

**Passport Advantage
Provider Manual
Section 9.0
Emergency Care**

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9.1 Emergency Care

Services for medical emergencies are covered when provided in a hospital, physician's office or other ambulatory setting.

9.1.1 Definition

As defined in 42 USC 139dd(e) and 42 CFR 438.114, Emergency Medical Condition means: (A) a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect that the absence of immediate medical attention to result in (i) placing the health of the individual (or with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy, (ii) serious impairment of bodily functions, or (iii) serious dysfunction of any bodily organ or part; or (B) with respect to a pregnant woman who is having contractions (i) that there is an inadequate time to effect a safe transfer to another hospital before delivery, or (ii) that transfer can pose a threat to the health or safety of the woman or the unborn child.

9.1.2 Primary Care Practitioner Responsibilities

If the member calls the primary care practitioner's (PCP) office prior to going to the ER and if the situation can be handled in the PCP's office, it is the PCP's responsibility to comply with Passport's access standards. A referral or authorization is not required for a member to be seen in the emergency room (ER). It is also the responsibility of the PCP, per his or her contract with Passport, to have after-hours call service 7 days a week, 24 hours a day. Use of Passport's 24-Hour Nurse Advice Line is not an acceptable alternative to after-hours call service.

Giving members easily understood instructions during regular office visits can help avoid after-office-hours calls or ER visits. Reviewing home treatment for common conditions, such as fever, vomiting, diarrhea, and earaches can give members or their caregivers more confidence in handling these conditions when they arise. Providing written instructions to be used as a reference may also be helpful.

9.2 Out-of-Service-Area Care

9.2.1 Definition

Emergency care as described in Section 10.1.1 is also a covered benefit for Passport Advantage members when they are out of the service area. A referral or prior authorization is not required for out-of-service-area emergency care in the ER. For an out-of-network provider to receive reimbursement a Kentucky Medicaid ID number and Passport Provider ID number is needed.

9.3 Urgent Care Services

9.3.1 Definition

Urgent care may be a covered service in an urgent care center, PCP office, or other ambulatory setting. Urgent care means care for a condition not likely to cause death or lasting harm but for which treatment should not wait for a normally scheduled appointment. Members are advised via Passports educational materials to contact their PCP before seeking medical treatment elsewhere.

9.3.2 Primary Care Practitioner Responsibilities

If the member calls prior to going to a licensed, credentialed urgent care center and the situation can be handled in the PCP's office, it is the PCP's responsibility to see the member within Passport's access guidelines.

For the current listing of urgent care centers, please visit the Provider Directories section of our web site, www.passporthealthplan.com/provider/resources/directories.

To request a hard copy of this listing, please contact your Provider Relations Specialist or Provider Services at (800) 578-0775.