

Policy: GG.1119

Title: Direct Access to OB/GYN Practitioner

Service

Department: Medical Management Section: Utilization Management

CEO Approval: /s/ Michael Hunn 12/20/2024

Effective Date: 02/01/2002 Revised Date: 12/01/2024

Applicable to:

✓ Medi-Cal

☑ OneCare☑ PACE

☐ Administrative

I. PURPOSE

This policy defines the standard for a female Member's self-referral to an Obstetrics/Gynecology (OB/GYN) Practitioner, which includes physicians, Certified Nurse Midwives, and Certified Nurse Practitioners, contracted to provide OB/GYN services.

II. POLICY

- A. Respecting the unique, private, and personal relationship between a woman and her OB/GYN Practitioner warrants direct access to women's routine and preventative health care services.
- B. A Member shall have the right to self-refer to any OB/GYN Practitioner contracted with CalOptima Health or a Health Network to provide women's routine and preventative health care services without a referral from her Primary Care Practitioner/Physician (PCP) and without Prior Authorization from CalOptima Health, or a Health Network.
- C. A Member shall have the right to self-refer to any Qualified Family Planning Practitioner, including Certified Nurse Midwife (CNM), Certified Nurse Practitioner (CNP), in or out-of-network, without a referral from her Primary Care Practitioner/Physician (PCP) and without Prior Authorization from CalOptima Health or her Health Network, in accordance with the terms and conditions of this Policy and CalOptima Health Policy GG.1118: Family Planning Services, Out-of-Network.
- D. An OB/GYN Practitioner shall ensure that the first (1st) routine prenatal visit for a pregnant Member is available within ten (10) business days upon request.
- E. An OB/GYN Practitioner shall communicate with a CalOptima Health or a Health Network Member's PCP (if there is an assigned PCP) regarding services provided, and any need for follow-up care.
- F. An OB/GYN Practitioner shall communicate with a CalOptima Health or a Health Network Member's PCP regarding Doula Services recommendations. Doula Services shall be processed in accordance with CalOptima Health Policy GG.1707: Doula Services.
- G. A Member shall have the right to choose as a PCP a contracted OB/GYN physician who is willing to perform the role of the PCP and has met CalOptima Health's requirements to serve as a PCP.

III. PROCEDURE

Not Applicable

IV. ATTACHMENT(S)

Not Applicable

V. REFERENCE(S)

- A. CalOptima Health Contract with the Centers for Medicare & Medicaid Services (CMS) for Medicare Advantage
- B. CalOptima Health Contract with Department of Health Care Services (DHCS) for Medi-Cal
- C. CalOptima Health, Health Network Service Agreement
- D. CalOptima Health Policy GG.1118: Family Planning Services, Out-of-Network
- E. CalOptima Health Policy GG.1707: Doula Services
- F. Department of Health Care Services (DHCS) Policy Letter (PL) 98-012: Primary Care Physician Selection and Assignment Policy
- G. Department of Health Care Services (DHCS) Policy Letter (PL) 12-003: Obstetrical Care-Perinatal Services (supersedes PL 12-001 and 96-01)
- H. Department of Health Care Services (DHCS) All Plan Letter (APL) 18-019: Family Planning Services Policy For Self-Administered Hormonal Contraceptives (Supersedes APL 16-003)
- I. Department of Health Care Services (DHCS) Doula Services All Plan Letter (APL) 23-024: (Supersedes APL 22-031)
- J. Omnibus Budget Reconciliation Act (OBRA) of 1987, Section 4113(c)(1)(B)

VI. REGULATORY AGENCY APPROVAL(S)

Date Regulatory Agency		Response	
03/30/2016	Department of Health Care Services (DHCS)	Approved as Submitted	

VII. BOARD ACTION(S)

None to Date

VIII. REVISION HISTORY

Action	Date	Policy	Policy Title	Program(s)
Effective	06/01/1999	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	
Revised	01/01/2012	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	
Revised	11/01/2015	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	
Revised	10/01/2016	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare
				OneCare Connect
Revised	11/01/2017	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare
				OneCare Connect

Action	Date	Policy	Policy Title	Program(s)
Revised	10/01/2019	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare
				OneCare Connect
Reviewed	11/01/2020	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare
				OneCare Connect
Reviewed	06/01/2021	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare
				OneCare Connect
Revised	12/31/2022	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare
Revised	12/01/2023	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare
Revised	12/01/2024	GG.1119	Direct Access to OB/GYN Practitioner	Medi-Cal
			Service	OneCare

Revised: 12/01/2024

IX. GLOSSARY

Term	Definition
Certified Nurse Midwife	A registered nurse who has successfully completed a program of study
	and clinical experience meeting the State guidelines or has been certified
	by an organization recognized by the State.
Certified Nurse	A Certified Nurse Practitioner can provide a full range of primary, acute
Practitioner	and specialty health care services, including but not limited to primary
	care, adult health, neonatal health, gerontology health, etc.
Doula	A birth worker who provides health education, advocacy, and physical,
	emotional, and nonmedical support for pregnant and postpartum persons
	before, during, and after childbirth, otherwise known as the perinatal
	period, for up to one year after pregnancy and provides support during
	miscarriage, stillbirth, and abortion (pregnancy termination) as set forth
	in DHCS APL 23-024: Doula Services.
Doula Services	Doula Services encompass health education, advocacy, and physical,
	emotional and nonmedical support provided before, during and after
	childbirth or end of a pregnancy, including throughout the Postpartum
	Period.
Health Network	A Physician Hospital Consortium (PHC), physician group under a
	shared risk contract, or health care service plan, such as a Health
	Maintenance Organization (HMO) that contracts with CalOptima Health
	to provide Covered Services to Members assigned to that Health
	Network.
Member	A beneficiary enrolled in a CalOptima Health program.
Primary Care	A Practitioner/Physician responsible for supervising, coordinating, and
Practitioner/Physician	providing initial and primary care to Members and serves as the medical
(PCP)	home for Members. The PCP is a general practitioner, internist,
	pediatrician, family practitioner, or obstetrician/gynecologist
	(OB/GYN). For Members who are Seniors or Persons with Disabilities
	or eligible for the Whole Child Model, "Primary Care Practitioner" or
	"PCP" shall additionally mean any Specialty Care Provider who is a
	Participating Provider and is willing to perform the role of the PCP. A
	PCP may also be a Non-physician Medical Practitioner (NMP) (e.g.,
	Nurse Practitioner [NP], Nurse Midwife, Physician Assistant [PA])
	authorized to provide primary care services under supervision of a
	physician. For SPD or Whole Child Model beneficiaries, a PCP may
	also be a Specialty Care Provider or clinic.
Primary Care Provider	A person responsible for supervising, coordinating, and providing initial
(PCP)	and Primary Care to Members; for initiating referrals; and for
	maintaining the continuity of patient care. A Primary Care Provider may
	be a Primary Care Physician or Non-Physician Medical Practitioner.
Prior Authorization	Medi-Cal: A formal process requiring a Provider to obtain advance
	approval for the amount, duration, and scope of non-emergent Covered
	Services.
	OneCare: A process through which a physician or other health care
	Provider is required to obtain advance approval from, CalOptima Health
	and/or a delegated entity, that payment will be made for a service or item
	furnished to a Member.

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Term	Definition
Provider	Medi-Cal: Any individual or entity that is engaged in the delivery of
	services, or ordering or referring for those services, and is licensed or
	certified to do so.
	OneCare: Any Medicare provider (e.g., hospital, skilled nursing facility,
	home health agency, outpatient physical therapy, comprehensive
	outpatient rehabilitation facility, end-stage renal disease facility, hospice,
	physician, non-physician provider, laboratory, supplier, etc.) providing
	Covered Services under Medicare Part B. Any organization, institution,
	or individual that provides Covered Services to Medicare members.
	Physicians, ambulatory surgical centers, and outpatient clinics are some
	of the providers of Covered Services under Medicare Part B.
Qualified Family	A qualified Provider licensed to furnish family planning services within
Planning Practitioner	their scope of practice, is an enrolled Medi-Cal Provider, and is willing
	to furnish Family Planning Services to a Member as specified in Title
	22, Code of California Regulations, Section 51200.
Specialty Care Provider	Provider of Specialty Care given to Members by referral by other than a
(SCP)	Primary Care Provider.

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