

## POLICY AND PROCEDURE

<b>DEPARTMENT:</b> Utilization Management	<b>DOCUMENT NAME:</b> Authorizations for Second Clinical Opinions
<b>PAGE:</b> 1 of 2	<b>REFERENCE NUMBR:</b> LA.UM.94
<b>APPROVAL DATE:</b> 8/2018	<b>REPLACES DOCUMENT:</b> EPC.UM.216
<b>EFFECTIVE DATE:</b> 9/1/2018	<b>RETIRED DATE:</b>
<b>PRODUCT TYPE:</b> Medicaid	<b>REVIEW/REVISED DATE:</b> 8/19, 6/20

### SCOPE: Utilization Management

This policy and procedure applies to all Louisiana Health Care Connections (LHCC) staff involved in the design, implementation, operations, and management of utilization management services.

### PURPOSE:

To provide the opportunity for a second opinion from a provider with appropriate expertise to confirm or clarify a diagnosis or proposed treatment plan upon the request of a treating provider, member or any member of the treatment team.

### POLICY:

LHCC Utilization Management clinical reviewers (UMCR) will facilitate second opinions for care when appropriate.

### PROCEDURE:

- 1) A second opinion may be requested by any member of the healthcare team, including member, parent and/or guardian or social worker exercising a custodial responsibility from a network provider, or arrange for the member to obtain one outside the network, at no cost to the member (~~RFP~~ Emergency Contract 7.1.8)
- 2) Second opinion consultations must be pre-authorized by a ~~UMCR~~ Utilization Manager and must be conducted by a licensed physician or other member of the practitioner network with experience appropriate to the specific case.
- 3) Consultations by out-of-network practitioners will only be allowed in cases where an in-network practitioner is not geographically convenient to the member and/or the case requires a specialty-type practitioner not currently available within the practitioner network.
- 4) The request for a second opinion may be received either orally or in writing.
- 5) The ~~Utilization Management clinical reviewer (UMCR)~~ will contact the selected consultant to provide pertinent clinical information and review documentation requirements for the consultation. The ~~UMCR~~ will also notify the member/member's treating practitioner(s) of the consultation and, in inpatient cases, will notify the facility.
- 6) The consultant will also be asked to ~~make~~ provide a ~~verbal or~~ written report and recommendation to the UMCR .
- 7) The ~~UMCR~~ will discuss the consultant's recommendations with the treating practitioner and other involved parties in an effort to revise the treatment plan.
- 8) Payment for a second opinion consultation will be as follows:

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- a) For an inpatient consultation, the selected practitioner will be authorized for an inpatient evaluation/consultation.
- b) For an outpatient consultation, the selected practitioner will be authorized for an evaluation.

**REFERENCES:**  
**LA MCO Statement of Work Dated 9/5/2019**

**ATTACHMENTS:**

**DEFINITIONS:**

### **REVISION LOG**

<b>REVISION</b>	<b>DATE</b>
Added RFP Reference 7.1.8; Added Clinical Reviewer to Utilization Management (UMCR); Added Louisiana Healthcare Connections to Scope to identify staff; Changed Utilization Manager to UMCR; Removed Definitions for NCQA Standards & Guidelines	8/2019
<b><u>Changed RFP to Emergency Contract</u></b> <b><u>Grammatical Changes</u></b> <b><u>Removed verbal report</u></b> <b><u>Added Reference Section</u></b>	<b><u>6/2020</u></b>

### **APPROVAL**

The electronic approval retained in RSA Archer, the Company's P&P management software, is considered equivalent to a signature.

V.P. Medical Management: \_\_Signature on file\_\_  
Sr. VP, Medical Affairs: \_\_Signature on file\_\_

Sr. VP of Population Health: Electronic Signature on File  
Chief Medical Officer: Electronic Signature on File