

6: Obstetrician/Gynecologist (OB/GYN) Services

6.1 Background

Members may self-refer to any participating OB/GYN physician for an annual exam, suspected pregnancy, or any other medical visit.

Unison also permits PCPs to perform routine gynecological exams, pap smears and provide pregnancy care if they are so trained and equipped in their offices.

6.2 Role of the OB/GYN

The OB/GYN is responsible for the following:

- Notifying the PCP of the treatment plan and estimated duration of specialty or prenatal care. The OB/GYN may use established means of communicating this information as appropriate.
- Arranging and ordering medically appropriate services as needed.
- Complying with Unison administrative prior authorization guidelines.
- Maintaining a member's medical record and documenting all specialty services provided to the member.
- A willingness and ability to make distinctions between treatment methods consistent with the member's cultural background, and to maintain consistency in providing quality care across a variety of cultures.
- As agreed upon in the Network Participation Agreement, the OB/GYN will (a) not discriminate in providing services to members on the basis of race, color, sex, age, national origin, religion, economic status, source of payment, health status or health care needs; (b) observe, protect and promote the rights of members as patients; (c) maintain a written sexual harassment policy and inform employees of the policy; (d) comply with Title VI of the Civil Rights Act of 1964 in providing Covered Services hereunder; and (e) maintain written procedures as to interpretation and translation services for members requiring such services, including members with Limited English Proficiency.
- Pursuant to regulations implementing the Americans with Disabilities Act ("ADA"), 28 C.F.R. 35.101 et seq., OB/GYN shall not, on the basis of the disability, exclude any individual with a disability from participation herein or from activities provided for hereunder. The OB/GYN shall comply with the "General Prohibitions Against Discrimination," 28 C.F.R. 35.130, and similar regulations or guidelines that apply to the State of Ohio.
- OB/GYN must have a process to identify, keep a record of, and report to Unison upon request members requiring oral translation, oral interpretation or sign language services and provide the use of TTY or language assistance all free of charge for members. Unison's Special Needs Unit may be contacted at 877.844.8844 for assistance in arranging these services. Please note that Unison may conduct periodic audits of OB/GYNs' processes to arrange interpreter services.
- OB/GYNs are prohibited from advising or recommending to an eligible individual that s/he select membership in a particular MCP.

6.3 Eligibility Verification

OB/GYNs do not receive a monthly member roster. Unison recommends that OB/GYNs verify member eligibility prior to each service. Unison offers a number of mechanisms for our providers' use to verify eligibility. Please see the Enrollment and Eligibility section of this manual for details.

6.4 Family Planning Services

A member may self-refer for Family Planning services, including contraceptive care and urine pregnancy tests. Members may self-refer to any provider in or out of the Unison provider network to provide Family Planning services. There is no limit to the number of Family Planning visits a member may have in a calendar year.

6.5 Sterilization

Members must be 21 years of age or older to elect for outpatient sterilization surgery. Prior Authorization must be obtained once the Consent to Sterilization Form (JFS 03198) has been signed and the 30-day waiting period has expired. According to State guidelines, members only have 180 days to act from the date of the signature on the Consent Form.

6.5.1 Hysterectomy

A hysterectomy may not be performed solely for family planning purposes. Members undergoing a hysterectomy procedure must sign the Consent to Hysterectomy Form (JFS 03199). A copy of this form must be submitted to Unison upon request for prior authorization.

6.6 Gynecological Services

A member may self-refer for annual gynecological exams to any Unison participating provider contracted to provide gynecological services. Gynecology providers may order related diagnostic tests such as mammograms and PAP Smears. The gynecological provider should refer the member back to the PCP for services unrelated to the gynecologic diagnosis.

6.7 In-Office Surgery

Any surgeries performed in the office by the gynecologic provider do not require additional authorization prior to rendering services.

6.8 Obstetric Services

A member may self-refer for obstetric services to any Unison participating Provider contracted to provide obstetrical services. An OB Needs Assessment Form must be completed as part of routine prenatal care. Unison has developed this form to identify conditions that may place the member at risk for an adverse pregnancy. A copy of this form may be found with this manual and on the Unison web site at www.unisonhealthplan.com.

The Obstetrician should evaluate OB needs by using the criteria indicated on the OB Needs Assessment Form. A copy of the form must be faxed or sent to the Pregnancy Case Manager within fifteen (15) days from the initial assessment. Please note that OB needs should be assessed throughout the course of the member's pregnancy. In addition, the form may be submitted to the Pregnancy Case Manager at any time during prenatal care if a member's condition constitutes a change of risk status.

Each assessment request will be evaluated to identify the risk status of the pregnancy. The member's PCP must be notified of the pregnancy.

Unison requires an authorization for all inpatient stays. Unison requests that the Utilization Management Department be contacted for authorization as soon as a member is admitted for delivery.

During the course of the pregnancy, the Obstetrician may perform services such as ultrasounds and fetal non-stress tests in the office setting or refer the member to a participating hospital. Routine prenatal care guidelines are outlined in this manual. When ordering specialized services, the Obstetrician must follow Unison administrative policies for prior authorizations.

6.9 Pregnancy Case Management

Members identified as high-risk, via review of the OB Needs Assessment form, will receive case management services designed to support the prenatal care you provide. Please see the Case Management Program Services section of this manual for additional information.

6.9.1 Unison Miracles Program

The Miracles Pregnancy Program is a non-clinical based program implemented by the Unison Integrated Care Management Department. The goal of the program is to assist members in every aspect of prenatal care to promote a safe and healthy delivery.

A Miracles Representative will maintain regular contact with an expectant mom to develop a relationship throughout the time period in which prenatal care is delivered. During this time, the Miracles Representative will address issues such as the member's pregnancy history and current environmental situation. The representative will assist with scheduling prenatal appointments and arranging for transportation when needed.

Unison members are eligible for gift card rewards for keeping their prenatal appointments. Although Unison uses claims data to identify members eligible for rewards, please note that, if timely claims data is not available, we may ask for your assistance in identifying members eligible for rewards.