

Updated Only for Logo and Branding

Provider Notice

To: All HealthChoices Providers
Date: September 5, 2002
Subject: AD 02 011 Medication Management and Partial Hospital Requirements
Original Issue Name "AD 02 #12 Provider Info Clinical Updates"

PerformCare continually strives to answer questions and to clarify issues brought to our attention. Providers are the driving force in delivering clinically appropriate and medically necessary services to our Members. Please share these clarifications immediately with staff responsible for these activities. Be sure to file this *Provider Info*, and others like it, in your *Provider Manual*. Additionally, you are invited to check the corporate web site for more information.

Included in this *Provider Info*:

Med Management and Therapy as Stand Alone Services

I. MH Partial Hospitalization as an all-inclusive service

I. Med Management and Therapy as Stand-Alone Services

It is the expectation of PerformCare that network providers recognize a few key points under managed care. The following points are posed relative to medical necessity and Member choice.

- Member choice is a cornerstone of the HealthChoices Program.
- PerformCare Clinical Care Management staff is charged with determining medical necessity of all services rendered to PerformCare Members.

As Providers, the following should be considered:

1. The Clinical Care Manager will work with the Provider to determine the appropriate level of care. Providers should contact the Clinical Care Manager (CCM) immediately for authorization if they find that an individual in their care has switched to PerformCare for behavioral healthcare coverage.
2. If you, as a Provider, recognize the need for additional services, you should contact the Clinical Care Manager for direction. The CCM may ask you to help coordinate services with the new provider.
3. If your program involves multiple levels of care, for instance partial, intensive outpatient

and outpatient, the CCM will take the lead in determining treatment level for Members. For example, the CCM may authorize for services to begin as outpatient even though your program typically starts all consumers at the partial level.

4. Providers may not require Members to participate in multiple services in order to access care. For example, a Provider may not require that all Members who receive Medication Management also receive outpatient therapy. A Provider may, and should recommend additional services to the Member and to the Clinical Care Manager when appropriate.

II. MH Partial Hospitalization as an all-inclusive service

When authorizing MH Partial Hospitalization, PerformCare expects that all services, including individual therapy and medication management, are rendered as part of Partial per PA Code Chapter 1153.52 (b) (2). Such services should not be scheduled on separate days and billed separately. If individual and/or medication management are medically necessary then treatment needs to be scheduled on a day the member is regularly scheduled to attend partial. Individual and medication management is not reimbursable when provided on non-partial days of attendance. PA Code Chapter 1153.52 (b) (2).