

F&C	X	PHC (HMO SNP) ⁴	X
MSC+ ¹	X	MnCare	X
PWSHC (HMO SNP) ²	X	Part D	
SNBC ³	X	Other	

Gray text indicates quoted regulatory, statutory, or other language not subject to change

Policy Name	Access to Women's Health Care Services
Policy Number	CC04
Origination Date	May 1, 2002
Revision Effective Date	March 5, 2026
Responsible Position	Utilization Management Manager
Regulatory Requirement(s)	2026 Minnesota Department of Human Services (DHS) Families and Children contract, section 6 2026 DHS Minnesota Senior Health Options/Minnesota Senior Care Plus (MSHO/MS C+) contract, section 6 2026 DHS Special Needs BasicCare (SNBC) contract, section 6 MN Stat. sec. 62Q.14 and 62Q.52 Title 42 Code of Federal Regulations (CFR) Parts 422.112 (a) (1), 422.112 (a) (3), 431.51, 433.116 (f) (2), and 441.20 National Committee for Quality Assurance (NCQA) Standards NET 1 and NET 2
Cross-References	CC05: Access to Care PS04: Provider Network Adequacy UM03: Transition Services
Attachments	

Policy

Pursuant to the above regulatory authorities and accreditation requirements, PrimeWest Health ensures appropriate access to women's health care services, including direct access to network obstetrics and gynecology (OB/GYN) specialists, for female members.

¹PrimeWest Health's Minnesota Senior Care Plus (MSC+) program for members who have only Medicaid coverage through PrimeWest Health

²PrimeWest Health's Minnesota Senior Health Options (MSHO) program for members who have both Medicaid and Medicare coverage through PrimeWest Health

³PrimeWest Health's Special Needs BasicCare (SNBC) program for members who have only Medicaid coverage through PrimeWest Health

⁴PrimeWest Health's Special Needs BasicCare (SNBC) program for members who have both Medicaid and Medicare coverage through PrimeWest Health

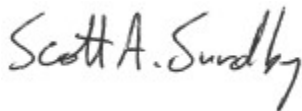
Procedure

- A. PrimeWest Health contracts with family practice providers, obstetrics and gynecology (OB/GYN) specialists, and other health care providers to ensure access to women's health care services for PrimeWest Health members. Members may receive certain family planning services, as described below, from in-network or out-of-network providers. PrimeWest Health adheres to the following procedures for determining access to women's health care services.
1. **Family planning services**
 - a. In accordance with Federal and State law (Title 42 Code of Federal Regulations [CFR] Part 431.51 and MN Stat. sec. 62Q.14), PrimeWest Health does not restrict a member's choice as to where the member receives the following **open access services**:
 - i. Voluntary planning of the conception and bearing of children (not including abortion services)
 - ii. Diagnosis of infertility, including counseling and services related to the diagnosis (for example, provider visits and tests necessary to make a diagnosis of infertility and to inform the member of the results)
 - iii. Testing for and treatment of a sexually transmitted disease/infection (STD/STI)
 - iv. Testing for acquired immunodeficiency syndrome (AIDS) and other human immunodeficiency virus (HIV)-related conditions
 - b. **Open access services** are available from any qualified in-network or out-of-network licensed provider. Providers are reimbursed for these services according to the PrimeWest Health fee schedule.
 - c. After receiving the **open access services** described above, PrimeWest Health requires family planning agencies and other out-of-network providers to refer members back to PrimeWest Health or refer them to in-network providers for other services, diagnoses, treatment, and follow-up care related to the following:
 - i. Abnormal Pap smear/colposcopy
 - ii. Infertility treatment
 - iii. Medical care other than family planning services
 - iv. Genetic testing
 - v. HIV treatment
 - d. PrimeWest Health does not specify confidential services (as defined by the State) in notices about claims sent to members, including the ***Explanation of Benefit (EOB)*** and/or ***Explanation of Medical Benefit (EOMB)*** notices.
 - B. **Direct access to OB/GYN providers**
 1. Pursuant to MN Stat. sec. 62Q.52, PrimeWest Health provides members direct access to any contracted PrimeWest Health provider, including OB/GYN specialists, without a referral or Service Authorization for the following women's health care services:
 - a. Evaluation and necessary treatment for obstetric conditions or emergencies
 - b. Maternity care
 - c. Evaluation and necessary treatment for gynecologic conditions or emergencies, including annual preventive health examinations
 2. Direct access applies to OB/GYN providers within the PrimeWest Health network and/or other established referral patterns, per contractual requirements.

Violation of this Policy or Procedure

No or only partial adherence to this policy or procedure may result in noncompliance with current regulatory requirements and subsequent penalties to PrimeWest Health. Remediation for violators includes, but is not limited to, disciplinary action up to and including termination depending on the circumstances of the situation at the time.

Signatures



Medical Director Approval:

Scott Sundby, MD
Chief Senior Medical Director

Date: 3/5/2026



Board Approval:

Gary Hendrickx, Chair
PrimeWest Health Joint Powers Board of Directors

Date: 3/5/2026