PARTNERSHIP HEALTHPLAN OF CALIFORNIA

POLICY/ PROCEDURE

Policy/Procedur	e Number: N	1PPR203	Lead Department: Provider Relations		
Policy/Procedur	e Title: Provi	der Enrollmer	☑ External Policy□ Internal Policy		
Original Date : 02/14/2001			Next Review Date: 04/09/2026 Last Review Date: 04/09/2025		
Applies to:	□ Employees		🛛 Medi-Cal	Partnership Advantage	
Reviewing	⊠ IQI		□ P & T	□ QUAC	
Entities:	□ OPERATIONS		EXECUTIVE	COMPLIANCE	DEPARTMENT
Approving Entities:	□ BOARD		COMPLIANCE	☐ FINANCE	PAC
	CEO		□ CREDENTIALS	DEPT. DIRECTOR/OFFICER	
Approval Signat	ture: Sonja B	ork, JD, CEO	Approval Date: 04/09/2025		

I. RELATED POLICIES:

A. N/A

II. IMPACTED DEPTS:

- A. Health Services
- B. Member Services

III. DEFINITIONS:

A. N/A

IV. ATTACHMENTS:

A. N/A

V. PURPOSE:

This policy describes the criteria for determining the enrollment status of primary care practice sites

VI. POLICY / PROCEDURE:

- A. Primary Care Practice sites can choose to be open to Accept New Patients, open to Accept New Patients with AutoAssignment, open to Accept Existing Patients only, and Closed to new patients. No other site designations are allowed.
 - 1. "ACCEPTING NEW PATIENTS": Partnership HealthPlan of California (Partnership) Members can select this practice without restriction.
 - 2. "ACCEPTING NEW PATIENTS WITH AUTOASSIGNMENT": Partnership Members who have not selected a PCP will be assigned automatically to an open practice that is ACCEPTING AUTOASSIGNMENT, based on zip code.
 - 3. "ACCEPTING EXISTING PATIENTS ONLY": Partnership Members who are established patients can be assigned to this practice. Provider must give Partnership verbal or written approval. Members who lose and then regain eligibility are re-linked to their last PCP.
- B. A practice site may choose to be open to new pediatric members or to new adult members. Age restrictions may be defined by the practice site. The age criteria must be communicated to Partnership.
- C. Specialist practice sites may accept new referrals based on the sites capacity to see new patients.
- D. Exceptions to these guidelines can be made at Partnership's discretion when the exception clearly benefits the Partnership membership.
- E. Members must contact Partnership by the 15th of the month in order to make a PCP change. Members will be assigned to the practice site effective on the first day of the month following assignment.

Policy/Procee	lure Number: MPPR2	203	Lead Department: Provider Relations		
Policy/Proceed Guidelines	lure Title: Provider En	collment Status	☑ External Policy □ Internal Policy		
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VII. REFERENCES:

A. California Department of Health Care Services (DHCS)

VIII. DISTRIBUTION:

A. Partnership Provider Manual

IX. POSITION RESPONSIBLE FOR IMPLEMENTING PROCEDURE: Senior Director, Provider Relations

X. REVISION DATES:

03/13/02, 05/14/03, 07/14/04, 05/11/05, 05/10/06, 07/11/07, 07/09/08, 07/08/09, 08/11/10, 08/10/11, 08/15/12, 08/14/13, 09/10/14, 09/09/15, 09/14/16, 09/13/17, 09/12/18, 09/11/2019, 04/08/2020, 04/14/2021, 04/13/2022, 04/12/2023, 04/10/2024; 04/09/25

PREVIOUSLY APPLIED TO:

Partnership Advantage: MP PR #203 – 06/2006 to 01/01/2015 Healthy Kids: MP PR 203 – 05/2006 to 09/2014