

# NetworkNotes

U.S. Behavioral Health Plan, California (USBHPC) News and Updates for Clinicians and Facilities

Fall 2009

## Affirmative Incentive Statement

Care advocate decision-making is based only on the appropriateness of care as defined by the Level of Care Guidelines, the USBHPC Psychological and Neuropsychological Testing Guidelines, the member's benefit plan, and applicable state and federal laws.

The Level of Care Guidelines were developed to produce consistency in decision-making by the care advocacy and medical staff and to help you reach optimal clinical outcomes.

All treatment certified by USBHPC must be outcomes-driven, clinically necessary, evidence-based, and provided in the least restrictive environment possible. USBHPC does not reward its staff, practitioners or other individuals for issuing denials of coverage or service. Utilization management decision makers do not receive financial or other incentives that encourage decisions that result in underutilization of services.



The USBHPC Level of Care Guidelines and Psychological and Neuropsychological Testing Guidelines are available at [ubhonline.com](http://ubhonline.com). From the [Quick Links](#) menu on the left side of the home page, select "Guidelines/Policies" and scroll down to the Level of Care Guidelines or Psychological and Neuropsychological Testing

Guidelines. If you do not have internet access and wish a paper copy of the guidelines, contact Network Management by email at [email at cns\\_western\\_region@optumhealth.com](mailto:cns_western_region@optumhealth.com), or by calling 1-800-798-3053, ext 12058.

## Care Advocacy Process Provides Peer Review Discussion

USBHPC's care advocacy process offers every clinician the opportunity to discuss a potential adverse determination based on medical necessity with an appropriate peer reviewer at USBHPC before a final determination is made. You may request a discussion with a peer reviewer at any time during the decision

process or after the decision has been made. You may reach a peer reviewer by calling the number shown in the certification letter or an adverse determination letter or by calling the number on the back of the member's insurance card and requesting to speak with a peer reviewer.

# Treatment Record Documentation Standards

USBHPC's treatment record documentation and maintenance standards address content requirements, including coordination of care activities with the member's PCP or other treating clinicians and the member's acceptance or refusal of services through the Language Assistance Program, if applicable. In addition, standards address record organization and retrieval, and patient confidentiality. We require all network clinicians and facilities to maintain records in a manner consistent with these standards and to conform to all applicable statutes and regulations.

We may review your treatment records as part of a scheduled on-site audit that focuses on completeness and quality of documentation. These audits can occur as part of audits of high-volume clinicians, routine random audits, reviews of facilities without national accreditation, and audits concerning quality-of-care issues. USBHPC's performance goal for



treatment record review is 85%. For reviews not meeting this performance goal, USBHPC requires a Corrective Action Plan. Scores under 80% also require a re-audit within six months.

You can find the treatment record documentation requirements in the [USBHPC Network Manual](#),

available online at [www.ubhonline.com](http://www.ubhonline.com). You may also contact Network Management by e-mail at [cns\\_western\\_region@optumhealth.com](mailto:cns_western_region@optumhealth.com), or by calling 1-800-798-3053, ext 12058 to request a copy by mail.

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## USBHPC Public Policy Committee

In accordance with California law, USBHPC leads a Public Policy Committee to provide a formal structure for the comments and participation of covered enrollees and employer and health plan representatives. This committee consists of at least three subscriber enrollees of USBHPC, one USBHPC contracted clinician and one representative from the USBHPC Board of Directors.

The Public Policy Committee functions as a focus group to evaluate care

and service proposals and to define USBHPC's public policy in accordance with the state's Knox-Keene Act. In addition, the committee reviews and discusses:

- USBHPC's growth, management and fiscal updates
- Summary and trend reports on enrollee grievances and appeals, including information on the nature, volume and disposition of these actions

- Enrollee and clinician satisfaction survey results and enrollee satisfaction activities
- Enrollee Rights and Responsibilities and other enrollee communications

The Public Policy Committee meets quarterly, and reports to the USBHPC Board of Directors. For more information regarding committee membership, please contact Eileen Innecken, USBHPC Director of Regulatory Affairs, at 1-800-798-3053, ext. 16907.

# Best Practice and Supplemental & Measurable Guidelines

USBHPC's Supplemental and Measurable Guidelines for the Treatment of Major Depressive Disorder (MDD) and Attention-Deficit/Hyperactivity Disorder (ADHD) were established to supplement the Best Practice Guidelines and assist with improving effective treatment. The Supplemental and Measurable

Guidelines, along with the Best Practice Guidelines, can be found at ubhonline. From the home page, select "Guidelines/Policies" from the Quick Links in the left side bar menu and scroll to "Best Practice Guidelines" for "UBH/USBHPC/PBHC" or select "Supplemental and Measurable Guidelines". If you do not have access

to the internet and would like to receive a copy of these guidelines, please contact Network Management by e-mail at [cns\\_western\\_region@optumhealth.com](mailto:cns_western_region@optumhealth.com), or by calling 1-800-798-3053, ext 12058.

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## Blue Shield of California Mental Health Service Administrator

Blue Shield of California has contracted with USBHPC as its Mental Health Services Administrator. As such, references to USBHPC have been changed on all member-related materials and resources (i.e., telephone prompts, authorization letters, and adverse determination letters) to Blue Shield of California's or Blue Shield of California Life & Health Insurance Company's Mental Health Service Administrator (Blue Shield MHSA).

All documents provided by USBHPC for your Blue Shield members (Enrollee Rights and Responsibilities and Grievance Form) have been replaced with newly updated versions that reference Blue Shield MHSA. These forms are available through [ubhonline.com](http://ubhonline.com) in the USBHPC Network Manual. Please remember to use these documents for your Blue Shield of California members.

### Preventive Health Programs

As Blue Shield's Mental Health Service Administrator, we offer Blue Shield members Preventive Health Programs for Depression and Attention Deficit Hyperactivity Disorder (ADHD), which support early detection, the delivery of quality care and treatment success. To request

materials or refer a Blue Shield member to one or both of these programs, please call 1-619-641-6335 and leave your name, mailing address and the information you would like to receive.