HAWAI'I HEALTH PARTNERS

Physician-led, Integrated quality care. Optimal health,

HAWAI'I PACIFIC HEALTH

Policy Name: Coverage Policy (HHP-13)

Effective Date:	
Approved by the Board: [June 26, 2013]	
Previous Versions: None Approval Signature:	
Name: Douglas Kwock, M.D. Title: President/Chair	

Definitions:

"**Coverage**" means when one Physician Participant actively arranging for clinical care by another Physician Participant of a panel of patients for those times when first Physician Participant is sick, on vacation, at a conference or otherwise unable to provide care for that panel.

"Continuous Clinical Care" means all attributed patients in HHP have access to a provider for clinical issues whether they are urgent or routine in a 24 hour/7 day a week fashion.

"HHP" means Hawai'i Health Partners, LLC.

"HHP Patient(s)" means an individual who is enrolled in a health plan or product sponsored or administered by a commercial or government health care insurer or any self-insured health plans that have contracted with HHP to participate in quality and incentive programs related to the furnishing of medically necessary items and services to such individual.

"**Non-Participating Physician**" means a physician who has not entered into a Participation Agreement with HHP or is not employed by an entity that has entered into a current Participation Agreement with HHP.

"Participation Agreement" means a written agreement with HHP to provide covered services to HHP Patients.

"Physician Participant(s)" means a Hawai'i-licensed physician in active clinical practice who has entered into and has a Participation Agreement with HHP or who has been employed by an entity that has entered into and has a current Participation Agreement with HHP and is a participating physician thereunder.

Purpose:

The policy of HHP is to provide Continuous Clinical Care for HHP Patients by its network of participant providers. This policy is intended to reflect our commitment to continuity of care and coordination of all clinical services.

Policy / Procedure:

- I. Any Physician Participant at any time may decide to take time off from their patient care responsibilities for whatever reason.
- **II.** These reasons may include, but are not limited to:
 - A. Vacation
 - **B.** Sickness
 - C. Meetings or conferences
 - D. Personal
 - E. Elective surgery
- **III.** If a Physician Participant makes the decision to take time off from their patient care responsibilities, it is their responsibility to arrange Coverage of his/her patient panel by another provider in a timely fashion.
- IV. It is the Physician Participant's responsibility to notify all relevant entities such as the emergency department, answering services, and inpatient clinical care floors as applicable that he/she is being covered by another provider.
- V. Ideally, a Physician Participant would be covered by another Physician Participant in HHP. However, if that is not possible, then a Non-Participating Physician may cover a Physician Participant. The Physician Participant should request that the Non-Participating Physician use HHP facilities for his/her attributed HHP Patients when at all possible.
- VI. HHP will monitor out-of-network usage and ensure that increased out-of-network usage is not being attributed to Non-Participating Physician Coverage. If a Non-Participating Physician providing Coverage uses only out-of-network services, the Physician Participant will be informed of this fact and requested to find Coverage from other Physician Participants for the future.
- VII. Failure to arrange Coverage of his/her attributed HHP Patients may result in a Physician Participant's counseling and possible further action by the Credentialing and Recruiting Committee. Repeated episodes of failing to obtain Coverage may result in termination or other actions by the Credentialing and Recruiting Committee.

Related Documents:

Termination of Participating Providers Policy (HHP-08)

Distribution: