PerformCARE®

Annual Medical Necessity Guidelines review

As per PerformCare policy CM-017: PerformCare Review of Medical Necessity Guidelines, PerformCare reviews medical necessity guidelines and NCQA standards annually.

Psychological and Neuropsychological Testing is authorized by PerformCare, as per policy CM-012: Authorization of Psychological and Neuropsychological Testing & Guidelines. Medical Necessity (MN) is determined using PerformCare's Testing Medical Necessity Guidelines (MNGs), relevant OMHSAS Appendix T MNG principles, and current professional standards. PerformCare Testing MNGs specify the testing must be for a specific purpose, which cannot be accomplished by other clinical interview and is not primarily for educational or vocational purposes.

Music Therapy is authorized by PerformCare as per policy CM-047: Authorization and Delivery of Music Therapy Services. MN determinations are as per PerformCare Music Therapy MNG. These specify the treatment must be delivered as outpatient treatment by a credentialed professional who has completed an approved Music Therapy program. This modality is primarily used for the ASD population and can be effective for improving self-expression, improving peer interactions, emotional expression, and affect modulation. These areas need to be addressed by the mental health system not because of a desire to aid in developmental progression but because they are demonstrated to be part of behavioral health symptoms that bring this Member to the mental health treatment arena (e.g., physical aggression).

Community Residential Rehabilitation-Host Home (CRR-HH) is authorized by PerformCare per policy CM-CAS-053: CRR-HH Initial and Re-authorization Process. CRR-HH is a type of mental health treatment that is provided in a family-like setting and is most appropriate for Members whose behavioral health needs prevent effective treatment from occurring within the family home or current living arrangement (e.g., guardian). This service is also authorized by PerformCare on the basis of PerformCare CRR-HH MNGs which recommend the service when Member behaviors are of such significance that there is a negative impact on family relationships and dynamics, and behaviors interrupt the ability to maximize Member and family functioning; and, although the intensity of the behaviors is not able to be managed in the Member's home setting, the Member can function safely within the community, even if behavioral support is needed.

Assertive Community Treatment (ACT) is authorized by PerformCare per OMHSAS bulletin OMHSAS-08-03. ACT is a consumer-centered, recovery-oriented mental health service delivery model that has received substantial empirical support for facilitating community living, psychosocial rehabilitation, and recovery for people with the most serious mental illnesses and impairments who have not benefited from traditional outpatient programs.

IBHS services are authorized by PerformCare per OMHSAS Appendix S MNG for individual services, Applied Behavior Analysis and group services. The basics of the MNG are that the services can be reasonably expected to be therapeutic, the child does not need a higher level of care for safety, and the number of hours prescribed is necessary or there is some other medical necessity.

All other Mental Health levels of care are authorized by PerformCare per OMHSAS Appendix T and ASAM for SUD Services.

All denials of care are completed by a PerformCare Physician or Psychologist Advisor in accordance with OMHSAS Appendix AA and PerformCare policy CM-013: Approval/Denial Process and Notification.