

# Primary Care Provider Requirements and Responsibilities

# EWC Primary Care Provider (PCP)

- » Is a Medi-Cal Provider
  - Eligible to submit claims
  - In good standing
- » Medi-Cal NPI must be enrolled in EWC
- » Accepts Medi-Cal rates as payment in full
- » Has Medi-Cal Portal access for accessing DETEC (Detecting Early Cancer- EWC's web-based data collection system)
- » Has personnel to enroll EWC applicants and submit clinical data

# EWC Primary Care Provider

- » Determines applicant eligibility
- » Enrolls qualifying EWC recipients
- » Recertifies existing EWC recipients at the time of office visit or referral and confirms certification period is valid for date(s) of service
- » Delivers EWC program services in accordance with EWC program clinical quality standards
- » Agrees to disclose any non-covered services to the patient and to receive their written authorization before the service is provided

# EWC Primary Care Provider

- » Provides and coordinates screening and diagnostic services
  - Has a referral network of Medi-Cal providers for screening, diagnostic and treatment services
  - Has clinical systems in place, including tracking, that support case management.
- » Makes referrals to treatment as part of case management
- » Collects and reports recipient outcome data to the DHCS EWC program

# EWC Primary Care Provider

## Assesses Tobacco use

- » Federal regulations require that every recipient be assessed for tobacco use and referred for counseling, if necessary
- » Cessation resources:
  - Kick It California (formerly No Butts)
    - 1-800-No-BUTTS
    - <https://kickitca.org/>
  - California Tobacco Control Program
    - Cessation Services and Resources



# EWC Primary Care Provider

- » Has a system in place to provide notification to recipients of screening and diagnostic procedure and test results within specified time frames and document notification in the medical record
  - Negative results within 30 calendar days
  - Abnormal results within 14 calendar days
  - Cancer diagnosis within 7 calendar days

# EWC Primary Care Provider

- » Refers recipients for diagnostic evaluation and/or treatment:
  - Referrals for required diagnostic evaluation must be made within 14 calendar days from receipt of abnormal results
  - The maximum elapsed time between abnormal result and final diagnosis is 60 days
  - Referrals for treatment for a diagnosis of breast or cervical cancer or other high grade cervical diagnoses (HSIL, CIN2, CIN3/CIS) must be made within seven calendar days from receipt of results
  - The maximum elapsed time between a diagnosis of cancer or other pre-cancerous diagnoses and initiation of treatment is 60 days

# EWC Primary Care Provider

- » Informs regional CC about any changes:
  - Change of ownership and legal address
  - Change of the physical address and / or telephone numbers
  - Change of contact information (i.e. EWC contact person, clinic administration, medical director)



# Referral Provider for EWC Services

- » Must be a Medi-Cal Provider
- » Eligible to submit claims
  - In good standing
- » Is not required to be enrolled in EWC
- » Renders specialty and ancillary care services to EWC recipients
  - Imaging centers
  - Surgeons
  - Laboratories, etc.
- » Preauthorization is not required

# Referral Provider

- » Verifies that recipient eligibility dates are active
- » Renders EWC covered procedure(s):
  - » Every Woman Counts (ev woman)
- » Gets signed disclosure for non-EWC-covered services
- » Reports to EWC PCP in a timely manner
  - Screening and diagnostic results
  - Recommendations
  - Treatment plans
- » Submits claims to Medi-Cal using the 14-character EWC Recipient ID
- » Accepts Medi-Cal rates as payment in full