
What is the Patient Review and Restriction (PRR) Program?

The PRR Program focuses on the health and safety of the client.

- It is a mandatory requirement of all Medicaid programs to control over-utilization and inappropriate use of medical services by clients
- This requirement allows restriction of clients to one primary care provider (PCP), one pharmacy, one narcotic prescriber, and one hospital for at least two years
- The Washington Administrative Code (WAC) covering PRR is 388-501-0135 and can be found at <http://apps.leg.wa.gov/wac/>.

What is your role in the PRR Program?

The hospital, particularly the emergency room staff, is a key player in assisting the client's PCP to more effectively manage the client's care to avoid unnecessary and costly services, especially emergency room services.

The Emergency Medical Treatment and Labor Act (EMTALA) of November 2003 requires a hospital to provide an appropriate medical screening examination to any person who comes to the hospital emergency department and requests treatment or an examination for a medical condition. If the examination reveals an emergency medical condition, the hospital must also provide either necessary stabilizing treatment or an appropriate transfer to another medical facility. However, Emergency Departments **are not required to treat patients who have been screened and determined not to have an emergency.**

Education is a major focus of the PRR Program. The hospital can assist in the coordination of care by referring the client back to their PCP, narcotic prescriber, and/or pharmacy, whether treatment is provided or not. Contacting and consulting with the client's PCP ensures that the PCP is made aware of the client's use of services.

How will a hospital know if a client is on restriction?

The client's PCP, pharmacy, narcotic prescriber, and hospital will be notified in writing that the client has been restricted to them as providers. Clients will also be notified in writing of the restriction. In addition, a provider can check:

- (1) The client's medical ID Card, which will have an "X" in the Restriction column. The words "Client on Review" are also printed on the card
- (2) The Medical Eligibility Verification (MEV) system includes information on a client's restricted providers
- (3) The Rapid 270/271 Transaction system (through the WAMed Web application) checks eligibility and includes client restriction information. To find out more about this service, go to: <http://maa.dshs.wa.gov/PRR>.

Will hospital restriction affect hospital billing/reimbursement?

No. Restricting a PRR client to your hospital will not affect your usual billing or reimbursement processes. Hospitals do not need specific authorization to treat a PRR client. This program is designed to support hospitals by reducing inappropriate emergency room usage.

What happens if a PRR client seeks services at a non-assigned hospital?

The client can choose a preferred hospital for non-emergency services. If a client shows up at a non-assigned hospital, the hospital should follow its usual policy and procedures and bill accordingly.

We recommend that you determine a way to flag your system to indicate a PRR client's restriction to your facility. PRR staff can keep you updated on the client's utilization of medical services.

We ask that the hospital contact the client's PCP to ensure the PCP is aware of the services provided. If the client is unable to give the name of a PCP, we ask the hospital to contact the PRR program at 360-725-1780. We will make sure the client's providers are aware of the client's activity.

What happens if the hospital does not contact the client's PCP?

There is no reimbursement or administrative consequences if the hospital does not notify the PCP that the client is seeking services. By being aware of other services sought by the client, the PCP can more effectively manage the client's care such as decreasing inappropriate and costly ER visits.

PRR clients often use the ER for primary care, adding to already overcrowded emergency departments, delaying treatment for critically ill patients, and increasing costs for both the hospital and to the state.

Clients who have been in the PRR Program have shown a 33% decrease in emergency use; a 37% decrease in physician visits; and a 24% decrease in the number of prescriptions.

How do I contact DSHS for questions or concerns, or to make a referral?

Patient Review and Restriction Program
PO Box 45532
Olympia, Washington 98504-5532
Phone: 1-800-794-4360, ext. 51780 or (360) 725-1780
FAX: 360-725-1969
<http://maa.dshs.wa.gov/PRR>
