

SECTION 17 - PROVIDER TERMINATION

Termination of Plan Provider Contract (Service Agreement)

PHP may terminate Plan Providers from its Provider Network for reasons of:

- Mutual agreement
- Written notice of termination given by either party to the other party at least sixty (60) days prior to termination date of the governing Service Agreement
- Material breach of the requirements of the governing Service Agreement if the breaching party has not cured such material breach within thirty (30) days after receiving notice of the material breach
- If a Provider (a) is excluded from Medicare or Medicaid, (b) becomes insolvent or bankrupt, (c) ceases operations, (d) is subject to an assignment of assets for the benefit of creditors, (e) loses any certifications or licenses required by state or federal law, or (f) fails to maintain the professional or liability insurance required by state or federal law; or,
- When it is of the judgment of PHP that continuation of the agreement may jeopardize the health and welfare of Members
- Other reasons that permanently cease delivery of services

Termination Process

If termination of a Plan Provider from the Provider Network occurs, PHP notifies:

- Members and coordinates transfer of care to other Plan Providers
- State, federal, or regulatory agencies, if applicable
- The Plan Provider of termination, including the effective date, the reason for termination, right to appeal the decision, and obligations of the provider in the termination process

Upon termination of an agreement, the Provider shall, at PHP's option, continue to provide services for Members, if hospitalized or discharged:

- Until appropriate referrals can be made to satisfy the continuity of care requirements
- Up to of sixty (60) days after the effective date of termination
- In the event of hospitalization, until the Member is discharged

Termination of the Service Agreement between Plan Provider and PHP has no effect upon the rights and obligations of the parties occurring prior to the effective date of the termination. The Plan Provider must continue to be consistent with PHP's policies and procedures and any applicable federal or state laws.

During the time of continued coverage, PHP will continue to compensate the Provider in accordance with the terms of the Agreement for any such covered services provided after the termination of the Agreement.

Plan Providers with questions or a request for an appeal of the termination decision, should contact the CHP Grievance and Appeals Coordinator at:

Community Health Partnership
Attention: Grievance and Appeals Coordinator
2240 EastRidge Center
Eau Claire, WI 54701
Telephone: 715-838-2900 or 800 842-1814
Fax: 715-838-2910

Automatic Termination

PHP will automatically terminate a Plan Provider's participation in the Provider Network if the Provider:

- Is excluded from Medicare or Medicaid
- Becomes insolvent or bankrupt
- Ceases operations
- Is subject to an assignment of assets for the benefit of creditors
- Loses any certifications or licenses required by State or Federal law
- Fails to maintain the professional or liability insurance required by State or Federal law

Non-Compliance Termination

Consistent with PHP's contract with CMS and DHFS, PHP reserves the right to terminate or not renew a contract with any Plan Provider for failure to be compliant with any of the following:

- Persistent non-compliance with PHP policies and procedures
- Notification of sanction, remedial actions, revocation of Medicare and/or Medicaid participation or participation of applicable state or federal agency
- The judgment of PHP that continuation of the agreement may jeopardize the health and welfare of Members

Investigation of Complaints

PHP is responsible for investigating reports about Plan Providers by making contact with the Provider to assess the validity of the report and/or obtain and review documentation completed by any outside governing agency to assess the validity of the report.

PHP conducts interviews with Members receiving services from the Provider under investigation. After information is obtained, it may be forwarded to the PHP Peer Review Committee for review and final determination. Final decisions are made within ninety (90) days of submission to the Committee.