

KERN HEALTH SYSTEMS POLICY AND PROCEDURES					
DEPARTMENT: Member Services					
Effective Date:	Review/Revised Date:	DMHC	ng-	PAC	100
08/29/1997	2/20/2020	DHCS		QI/UM COMMITTEE	1-1-4
	2/20/2020	BOD		FINANCE COMMITTEE	

Douglas A. Hayward
Chief Executive Officer

Chief Operating Officer

Director of Member Services

Pate 2/2

Date 2/13/20

Date 7/11/20

POLICY:

Kern Health Systems will assist a prospective member by directing them to the appropriate source for enrollment. The Plan will help ensure that prospective members are given consistent information.

PROCEDURE:

1.0 KHS RESPONSE TO PROSPECTIVE MEMBER INQUIRIES

When a prospective member calls the Member Services Department or presents in person to the Member Services Department, a Member Service Representative (MSR) responds to the prospective member in a variety of ways, depending on the needs of the individual. The MSR engages the individual in a conversation about the Plan which may include a variety of topics depending on the needs or questions asked by the individual.

MSRs are trained to answer member questions regarding the following topics:

- A. How to select a Primary Care Provider (PCP)
- B. KHS Provider Network membership, including Allied Providers and Hospitals
- C. How to utilize services

- D. Location of Member Services
- E. Locations of enrollment assistor sites and when presentations are given
- F. Where to send the enrollment form
- G. How to determine their effective date (who to call)

1.1 Marketing Information

The MSR offers to send Marketing information to the prospective member or inform the individual where it can be picked up. Marketing material is available at the Member Services Department. The packet includes one or more of the following:

- A. Provider Directory
- B. Fold out Marketing Brochure explaining the Plan
- C. Enrollment form and postage paid envelope
- D. Member Handbook

1.2 Restrictions on KHS Activities

1.2.1 Medi-Cal Product

Under no circumstance can an employee of Kern Health Systems receive an enrollment form. Accepting enrollment forms is in direct violation of KHS' contract with the Department of Health Care Services (DHCS). All enrollment forms are to be sent directly to Health Care Options (HCO).

2.0 PROVIDER OFFICES THAT RECEIVE A REQUEST FOR ENROLLMENT

Providers are instructed, via Provider Policies and Provider Orientations, to direct all requests for enrollment to KHS Member Services at (800) 391-2000 so that current, accurate information can be given to the member.

Revision 2020-02: Minor edits to policy. Signature updated. **Revision 2016-11:** Minor revisions to update policy. Reference to Healthy Families removed. ¹ Insurance Code, Section 12693.325