Contra Costa

PCP Central System

Contra Costa Health Services developed and implemented the PCP Central System to:

- Improve the accuracy, consistency and ease of PCP assignment
- Improve the provider utilization
- Improve customer satisfaction

Every week day, the PCP Central system scans Contra Costa Health Plan's enrollment system to identify Full Scope Medi-Cal and Low Income Health Plan individuals enrolled or managed by the County's Knox-Keen Health Plan that do not have a PCP assigned. The system then assigns a PCP using a complex algorithm to ensure continuity of care, siblings are assigned the same PCP, all patient preferences and provider's panel restrictions are met. The algorithm scores each provider in the system using the following patient/provider parameters and the provider with the highest score is assigned as that patient's PCP:

1. Number of recent "encounters" with the provider, if any
2. "Recentness" of the PCP, if more than one recent PCP
3. Number of other family member(s) having the provider as the PCP, if any
4. Provider's Panel Status (i.e. Open panel before Closed panel)
5. Provider that have sent a pre-authorization
6. Number of Patient preferences met by the provider – age, gender, language
7. Panel restrictions being satisfied by patient e.g. Pediatrics, Adult Medicine, etc.
8. Providers having practice location in a 10 mile zone of the member's home
9. Providers having less than 50 patients, if any
10. Providers having practice location in the same city as the member's home
11. Provider's Panel utilization rate (i.e. low utilization before high utilization to ensure access)

The reports of assignments made by the PCP Central System are reviewed by senior leadership at CCHP and CCRMC in monthly metings. In addition, the number of patients that call to change the PCP assigned by the system and the reason for change is tracked. The PCP assignment algorithm is adjusted frequently based on these reports, reviews, patient mix, provider availability, etc.

More than 98% of the patients keep the PCP assigned by the system. 50,752 assignments were made in DY7 using this system. This includes assignments made for new or returning members as well as reassignments of entire panels when a provider leaves.

PCP Recommendation – Precedence Rules

A provider is recommended as the member's PCP if the provider satisfies the requirements to qualify under one of the following **categories**. The categories are listed in the order of precedence.

1. **Continuity of Care**
2. **Member's Family Member(s) have the provider as PCP**
3. **Provider Pre Authorizes the member**
4. **Provider meets the member's Preferences and the member meets the provider's Panel Restrictions**

Within each of the above categories preference is given to the providers in the following order:

12. Provider's Panel Status (i.e. Open panel before Closed panel)

13. Provider that have sent a pre-authorization

14. "Recentness" of the PCP, if a recent PCP

15. Number of recent "encounters" with the provider, if any

16. Number of other family member(s) having the provider as the PCP, if any

17. Number of Patient preferences and Panel restrictions being satisfied

18. Providers having practice location in the same zone as the member's home

19. CPN providers having less than 25 patients and CCRMC providers having less than 50 patients

20. Provider's network

21. Providers having practice location in the same city as the member's home

22. Provider's Panel utilization rate (i.e. low utilization before high utilization)