

Medical Interface Manual

For IPAs and medical groups and their contracted providers.

January 2024

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Section 1: Introduction

Since significant overlap can occur between medical problems, mental health and substance use disorders, HAI-CA, a subsidiary of Magellan Health Services, Blue Shield of California's (Blue Shield) mental health service administrator (MHSA) wants to facilitate treatment of members that is coordinated between the behavioral health provider and the physician. The purpose of this manual is to provide IPAs and medical groups with an overview of Blue Shield and Blue Shield MHSA protocols developed to promote the integration of medical and behavioral health treatment. The term Behavioral Health refers to Mental Health and Substance Use Disorder throughout this manual.

This manual is intended as a guideline for the physician and office staff to coordinate the provision of behavioral and medical services to Blue Shield's members and to clearly identify the responsible party for mental health and substance use disorder services including mixed services.

Blue Shield MHSA values and promotes effective and proactive operational interactions with medical colleagues as a vital component of quality patient care. We look forward to partnering with you to improve the clinical outcomes of members.

Section 2: Medical Care Solutions Interface Procedures

Blue Shield MHSA intake, care management, and after-hours staff will coordinate appropriate communication with all medical providers. The MHSA's intake, care management, and after-hours staff will make referrals to Blue Shield's Medical Care Solutions Department when it is determined that the primary diagnosis is medical in nature, rather than Behavioral Health. The MHSA's intake, care management, and after-hours staff will receive referrals when the primary diagnosis is determined to be Behavioral Health in nature.

If the primary diagnosis is medical in nature, Blue Shield's Medical Care Solutions staff will notify the IPA or medical group regarding their responsibility to manage the members' medical care based on the contractual delegation of services.

A. Referral Procedures

Blue Shield MHSA will respond to requests for Behavioral Health services from the member, Blue Shield, the PCP, or other licensed health professional, consistent with the California Department of Managed Healthcare (DMHC) established standards for managed behavioral health organizations.

Section 2: Medical Care Solutions Interface Procedures *(cont'd.)*

Blue Shield MHSA staff members have access to Blue Shield MHSA medical directors 24 hours a day, seven days a week to enable toll free access to care for Blue Shield members at all times, as follows:

1. If Blue Shield MHSA determines on initial contact that the diagnosis is medical in nature, the Blue Shield MHSA care advocate or intake coordinator will refer the member back to either Blue Shield Medical Care Solutions, or the member's PCP, IPA, or medical group.
2. If the member's PCP determines that the member is in need of Behavioral Health evaluation/treatment and would like to make a referral for such treatment, the PCP or his/her representative should call Blue Shield MHSA at (877) 263-9952 to be connected to a licensed mental health clinician Blue Shield MHSA staff who will facilitate the request. Members can self-refer to Blue Shield MHSA through toll-free telephone access at (877) 263-9952 and do not need a referral from the IPA or PCP.

Requests for emergent evaluations can be made through either of the above toll-free numbers, by direct referral to an emergency room or direct referral for mental health emergency treatment, or by dialing 911.

Requests for Behavioral Health consultations while a member is admitted to a medical/surgical facility can be made through either of the above toll-free numbers. Blue Shield MHSA will review and authorize the case according to protocols established in this manual.

B. Triage Guidelines

The Triage Guidelines are designed to clarify the lines of behavioral health care management and IPA/medical group care management for members with complex clinical conditions, as described in the Behavioral Health Services Agreement between Blue Shield MHSA and Blue Shield. IPA/medical group and Blue Shield MHSA are responsible for coordinating care for these complex members to ensure timely access to care and coverage of care rendered.

The following guidelines determine the assignment of care management and financial responsibility in the majority of mixed service cases.

Section 2: Medical Care Solutions Interface Procedures *(cont'd.)*

1. Place of service - medical / surgical v. Behavioral Health unit / facility

Based on the place of service (medical/surgical setting vs behavioral health unit/facility), Blue Shield MHSA assumes responsibility for coverage of behavioral health professional services. Below are common scenarios of responsible party coverage:

- Facility charges related to medical treatment in a medical/surgical setting (ambulatory or inpatient) for gender affirming care, eating disorder, substance use disorder, or medical stabilization as a result of a mental health condition are the responsibility of Blue Shield or the IPA/medical group, regardless of mental health diagnosis. Blue Shield and the IPA/medical group will be responsible for the care management and assume financial responsibility provided to the member depending on the contract.
 - See #2 below for Behavioral Health Consultation delineation of responsibility.
- Facility charges related to treatment in a behavioral health unit or facility for the treatment of modifiable behavioral health conditions is the responsibility of Blue Shield MHSA.

2. Type of professional (attending, consultant) primary care / medical – surgical v. Behavioral Health

Blue Shield MHSA assumes responsibility for coverage of professional services rendered by in-network MHSA Behavioral Health providers or out of network providers when access to care or continuity of care applies. Below are common scenarios of coverage responsibility:

- If a Behavioral Health consultation is required in a medical/surgical setting, Blue Shield MHSA will assume the care management and financial responsibility of the consultative service, including special procedures, and tests associated with the Blue Shield MHSA consultative service.
- If the Behavioral Health consultant identifies a condition may have an organic component that would require formal diagnostic tests (e.g., EEG, MRI, CAT SCAN, EKG, Genetic Testing, etc.), these tests would continue to be the responsibility of Blue Shield or the IPA/medical group **and requires** the express authorization of Blue Shield or the member's IPA/medical group as required under the member Plan benefit.

3. Primary clinical condition / focus of Outpatient Behavioral Health treatment

Payment for outpatient behavioral health services are subject to eligibility at the time of service, benefit limitations, medical policies, and prior authorization if applicable. Below is a common scenario of coverage responsibility:

- As an example, if a member has a traumatic head injury with cognitive changes resulting in a mental health disturbance, Blue Shield MHSA, where appropriate, requires notification and preauthorization. Blue Shield MHSA will assume responsibility for mental health services provided by Blue Shield MHSA psychiatrist/psychologist/behavioral specialist.

Section 2: Medical Care Solutions Interface Procedures *(cont'd.)*

C. Covered MHPA Services

The following chart provides a useful reference to covered Behavioral Health services. The specific clinical situation must be evaluated within the context of place of service, the attending provider's area of specialty, and the primary diagnosis, pursuant to Section B above. Payment for services are subject to eligibility at the time of service, benefit limitations, and prior authorization, if applicable.

| Description of Services | Services Included |
|---|---|
| Emergency Room | <ul style="list-style-type: none"> Behavioral Health consultations. Blue Shield MHPA will cover emergency screening exams as required by Health & Safety Code § 1371.4. All other emergency room professional, technical, and facility charges are excluded from MHPA responsibility |
| Outpatient Mental Health/Substance Use Disorder | <ul style="list-style-type: none"> Behavioral health professional services. Diagnostic assessment and outpatient treatment, including but not limited, to individual and group therapy, psychiatric consultations, and medication management. Psychological and Neuropsychological testing regardless of the diagnosis performed by MHPA in Network provider. Behavioral Health consultations to evaluate a member prior to a surgical procedure provided the member is referred to an In Network MHPA provider for consultation. Intensive outpatient treatment programs (IOP). Specialized psychological treatment programs or service. Electroconvulsive therapy (ECT) including anesthesiology. Office-Based Opioid Treatment (OBOT) – Opioid detoxification and/or maintenance therapy, takes place in a provider's office. Methadone Maintenance – Opioid Treatment Program (OTP) for heroin or other opiate addictions – Daily doses of methadone to block the euphoric and sedating effects of opiates, reduce the cravings, and relieve the symptoms associated with withdrawal. Repetitive Transcranial Magnetic Stimulation (rTMS) and Theta Burst TMS – A non-invasive method of delivering electromagnetic stimulation to the brain for the treatment of severe depression. Telehealth/telemedicine for behavioral health. Behavioral Health counseling and other behavioral services related to gender affirming care. With respect to members enrolled in HMO or POS benefit plans, diagnostic tests ordered/administered by an MHPA provider without the express authorization of the member's IPA/medical group (MHPA may require MHPA providers to be financially responsible for such costs as long as the member is held harmless). |

| Description of Services | Services Included |
|--|--|
| Behavioral Health Treatments (BHT) including, Applied Behavior Analysis (ABA) | <ul style="list-style-type: none"> • BHT – Professional services and treatment programs, including applied behavior analysis and evidence-based intervention programs, which develop or restore, to the maximum extent practicable, the functioning of an individual with pervasive developmental disorder or autism. • BHT is covered when prescribed by a physician or licensed psychologist and treatment is provided under a treatment plan approved by the MHSA. BHT delivered in the home or other non-institutional setting must be obtained from MHSA Participating Providers. For PPO plans, always check member benefits to see if they have out-of-network ABA coverage. |
| Partial Hospital Days or Day Treatment | <ul style="list-style-type: none"> • Facility services. • Behavioral Health professional services. • All partial hospital treatment or day treatment medically necessary to prevent full-time hospitalization or to provide transition services to allow early discharge from full-time hospitalization. • Routine diagnostic procedures and services related to the admission diagnosis. After completion of a comprehensive Behavioral Health evaluation and neurological evaluation, if the Behavioral Health provider or neurologist determines the neuropsychological testing is required, the provider will request authorization and coordinate the request, Blue Shield MHSA will cover Neuropsychological testing when, the purpose of testing is to clarify whether there is a psychiatric diagnosis (even when medical conditions are present). |
| Residential Treatment Services | <p>The Inpatient Residential Program is a program provided in a licensed facility that provides structured 24-hour residential services designed to promote treatment and maintain recovery and not intended to be long term care.</p> <p><u>Mental Health Treatment Services</u></p> <p>The Residential Mental Health Treatment Program is provided in a licensed facility which operates in accordance with applicable California state law and provides 24 hour residential care, pursuant to written, specific, and detailed treatment programs for full time participating clients under the direction of an administrator and physician for chronic mental health conditions.</p> <p><u>Substance Use Disorder Services</u></p> <p>The Residential Care Substance Use Disorder Condition Program is a program provided in a licensed facility that provides structured 24-hour residential services designed to promote treatment and maintain recovery from the recurrent use of alcohol, drugs, and/or related substances, both legal and illegal, including but not limited to: subacute detoxification (if facility is appropriately licensed), dependence, intoxication effects, biological changes, and behavioral changes.</p> <p>Please consult the members' benefit plan for detailed benefit coverage information.</p> |

| Description of Services | Services Included |
|--|--|
| Inpatient Mental Health/ Substance Use Disorder (Rehab) | <ul style="list-style-type: none"> • Facility services. • Behavioral Health professional services. • Histories and physicals required for Blue Shield MHSA admissions. • Inpatient treatment programs and services. • Routine diagnostic procedures and services related to the admission diagnosis. • Electroconvulsive therapy (ECT) including anesthesiology medication (all routes). |
| Inpatient Medical/Surgery | <ul style="list-style-type: none"> • Behavioral Health consultations for members in medical/surgical beds. • With respect to members enrolled in HMO or POS benefit plans, diagnostic tests ordered/administered by the MHSA provider without the express authorization of the member's IPA/medical group (MHSA may require MHSA providers to be financially responsible for such costs as long as the member is held harmless). |

Section 2: Medical Care Solutions Interface Procedures *(cont'd.)*

D. Common Interface Scenarios and Examples

The following chart describes common clinical situations where medical and Behavioral Health services overlap. Please note that the areas described below also assign care management and financial responsibility consistent with the Behavioral Health Services Agreement between Blue Shield and the MHSAs.

| Clinical Situation | Place of Service | Provider Type | Primary Diagnosis | Responsibility |
|--|--|--|--|---|
| Primary medical presentation in ER with secondary Behavioral Health considerations | Emergency room | Non-Behavioral Health physician | Medical/surgical or Behavioral Health | Blue Shield/IPA |
| Primary Behavioral Health presentation in ER with no indication for emergent medical evaluation | Emergency room | Behavioral Health clinician | Behavioral Health | Blue Shield MHSAs are responsible for Behavioral Health consult only |
| Behavioral Health Telehealth/telemedicine for homebound member with hip replacement, complains of anxiety, restlessness after stopping pain meds | Home utilizing telehealth/telemedicine | MHSA Behavioral health clinician utilizing telehealth/telemedicine | Medical/surgical or Behavioral Health | Blue Shield MHSAs |
| Member diagnosed with gender dysphoria and is seeking services for depression | Office-Based | Behavioral Health clinician | Behavioral Health | Blue Shield MHSAs |
| Individual dependent on opioids | Office-Based Opioid Treatment | Licensed Physician with DEA waiver to prescribe buprenorphine | Substance Use Disorder with or without Mental Health comorbidity | Blue Shield MHSAs when provided by an MHSA in-network Behavioral Health clinician or with MHSA prior authorization. Blue Shield/IPA when provided by an MHSA out-of-network Behavioral Health clinician or non-Behavioral Health Licensed Physician unless access to care applies. |
| Transcranial Magnetic Stimulation (TMS) | Physician's office | Licensed Physician with | Major Depressive | Blue Shield MHSAs when provided by an MHSA in- |

| Clinical Situation | Place of Service | Provider Type | Primary Diagnosis | Responsibility |
|--|---|---|---|--|
| which is medically necessary and for FDA approved indications. | | university-based training in TMS | Disorder, Severe | network Behavioral Health clinician or with MHSA prior authorization. Blue Shield / IPA when provided by an MHSA out-of-network Behavioral Health clinician or non-Behavioral Health Licensed Physician unless access to care applies. |
| Acute medical detoxification | Blue Shield approved detox bed or unit in a general acute care facility | Medical/ surgical or psychiatrist/ addiction specialist | Medical diagnosis, such as: Acute alcohol withdrawal, acute benzodiazepine withdrawal, delirium tremens, seizures due to substance withdrawal | Blue Shield/IPA Exception: Blue Shield MHSA approved Behavioral Health services (inpatient consultation, and special procedures, and tests associated with the Blue Shield MHSA authorized consultative service) unless access to care applies. |
| Substance Use Disorders | Blue Shield MHSA approved Behavioral Health admission in a rehab facility, inpatient psych facility, residential treatment center (RTC), partial hospitalization program (PHP), or intensive outpatient program (IOP) | Behavioral Health clinician | Substance Use Disorder | Blue Shield MHSA |
| Chronic pain | Medical/surgical or structured pain program, facility, or clinic | Medical/ surgical | Medical/ surgical | Blue Shield/IPA |
| Chronic pain (inpatient consultation, psychotherapy, | Blue Shield MHSA approved mental health | Blue Shield MHSA psychiatrist/ | Medical/ surgical or | Blue Shield MHSA (Pain management consultation and |

| Clinical Situation | Place of Service | Provider Type | Primary Diagnosis | Responsibility |
|---|---|---|---------------------------|--|
| biofeedback, psychiatric tests, etc.) | services in a Medical/ surgical or structured pain program, facility, or clinic | psychologist/ Behavioral Health specialist | Behavioral Health | recommendations for alternative pain management modalities would be the responsibility of the IPA) |
| Psychogenic pain (inpatient consultation, psychotherapy, biofeedback, psychiatric tests, etc.) | Blue Shield MHSA approved mental health services in a Medical/ surgical or structured pain program, facility, clinic or Behavioral Health specialist office | Blue Shield MHSA psychiatrist/ psychologist/ Behavioral Health specialist | Mental Health | Blue Shield MHSA Tests to confirm psychogenic etiology are Blue Shield/IPA's responsibility |
| Mental health or emotional disturbance when a head injury with cognitive changes are present (consultation, psychotherapy, biofeedback, neuropsychological testing, etc.) | Medical facility, clinic, or Behavioral Health specialist office | Blue Shield MHSA psychiatrist/ psychologist/ Behavioral Health specialist | Mental health and medical | Blue Shield MHSA |
| Medical management of delirium, dementia or amnesia due to medical etiology | Medical/surgical facility or clinic | Medical/ surgical | Medical/ surgical | Blue Shield/IPA |
| Behavioral Health management of an acute Behavioral Health disorder with delirium, dementia or amnesia (inpatient consultation, psychotherapy, biofeedback, neuropsychological testing, etc.) | Blue Shield MHSA approved mental health services in a Medical facility, clinic or mental health specialist office | Blue Shield MHSA psychiatrist/ psychologist/ Behavioral Health specialist | Behavioral Health | Blue Shield MHSA It is the responsibility of the Blue Shield/IPA to rule out medical etiology. |

| Clinical Situation | Place of Service | Provider Type | Primary Diagnosis | Responsibility |
|--|---|---|---------------------------------------|------------------|
| Anorexia/bulimia (inpatient/outpt consultation, psychotherapy, psychiatric tests, etc.) | Blue Shield MHSA approved mental health services in a Medical/surgical, facility, clinic or mental health specialist office | Blue Shield MHSA psychiatrist/ psychologist/ mental health specialist | Mental Health | Blue Shield MHSA |
| Anorexia/bulimia – with medical complications | Medical/surgical facility or clinic | Nutritional counselor or Medical/surgical | Medical/surgical or Mental Health | Blue Shield/IPA |
| Routine pre-ECT evaluation for medical stability | Lab (CXR, ECG, blood chemistry, CBC), Anesthesia clinic (consultation) | Blue Shield MHSA psychiatrist | Mental Health | Blue Shield MHSA |
| Speech Therapy Occupational Therapy | Facility, rehabilitation clinic | Speech Language Pathologist, Occupational Therapist | Autism spectrum disorder | Blue Shield/IPA |
| Differential diagnosis of ADHD (Neurological evaluation) | Facility or clinic/office | Pediatric neurologist | ADHD | Blue Shield/IPA |
| Member's physical condition requires emergency transportation to an ER or medical/surgical facility | Emergency transportation | N/A | Medical/surgical or Behavioral Health | Blue Shield/IPA |
| Blue Shield MHSA approved transportation for direct admissions to an Behavioral Health unit or facility from a medical/surgical facility | Transportation | N/A | Behavioral Health | Blue Shield MHSA |
| Member's condition requires emergency transportation directly to mental health unit from community | Emergency transportation | N/A | Mental health | Blue Shield MHSA |

| Clinical Situation | Place of Service | Provider Type | Primary Diagnosis | Responsibility |
|--|----------------------------------|--|-------------------|------------------|
| Required Mental Health consultation prior to surgical procedure when not coordinated directly with Blue Shield MHSA and services provided by a provider not contracted with Magellan unless access to care applies | Office based | Psychiatrist/ Psychologist/ Behavioral Health specialist | Medical | Blue Shield/IPA |
| Required Mental Health consultation prior to surgical procedure when coordinated directly with Blue Shield MHSA and services provided by provider contracted with Magellan | Office based | Psychiatrist/ Psychologist/ Behavioral Health specialist | Medical | Blue Shield MHSA |
| Developmental Testing | Office based | Psychologist or Master's level BCBA | Mental health | Blue Shield MHSA |
| Developmental Testing | Facility, clinic or office based | Pediatric Neurologist/ Psychologist | Medical | Blue Shield/IPA |

Section 2: Medical Care Solutions Interface Procedures *(cont'd.)*

E. Co-Management Procedures

The following procedures outline Blue Shield Medical Care Solutions and Blue Shield MHSA co-management of a case for a member with a Behavioral Health diagnosis as well as a medical diagnosis who needs assessment and treatment:

1. The Blue Shield MHSA care advocates and their Blue Shield Medical Care Solutions counterparts will contact each other as soon as a potential co-management case is identified. Contact will be guided by established workflows. Electronic communications must be transmitted on a secure website.
2. For members with a primary medical diagnosis, Blue Shield MHSA will arrange for and authorize Behavioral Health consultations and any ongoing aspects of Behavioral Health management related to a Behavioral Health diagnosis.
3. For members with a primary medical diagnosis who are undergoing a surgical procedure and require a mental health workup as part of the routine pre-surgical evaluation (e.g., gastrointestinal bypass, transplant, etc.), Blue Shield/IPA will arrange for Blue Shield MHSA authorization for the mental health consultation.
4. For members with a primary Behavioral Health diagnosis, the Blue Shield medical case manager or PCP will arrange for and authorize medical/surgical consultations and any ongoing medical/surgical care.
5. If, during a co-managed case, transition from a medical/surgical unit of a facility to a Behavioral Health, unit or facility is thought to be necessary, it should be accomplished with as much advance notice as possible. Any transfer to a Behavioral Health unit from a medical/surgical unit must be pre-authorized by the MHSA. A transfer to a medical unit from a Behavioral Health unit must be pre-authorized by Blue Shield/IPA.
6. Certain exceptional cases may require co-funding of a hospital stay by Blue Shield MHSA and Blue Shield, when the Behavioral Health and medical diagnoses and their treatment plans are interrelated. Blue Shield MHSA and Blue Shield/IPA Medical Directors must approve such a funding arrangement.
7. Discharge treatment plans should be jointly developed as far in advance of discharge as possible.
8. Diagnostic tests ordered/administered by the MHSA Behavioral Health provider, without the express authorization of Blue Shield/IPA, shall be the financial responsibility of Blue Shield MHSA. (The mental health provider shall direct members to preferred diagnostic centers per the member's required network.)

Section 2: Medical Care Solutions Interface Procedures *(cont'd.)*

9. All medical consultations at any level of care will be coordinated through Blue Shield or the member's IPA/medical group. Failure to do so will result in Blue Shield MHSa being financially responsible for the consultative services. When contacted, Blue Shield or the IPA/medical group will authorize and identify appropriate medical consultants when medically necessary. The mental health provider shall seek authorization from Blue Shield or the IPA/ medical group for medical diagnostic evaluations prior to their ordering. If the medical consultant does not have medical staff privileges at the Behavioral Health facility, Blue Shield or the IPA/medical group must make appropriate arrangements for a medical consult at their expense.
10. Blue Shield MHSa administers the Blue Shield Behavioral Health Condition Management Program. This program specifically targets Blue Shield disease management programs and other referral partners for member depression screening. Positively screened cases are referred to the Blue Shield Behavioral Health Condition Management Program for management and coordination of services and addressing identified needs.

F. Resolution of Disagreements

If the Blue Shield MHSa care manager and complex case manager and their Blue Shield medical counterparts cannot agree on any aspect of the procedures described above, the matter should be referred immediately for resolution, by phone contact between the appropriate Blue Shield MHSa Medical Director and the appropriate Medical Director of Blue Shield and/or the IPA, as appropriate.

Section 3: Blue Shield MHSa Interface with Primary Care Physicians

A. PCP Referrals

Blue Shield MHSa will develop several processes that allow its staff to monitor and facilitate the coordination of care between the member's primary care physician (PCP) and the Behavioral Health provider, with written member consent, such as:

- Blue Shield MHSa will routinely assess its provider network for coordination of care with Blue Shield's PCPs through audits of the Behavioral Health network providers.
- Blue Shield MHSa will provide PCP contact information to facility providers upon member admission.
- Blue Shield MHSa actively coordinates the co-administration of medical/Behavioral Health services through contact with the IPA/medical group case manager.
- All programs and initiatives are routinely monitored via a set of associated core metrics through Blue Shield's Behavioral Health joint workgroup.

Section 3: Blue Shield MHSA Interface with Primary Care Physicians *(cont'd.)*

B. PCP Consultation Line

To further facilitate communication with our medical colleagues, Blue Shield MHSA provides a toll-free PCP Consultation Line at (877) 263-9870, accessible during business hours for non-urgent consultations. The toll-free number has a dedicated clinician that links the primary care provider to a Blue Shield MHSA Medical Director 24 hours a day, seven days a week.

The PCP consultation line is available for two functions. First, we expect it to further streamline the process by which a physician or designee can facilitate a referral to a Blue Shield MHSA contracted Behavioral Health clinician. After the referring physician or designee provides basic demographic and clinical information to a Blue Shield MHSA intake specialist, the intake specialist will be able to give the physician or designee the names, addresses, and phone numbers of available network clinicians in locations near the member who have the appropriate clinical expertise to match the member's needs. The physician or designee can then make a personal referral of specific Behavioral Health professionals for the member. This should be particularly effective for member's needing support or assistance in pursuing Behavioral Health evaluations and/or treatment.

The second function addressed by the phone line is consultative. The consultation line is available to PCPs during business hours to initiate a prompt telephone consultation with a Blue Shield MHSA Medical Director, on issues such as:

- Determining when a Behavioral Health referral is appropriate for a particular member, what such a referral could be expected to accomplish, and what particular expertise the Behavioral Health clinician receiving the referral would need.
- Questions concerning psychopharmacologic agents.
- Questions concerning management of difficult or challenging members.
- Blue Shield MHSA can also facilitate integration of medical and Behavioral Health services for members through contact with our network providers. Upon obtaining a signed authorization for the release of information from their members, the PCP and the Behavioral Health provider can discuss and coordinate a member's treatment.
- Blue Shield MHSA staff will only disclose protected health information relevant to the clinical consultation. Protected health information disclosed will be guided by relevant HIPAA and California legislative guidelines regarding need for a release of information.

Section 4: Behavioral Health/Medical Clinical Interface

The information in this section includes a list of the most common clinical situations that lie at the interface between the Behavioral Health disciplines and other disciplines in medicine. This list is not meant to be exhaustive, but rather to assist in the identification of members who are likely to benefit from care provided by a PCP or medical specialist and a psychiatrist or addictionologist.

A. Behavioral Health Disorders with Concurrent or Co-Morbid Medical Sequelae

- Anorexia nervosa, bulimia, other eating disorders
- Dementia
- Other neurological degenerative diseases
- Psychological sequelae accompanying chronic pain
- Substance use detoxification
- Psychological sequelae of terminal illnesses
- Other cerebral white matter disorders
- ADHD
- Sexual dysfunction (desire, arousal, orgasmic, sexual pain, etc.)
- Intermittent explosive disorder
- Conversion, or hypochondriacal disorders
- Autism spectrum disorders

B. Circumstances That Might Warrant a Referral to a Psychiatrist, Addictionologist or Behavioral Health Clinician by a PCP

- Diagnostic consultation
- Evaluation for psychotherapy
- Evaluation for substance use disorder treatment
- Evaluation for psychotropic medication management
- Need for ongoing psychotropic medication maintenance review
- Severe, recurrent, persistent or psychotic psychological symptoms
- Presence of complex medical/mental health problems
- Poor compliance with recommended medical treatment plan
- Partial response to initial treatment(s) of depression, anxiety, agitation, or sleep problems
- Evaluation for ECT

Section 4: Behavioral Health/Medical Clinical Interface

(cont'd.)

- Need for Behavioral Health hospitalization
- Need for involuntary commitment
- Symptom recurrence after a positive acute-phase response
- Undiagnosable, ill-defined physical complaints
- Differential diagnosis for a child Behavioral Health disorder

Section 5: Frequently Asked Questions

- 1. In situations where a member sees a PCP for an office visit and is diagnosed and managed for a Behavioral Health disorder, is the office visit reviewed under the medical or behavioral health benefit?**

There should be no obstacles discouraging members from seeking assistance from their PCP. PCPs can diagnose and manage general Behavioral Health disorders. Blue Shield/IPA will manage all services provided by the non-Behavioral Health providers. Blue Shield MHSAs will assume management of services upon transfer of care to a Blue Shield MHSAs mental health provider. The MHSAs have Behavioral/Developmental Pediatricians in the MHSAs network. These physicians will bill and be reimbursed by the MHSAs for the Behavioral Health disorders that they treat.

- 2. How are emergency room visits for physical symptoms of an anxiety attack (heart palpitations, nausea, etc.) reviewed?**

Because the member is presenting to the emergency room to rule out a medical condition, Blue Shield is responsible for aspects of the member's care. In these situations, the member typically presents at the emergency room with the intent of ruling out the presence of a potentially life-threatening medical disorder. Therefore, Blue Shield/IPA is responsible for these cases. If the emergency room physician requests a mental health consult, Blue Shield MHSAs are responsible for the consultation service.

- 3. Are laboratory tests, to determine blood levels of psychotropic medications, covered by Blue Shield/IPA or Blue Shield MHSAs?**

Outpatient laboratory tests (excluding genetic/DNA testing for antidepressant medication) ordered in the interest of the psychiatrist's management of the mental health member, such as psychotropic medication (e.g., lithium and depakote) levels without express authorization of the members' IPA/medical group are the financial responsibility of Blue Shield MHSAs.

Laboratory tests ordered by a psychiatrist while the member is hospitalized in a psychiatric facility will be covered under the mental health benefit and managed by Blue Shield MHSAs, unless the tests have been authorized by Blue Shield or the member's IPA/medical group.

Section 5: Frequently Asked Questions *(cont'd.)*

4. How should a dual diagnosis case (i.e., hypertension/depression, heart disease/depression, etc.) be handled?

Blue Shield Medical Care Solutions, Blue Shield MHSA, and the IPA/medical group will manage the care in their respective areas of specialization. Please refer to the Co-Management Procedures previously outlined in Section E.

5. Many times when individuals are hospitalized for a serious medical illness, the hospital will order a psychiatric consult to help the member deal with the disease process. How should this be handled?

To obtain a consultation from a psychiatrist while the member is confined in a medical/surgical bed, the PCP or his/her representative should call the Blue Shield MHSA at (877) 263-9952.

6. Who will handle office visits for ADHD?

Blue Shield MHSA reviews and manages authorized visits to mental health clinicians for the treatment of this disorder.

7. How will anesthesia for electroconvulsive treatment be handled?

Anesthesia is routinely administered with electroconvulsive treatment. Because it is a procedure that is customarily provided with a psychiatric intervention it is covered under the mental health benefit administered by Blue Shield MHSA.

8. How will examinations, x-rays, and lab procedures to rule out physical disorders with a mental health diagnosis be handled?

Blue Shield/IPA's administer coverage for authorized medical diagnostic tests ordered with the goal of ruling out physical disorders. Blue Shield MHSA will recommend a medical consultant that is both part of the Blue Shield/IPA and has or can obtain temporary staff privileges at the MHSA authorized facility or the Blue Shield/IPA will select a consultant who does have or can obtain medical privileges at the MHSA authorized facility and then be responsible for all medical tests ordered by this consultant. Blue Shield MHSA refers Behavioral Health providers to the appropriate authorizing entity when they become aware of orders for medical diagnostic tests. An exception to the Blue Shield/IPA responsibility for medical diagnostic tests is when tests are ordered in the interest of a Behavioral Health procedure such as ECT. Failure to coordinate medical services with the appropriate Blue Shield/IPA will result in Blue Shield MHSA being financially responsible for said services.

Section 5: Frequently Asked Questions *(cont'd.)*

9. What if a member is suffering from neurological disorders and is being treated at a Behavioral Health unit?

Blue Shield MHSA manages the care of members who are being treated by a psychiatrist. Blue Shield/IPAs provide management of the neurological and other medical/surgical disorders. In those instances, the mental health benefit would cover the services provided by the psychiatrist and in the Behavioral Health unit. The medical/surgical benefit would cover services managed by Blue Shield/IPAs. The attending psychiatrist is directed to the Blue Shield/IPA to arrange for medical/neurological consultation, when medically necessary.

10. How will members be managed when they are admitted for anorexia and/or bulimia but may require additional days for serious medical complications?

Blue Shield MHSA administers the mental health benefit for these members. If their medical condition requires services at a medical/surgical facility, then Blue Shield /IPA will manage these services. Blue Shield MHSA provides management only for the mental health consultative services.

11. How will neuropsychological testing be handled?

Blue Shield/IPA is responsible for examination and management of members with medical diagnoses (e.g., head injury) in the absence of mental health concerns.

Blue Shield MHSA is responsible in those circumstances in which neuropsychological testing is to help determine if a mental disorder is due to a neurological or neuroendocrine medical condition or treatment (versus psychiatric disease alone) when the diagnosis cannot be made through standard psychiatric or medical/neurological examination. For individuals with psychiatric diagnoses for whom neuropsychological testing will facilitate treatment planning, or assist in the determination of a differential diagnosis, a comprehensive Behavioral Health evaluation should be completed by an in-network MHSA provider prior to a request for neuropsychological testing. If upon completion of the comprehensive Behavioral Health and neurological evaluations, either the in-network MHSA or neurology provider determines that neuropsychological testing is required, the provider will request authorization from Blue Shield MHSA.

12. How will psychiatric consultation, as part of a pre-surgical requirement, be handled for individuals with a primary medical diagnosis?

For members who have a primary medical diagnosis or condition, psychiatric consults as part of a routine pre-surgical work up (e.g., gastrointestinal bypass, organ transplant, etc.) will be arranged for and authorized by Blue Shield MHSA, provided that the services are rendered by an In-Network MHSA provider. This requires coordination between the PCP/Specialist and Blue Shield MHSA.

Section 6: Laboratory Tests to Rule Out Physical Disorders and Monitor the Use of Psychotropic Medications

Behavioral Health providers are directed to coordinate care with Blue Shield/IPA to identify preferred facilities for performing these laboratory tests. It is the standard of care for Behavioral Health medication management to include ordering laboratory tests to monitor the medication levels and or specific organ functions. All laboratory tests to rule out the presence of a medical disorder shall be coordinated with Blue Shield/IPA. Failure to do so will result in Blue Shield MHSA being financially responsible for said tests unless said tests were ordered by a medical consultant for clarification of a medical diagnosis. In this situation, the member who is at the inpatient level of care must utilize the inpatient laboratory contracts and would be a financial responsibility of Blue Shield/ IPA.

The following is a list of the common laboratory tests that are associated with various psychotropic medications. This is not an exhaustive list.

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|---|--|
| First Generation Antipsychotics | Mood Stabilizing Agents |
| Liver function tests | Lithium |
| CBC w/differential | Blood levels |
| Thyroid function tests | Electrolytes |
| EKG (pimozide only) | Thyroid panel |
| Blood levels | Creatinine clearance/BUN |
| Second Generation Antipsychotics | Fasting blood sugar (at initiation only) |
| LFTs | CBC (at initiation only) |
| Cholesterol | ECG (at initiation only) |
| Glucose | Urinalysis (at initiation only) |
| Prolactin levels | Tegretol |
| Clozapine | CBC w/differential |
| WBC – weekly | Platelets |
| Absolute neutrophil count | LFTs |
| EEG (w/pos. seizure history) | Blood level |
| Antidepressants | Lamotrigine |
| Tricyclics | CBC w/differential |
| EKG | LFTs |
| Blood levels | Platelets |
| SSRIs | Antianxiety Agents |
| LFTs – baseline only | LFTs |
| Creatinine/BUN – baseline only | Stimulants |
| TFTs – baseline only | CBC – baseline |
| SNRIs | LFTs – baseline |
| Cholesterol | TFTs – baseline |
| Wellbutrin | Stimulants |
| EEG – prior to initiation with history of seizure | LFTs – baseline and follow-up |
| MAO Inhibitors | Miscellaneous Baseline Screen |
| LFTs (at initiation) | Urine/blood-drug level/toxicity |
| Serum bilirubin | EEG |
| Transaminase activity | SMAC |
| Platelet MAO inhibition | Drug screens |
| Miscellaneous | Pregnancy test – prior to starting meds |

| | |
|---|------------------------|
| CBC w/differential/Platelets for Depakote | Neurological exam |
| EKG for Mellaril and Geodon and Celexa, also if QT prolonging meds are used together. | Thyroid function tests |
| Labs, EKG and Xrays in preparation for outpatient ECT | |
| MAT – naltrexone – LFT’s and acamprosate (metimes BUN/Cr) | |
| Risperidone – prolactin level | |

Section 7: Contact Numbers for Physicians

| Physician Contact Information | |
|--|--------------------------------------|
| Blue Shield of California | Blue Shield MHSA |
| Matthew Geromi, DO Behavioral Health Medical Director (562) 580-6715 | Toll-free Number (877) 263-9952 |
| matthew.geromi@blueshieldca.com | PCP Consultation Line (877) 263-9870 |

Section 8: Contact Numbers for Members

| Member Contact Information | |
|---|---------------------------------|
| Blue Shield of California | Blue Shield MHSA |
| Mental Health Customer Service Number on Members’ ID Card | Toll-free Number (877) 263-9952 |

Implementation date: July 2000; *Revision effective dates:* 3/02, 7/03, 4/04, 12/05, 7/08, 7/09, 10/11, 1/14, 1/15, 1/16, 1/18, 1/19, 1/20, 1/21, 5/21, 1/22, 1/24