

MOUNTAIN-VALLEY EMS AGENCY
POLICIES AND PROCEDURES

POLICY NO. **580.32**

TITLE: Coordination with HMOs and
Other Managed Care Organizations

APPROVED: SIGNATURE ON FILE IN EMS OFFICE
Executive Director

EFFECTIVE DATE: 01/01/2004

SUPERSEDES: _____

REVISED: _____

SIGNATURE ON FILE IN EMS OFFICE
Medical Director

REVIEW DATE: 01/01/2009

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COORDINATION WITH HMOS AND OTHER MANAGED CARE ORGANIZATIONS

I. AUTHORITY:

Division 2.5, California Health and Safety Code, Sections 1798.162, 1798.163
California Code of Regulations Section 100255.

II. DEFINITIONS:

- A. "Health maintenance organization" (HMO) means an organization authorized under the Knox-Keene Health Care Service Plan Act of 1975
- B. "Trauma center" or "designated trauma center" means a licensed hospital, accredited by the Joint Commission on Accreditation of Healthcare Organizations, which has been designated as a Level I, II, III, or IV trauma center and/or Level I or II pediatric trauma center by the local EMS agency, in accordance with California Trauma Care System Regulations

III. PURPOSE:

To promote patient flow in a manner than meets patients clinical needs while considering the economic impact of patient flow decisions.

IV. POLICY

- A. The Mountain-Valley EMS Agency trauma triage policy (Policy #553.25) does not consider the patient's insurance status in determining the destination of patients who meet the triage criteria. Since patients who require trauma center level services may not require this level once they have been stabilized, trauma centers should consider the need to return patients who are insured by health maintenance and other managed health care organizations to their payer's network at a medically appropriate time.
- B. Trauma centers shall make a good faith effort to negotiate agreements with health maintenance and other managed health care organizations regarding payment, repatriation of patients, and other related factors.