrals under the Aetna Select product are as follows:

- **Consult & Treat referrals** – Referrals submitted with CPT code 99499. In most areas, consult and treat referrals do not need to include the specialists’ procedures. Aetna will pay specialists for performing associated covered services in an office setting per the current claim processing guidelines. **This is the recommended referral type.**
- **Exact procedure code referrals** – Referrals submitted with code(s) other than 99499. Primary care physicians (PCPs) should use these referrals when a member needs care for a specific health reason. Aetna will only reimburse for the procedure code(s) that matches the code(s) on the referral *Note: Referrals submitted without a procedure code will default to C&T referral (99499). Referrals are valid for one year from date of issue.*

Frequently Asked Questions

1. Who is considered a PCP?

The following provider types may be designated as a PCP in the SHCA network:

- Internal Medicine
- General Practice
- Pediatrician
- Family Medicine
- OB/GYN (only if designated as a PCP)

Note: Providers who are not designated as a PCP by Aetna for the SHCA network may not submit referrals. Advanced Practice Providers (APP) such as Physician Assistants within Primary Care Clinics can also submit PCP referral orders.

2. When should a PCP submit the referral to the specialist?

Ideally, the PCP should submit the referral prior to the specialist visit occurring or being scheduled. However, if the PCP cannot enter the referral into the system the same day, the system allows a 21-day grace period to electronically submit a retro-referral.

3. Can any PCP “on call” within the same practice enter referrals on behalf of the designated PCP?

Any in-network PCP within the same TIN as the member’s designated PCP can submit a referral to a specialist. The claim will be handled as if the PCP of record provided the service and made the referral to the specialist.

4. What if a member needs to change their assigned PCP?

Members can change their PCP any time during the year by calling SHCA Member Care Services at 1-855-345-7422.

5. Can members who have existing/ongoing relationships with their specialist continue to see them without a PCP referral?

No. Aetna requires a referral from the member’s PCP to continue seeing the specialist; therefore, the member must request a referral from their PCP. Referrals are required for new and existing patients.

6. Can Emergency Department (ED) providers refer ED patients directly to specialists?

Only if within the facility during that specific ED encounter; otherwise, the ED would have to refer the patient back to their PCP who would refer specialty care for follow up visits. After an Emergency Department (ED) visit, a patient (or family members on behalf of the patient), should be directed by the ED to follow up with their PCP for referrals for follow-up care with specialists.

7. Are specialist to specialist referrals permitted?

No, specialist to specialist referrals are not permitted under this new plan design. If a referral is needed for a different specialty service, the assigned PCP must submit a separate referral to that specialty. For example, an oncologist cannot make a referral directly to the cardiologist. The member or the oncologist would need to work with the designated PCP to submit a referral for cardiology.

8. If a specialist wants to refer members for physical or occupational therapy, is a referral from the PCP required?

Rehab therapy does not require a PCP referral. Members can be directed to physical and occupational therapy by their specialist.

9. Does a service that requires a prior authorization also require a referral?

In cases where a procedure requires an authorization, a PCP referral to the specialty is required to cover any pre/post procedure specialty visits.

For any additional information or questions, please review SHCA’s Provider Operations Guide or contact the SHCA Network Operations team at SHCAnetwork@stanfordhealthcare.org