SUBJECT: Transitional Care under the Patients' Bill of Rights

This is to remind you that beginning in the year 2000 you must be prepared to implement the transitional care provision of the Patients' Bill of Rights.

Members undergoing treatment for chronic or disabling conditions (or in the second or third trimester of pregnancy) at the time they involuntarily change health plans must be able to continue seeing their specialty providers for up to 90 days (or through completion of postpartum care). This also applies when a specialist is terminated by the plan for reasons other than cause. When providers continue to treat such patients, the patients will pay no more than previously.

An "involuntary change" is 1) when a plan terminates the member's specialty provider from the plan's network for other than cause, or 2) when a plan leaves the FEHB Program. These two situations could occur at any time during a contract period. If a plan terminates a specialist from its network for other than cause, the plan must pay for or provide the member's transitional care. If a plan leaves the FEHB Program, the member may enroll in a new plan. If the member is eligible for transitional care, the new plan must pay for or provide it.

It is very important that you understand your role in this. The 90-day transitional care period begins on the day the FEHB member is notified. By giving notice at least a full 90 days prior to leaving the Program or not renewing a specialist's contract, you have met your transitional care obligation. Thus, it is vital that you give members early notice of these events. Enclosed are two model letters for you to use. If you have questions, please contact your OPM contract specialist.

Sincerely,

(signed)
Frank D. Titus
Assistant Director
for Insurance Programs

Enclosure
ENCLOSURE to 99-043

This document is not available electronically at this time and will be sent separately with this Carrier Letter mailing.

Contact Dean Schleicher -- 202/606-0745 -- for this enclosure.