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|  | <b>POLICIES AND PROCEDURES</b>                 |
| <b>Policy #:</b> 404-1202  | <b>Lead Department:</b> Utilization Management |
| <b>Title:</b> After-Hours Availability of Plan or Contract Physician             |  |
| <b>Original Date:</b> 07/15/2014   | <b>Date Published:</b> 05/20/2025              |
| <b>Approved by:</b> Utilization Management Work Group (UMWG)                     |  |

**Purpose:**

The purpose of this policy is to define Central California Alliance for Health's (the Alliance) or Contract Physician after-hours availability in order to meet contractual and regulatory requirements.

**Policy:**


The Alliance will ensure that Alliance members receive appropriate and timely authorization for medically necessary post-stabilization care or transfer of care when their emergency condition has been stabilized.

The Alliance's Utilization Management (UM) Department will review and process authorizations of medically necessary post-stabilization services during regular business hours. Authorization requests received outside of regular business hours are reviewed the next business day. The Alliance does not deny requests for medically necessary post-stabilization services and non-urgent care provided to a member following an exam in the Emergency Department when the Alliance is unavailable for contact.

The Alliance has a medical director or licensed Physician acting on behalf of the Alliance's medical director, available 24 hours a day, 7 days a week to assist with access issues.


**Procedures:**

1. For general communication with emergency room personnel and to coordinate the transfer of care of a Member whose emergency condition is stabilized:
  - a. The Alliance links most members to a Primary Care Physician (PCP). This PCP is responsible for providing 24-hour care or arranging for 24-hour care for their linked Alliance members. Alliance Provider Services ensures that all Alliance network Physicians sign a contract with the Alliance and agree to adhere to its requirements.
  - b. For Alliance administrative members who are not linked to a PCP, facilities may contact the Alliance's UM Department to coordinate the transfer of care for members whose emergency conditions have been stabilized. The UM Department also reviews authorization requests for post-stabilization care.
  - c. The Alliance does NOT require pre-authorization for members requiring Medically Necessary emergency care. In addition, direct referral from the Emergency Department to out-of-network specialists is allowed for urgent surgical, orthopedic, acute pain management, and ophthalmologic conditions. For more information on


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direct referrals, please refer to Alliance Policy 404-1303 – Referral Consultation Request Process.

- d. The Nurse Advice Line (NAL) offers telephone triage or screening services in a timely manner appropriate for the member's condition, available 24 hours a day, 7 days a week, and triage or screening wait time for the NAL does not exceed 30 minutes. Members access the NAL using a toll-free number and it does not require prior authorization. The NAL acts as an interface between the member and provider, and directs members back to the PCP offices or higher levels of care, as appropriate. NAL provides follow-up information and disposition status to provider offices. Although prior authorization is not required, members can contact the NAL regarding post stabilization care.
    - e. The Alliance may provide or arrange for the provision of telephone triage or screening services through one or more of the following means: the NAL, which constitutes plan-operated telephone triage or screening services consistent with subsection (b)(19) of Rule 1300.67.2.2(c)(8); telephone medical advice services pursuant to section 1348.8 of the Knox-Keene Act; the plan's contracted primary care and mental health care or substance use disorder network; or another method that provides triage or screening services consistent with the requirements of that subsection, as outlined in Policy 401-1514 – In-Office Telephone Triage.
  - f. The ED is required to contact the County Behavioral Health Department for transfers of Medi-Cal members for Specialty Mental Health Services (SMHS) or Behavioral Health Substance Use Disorder treatment. The Alliance's contracted Managed Behavioral Health Organization (MBHO) will assist with transfers and referrals for IHSS members for all mental health and substance use disorders through June 30, 2025. Beginning July 1, 2025, the Alliance will manage non-specialty mental health and behavioral health services internally through its core organizational functions. This will include support for transfers and referrals for these services for IHSS members.
2. When a member presents with an emergency condition to a hospital or other provider facility and is admitted for in-patient services, the attending Physician/Hospital shall meet the following obligations:
    - a. Notify the PCP as soon as possible.

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- b. Notify the Alliance's UM Department immediately upon inpatient admission to obtain authorization for the admission.
  - c. Authorization requests received outside of regular business hours from contracted facilities are reviewed the following business day.
  - d. The Alliance does not require pre-authorization for members requiring medically necessary emergency care.
  - e. In circumstances where the admission does not meet medical necessity, the provider and facility may use the Alliance dispute process to allow for further review of the inpatient stay.
  - f. The above obligations do not apply to Medi-Cal members admitted for inpatient psychiatric and substance use disorder services.
3. Non-contracted hospitals will either be provided with authorization to provide post-stabilization care, or the UM Department will arrange for transportation to a contracted facility.
  - a. Post-stabilization: Upon receipt of an authorization request from an emergency services provider, the Alliance shall render a decision within 30 minutes, or the request is deemed approved, pursuant to Title 28 CCR Section 1300.71.4. Additionally, effective July 1, 2025, in alignment with the Alliance's core organizational functions for non-specialty mental health and behavioral health services and in accordance with AB 188, a request will be deemed approved if a provider determines that the enrollee requires post-stabilization care and there is an unreasonable delay in the transfer of care. For afterhours approvals the provider should contact the on-call Alliance Medical Director who can be reached 24 hours a day, seven days a week, at 831-430-5588.
  - b. All hospitals within the State of California, including non-contracted hospitals, will be notified annually of the Alliance's emergency services and post stabilization authorization process via fax.
  - c. Decisions related to discharge planning and transitional care services must be mutually agreed upon between the Alliance and out-of-network providers.
  - d. In the event the requesting provider and the on-call Alliance Medical Director are in disagreement regarding post stabilization decisions, the Alliance will assume responsibility for the care of the member, either by having medical personnel

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contracted with the Alliance personally take over the care of the member within a reasonable time after the disagreement or having another contracted general acute care hospital agree to the transfer of the member.

- e. All requests for authorizations, and all responses to such requests for authorizations, of post-stabilization medically necessary health care services shall be fully documented. Documentation shall include, but not be limited to, the date and time of the request, the name of the health care provider making the request, and the name of the Alliance representative responding to the request.
4. The Alliance has a medical director or licensed Physician acting on behalf of the Alliance's medical director, available 24 hours a day, 7 days a week to assist with access issues. The medical director can be reached at 831-430-5588.

**References:**

Alliance Policy:

- 401-1514 – In-Office Telephone Triage
- 404-1112 – Medical Necessity - The Definition and Application of Medical Necessity Provision to Authorization Requests
- 404-1201 - Authorization Request Process
- 404-1303 - Referral Consultation Request Process

Impacted Departments:

- Care Management
- Provider Services

Regulatory:

- California Code of Regulations, Title 28 Sec 1300.71.4
- California Code of Regulations, Title 28, Section 1300.67.2.2(c)(8)

Legislative:

- Health and Safety Code Sec 1371.4
- Assembly Bill (AB) 118 – Budget Act of 2023

Contractual (Previous Contract):


- DHCS Medi-Cal Contract Exhibit A, Attachment 6, Provision 8
- DHCS Medi-Cal Contract Exhibit A, Attachment 18, Provision 6.H
- DHCS Medi-Cal Contract Exhibit E, Attachment 3, Provision 5

Contractual (2024 Contract):

- Medi-Cal Contract Exhibit A, Attachment 3, Provision 3.2.6
- Medi-Cal Contract Exhibit A, Attachment 3, Provision 5.1.3.1.4.g

DHCS All Plan Letter:

- APL 23-009 – Authorizations for Post-Stabilization Care Services

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DMHC All Plan Letter:

APL 24-012 –Single Point of Contact for Hospitals to Request Authorization for Post Stabilization Care

NCQA:

Supersedes:

Policy 400-1104 After-Hours Availability of Plan or Contract Physician

Other References:

Strategic Plan 2022-2026 – Central California Alliance for Health:  
PERSON-CENTERED DELIVERY SYSTEM TRANSFORMATION


Attachments:

**Lines of Business This Policy Applies To**

- ☐ DSNP
- ☒ Medi-Cal
- ☒ Alliance Care IHSS

**Revision History:**

| Reviewed Date | Revised Date | Changes Made By   | Approved By |
|---------------|--------------|---|-------------|
| 05/05/2021    | 05/05/2021   | Viki Doolittle, RN<br>UM/CCM Manager                      | UMWG        |
| 09/07/2021    | 08/23/2021   | Mary Brusuelas, RN<br>UM/CCM Director                     | UMWG        |
| 10/08/2021    | 10/08/2021   | Viki Doolittle, RN<br>UM/CCM Manager                      | UMWG        |
| 12/22/2022    | 12/22/2022   | Paige Harris<br>Regulatory Reporting<br>Supervisor        | UMWG        |
| 01/30/2023    | 2/2/2023     | Tammy Brass, RN<br>UM Director                            | UMWG        |
| 09/22/2023    | 9/22/2023    | Danah Hernandez, UM<br>Regulatory Reporting<br>Supervisor | UMWG        |
| 03/26/2024    | 03/26/2024   | Azura Sanchez<br>Administrative Assistant<br>UM           | UMWG        |

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| Reviewed Date | Revised Date | Changes Made By                              | Approved By  |
|---------------|--------------|--|--|
| 06/21/2024    | 06/21/2024   | Carmen Duran, Operations Business Analyst II | Rachaelle Schultze, Operations Business Analysis Manager |
| 10/21/2024    |              | Azura Sanchez, Administrative Assistant      | Tammy Brass, UM Director                                 |