

Behavioral Health Clinical Review Process

In an effort to ensure comprehensive clinical decisions, Passport Advantage has recently improved our process for reviewing behavioral health prior authorization (PA) requests. Please adhere to the following guidelines in order to receive timely responses to your requests for PA of initial and concurrent reviews.

Deadlines for Initial Inpatient Admission and Ongoing Continued Stay Reviews

Providers must send all required information to Passport Advantage in a timely manner in order to be furnished with a thorough decision. Therefore, please follow these PA request deadlines:

- Initial precertifications must be submitted within one business day of the admission.
- We encourage providers to submit concurrent reviews by 1:00 p.m. on the last covered day.

Information Needed Upon Submission

In order for our Behavioral Health Care Coordination (BHCC) program to process a request for PA, all of the following information must be included in your original submission. Please note that these are based on Interqual guidelines, and are the American Psychiatric Association (APA) minimum-necessary guidelines for third party payors, endorsed by the U.S. Surgeon General Report 12/99 Chapter 17.

Information Required For Inpatient Initial Review

- Axis 1 - 5
- Highest Global Assessment of Functioning (GAF) known in the past year
- Is member on a 72 hour hold or Mental Inquest Warrant?
- Who brought the patient to the hospital?
- Current outpatient information including:
 - o Medications
 - o Who is the member's primary provider, outpatient psychiatrist, and therapist? (Names and phone numbers if available)
- Living situation and support system
- Family history of mental health or substance abuse
- Patient abuse history
- Patient legal history
- Patient chemical dependency history or current issues, including substance evaluation and treatment history
- Estimated length of stay
- Labs ordered and vital signs
- Outpatient behavioral health history

- Precipitating event and reason for admission
- Behavioral health inpatient history
- Treatment plan including medications, precautions, individual, group, or family therapy and discharge plans

Information Required For Inpatient Concurrent Review

- Any diagnosis changes
- Dates of medication changes or additions
- PRN medications and dates when given
- Therapeutic holds, quiet room, seclusions
- Precautions including current checks
- Results of labs
- Vital signs
- Symptoms and behaviors within the last 48-72 hours
- Is the member suicidal, homicidal, or having command hallucinations? If so, describe the symptoms
- Family session information
- If member has CD issues: any withdrawal symptoms, cravings?
- Treatment plan, discharge plan and estimated length of stay

Information Required For A Discharge Review

- Verify address and phone number of member
- Discharge date, diagnosis and medications
- Mental status at the time of discharge
- Where is member discharging to? (home, with family, friend, halfway house, etc.)
- Outpatient follow-up including name/ phone number of practitioners and appointment times

A BHCC program nurse will attempt to contact the member's attending practitioner to obtain this information if it is not included.

Medical Review Process

After all required information is submitted, a nurse will complete the review utilizing InterQual criteria.

If the information submitted meets InterQual criteria, the services will be approved for payment. The BHCC nurse will call you with an authorization number within 24 hours of receiving the required information.

If the information submitted does not meet InterQual criteria, the following process will occur within 24 hours of receiving the required information:

Step 1: Review by the Medical Director

If our BHCC staff is unable to approve your PA request, the review proceeds to our Behavioral Health Medical Director, who must make a decision within 24 hours of the original receipt of information.

Step 2: Notice of Approval or Denial

- If approved: The BHCC nurse will call you with an authorization number.
- If denied: Passport Advantage will issue a denial letter to the inpatient facility, the member, and the attending practitioner. The BHCC nurse will also call the facility and attending practitioner of the denial determination.

Optional Step 3: One Opportunity for Peer-to-Peer Review

Providers have one opportunity to initiate peer-to-peer review to discuss this denial period with the Behavioral Health Medical Director. The Medical Director's contact information will be included in the denial letter. However, anything beyond this one opportunity will be addressed in the provider appeal process upon the member's discharge.

Optional Step 4: Although the Centers for Medicare & Medicaid Services (CMS) do not require any further review of a PA request, Passport Advantage offers providers one level of appeal. We believe it is important to ensure our members receive the care they need.

Please note if the member would like to file an appeal, this process will be outlined in the denial letter.

Criteria Utilized For Medical Reviews

All reviews take into account age, co-morbidities, complications, progress of active treatment, psychosocial issues, the home environment, other individual needs and the availability of alternative related services within the Passport Advantage provider network, utilize the InterQual Behavior Health Criteria, APA guidelines, federal Medicare guidelines, medical protocols, and/or accepted standards of care to determine if the request is approved or denied.

CMS follows and recommends training on InterQual guidelines for behavioral health providers. For more information or to obtain training, please visit www.InterQual.com.

Behavioral Health Services Requiring Precertification

Passport Advantage requires precertification for all acute inpatient care.

Definition of Acute Care

Passport Advantage reimburses acute inpatient care services, which are defined as:

- **Service to a member who poses a threat to themselves or others.**
- **Service to a member that requires daily, active treatment.**
CMS definition: "Payment for inpatient facility services is to be made only for 'active treatment' that can reasonably be expected to improve the patient's condition."
- **Service to a member that meets CMS admission requirements.**

CMS admission requirements: “For all inpatient facilities, a provisional or admitting diagnosis must be made on every patient at the time of admission, and must include the diagnosis of comorbid diseases as well as the psychiatric diagnosis. In addition, distinct part psychiatric units of acute care hospitals and critical access hospitals are required to admit only those patients whose admission to the unit is required for active treatment, of an intensity that can be provided appropriately only in an inpatient hospital setting.”

Other Services Reimbursed by Passport Advantage

Passport Advantage also reimburses partial hospitalization and outpatient services for behavioral health. These do not require precertification.

Additional Assistance for Providers

Our Behavioral Health Care Coordination Program (BHCC) is available to assist providers in managing the changing needs of members. Passport Advantage members may be considered for the program if they present behavioral health issues or serious physical health conditions that can exacerbate or interfere with behavioral health treatment.

Please contact the BHCC department at (800) 578-0636, option 1, then follow the prompts for behavioral health, between the hours of 8 a.m. and 5 p.m., Monday through Friday. Please leave a message if calling after hours. You may also send a fax to (502) 585-7997. Also, please visit our new web page on the Passport Advantage Provider Center of www.passporthealthplan.com.