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Revised Date: 8/28/2018
Review Date: 8/28/2018

North Sound Behavioral Health Organization

Section 1000 – Administrative: Notice Requirements

Authorizing Source: See references in North Sound BHO Policy 1001

Cancels:

See Also:

Providers must comply with this policy and may develop

Individualized implementation guidelines as needed

Responsible Staff: Deputy Director

Executive Director Signature:

Approved by: County Authorities Executive Committee (formerly known as
the Board of Directors)

Motion #: 04-027

Date: 6/29/2004

Date: 8/30/2018

POLICY# 1005.00

SUBJECT: NOTICE REQUIREMENTS

PURPOSE

To ensure notices regarding individuals' services are provided in a manner that gives timely, clear and easily understood information to individuals' seeking and receiving behavioral health services.

DEFINITIONS

See North Sound Behavioral Health Organization (North Sound BHO) Policy 1001.00 for definitions.

POLICY

North Sound BHO ensures Notices are sent to individuals to inform them of authorization of services or when North Sound BHO, or its formal designee, makes an adverse benefit determination, related to their requested or previously authorized services. Only North Sound BHO or its designee (Volunteers of America [VOA]) may issue Notices.

Any decision to deny a service authorization request or to authorize a service in an amount, duration, or scope that is less than requested must be determined by a professional who meets or exceeds the requirements of a Chemical Dependency Professional (CDP) or Mental Health Professional (MHP) with the appropriate clinical expertise to make that decision. A decision to deny inpatient care can only be made by a psychiatrist or doctoral-level clinical psychologist.

Notices outlined in this policy are sent or provided to the individual, or his or her legal guardian, or authorized representative (see definition of "individual" in North Sound BHO Policy 1001.00). The requesting behavioral health provider will also be notified in writing, by North Sound BHO (or its formal designee for inpatient utilization management).

Language and Format of Notices

Notices will be provided in languages and format as outlined in North Sound BHO Policy 1515.00 – Interpreter and Translation Services. Written Notices shall:

1. Be provided in the individual's prevalent non-English languages when applicable. Oral interpretation is available free of charge to the individual. This applies to all non-English languages, not just those identified as prevalent.

2. Include the BHO's toll-free and TTY/TDY telephone numbers.
3. Use easily understood language and format.
4. Use a font no smaller than 12 point.
5. Be available in alternative formats and in an appropriate manner that takes into consideration the special needs of those who, for example, are visually limited or have limited reading proficiency.
6. Include a large print tagline (no smaller than 18 point) explaining how to request auxiliary aids and services, including the provision of the material in alternative formats, which include large print and Braille.

Notices of Service Authorization shall include:

1. A description of authorized services and timeframes.
2. Information about the availability of other services under Early and Periodic Screening, Diagnosis and Treatment (EPSDT) for individuals under 21 and their legal representative for individuals with Washington Apple Health coverage.

Notices of Adverse Benefit Determination shall include:

1. The adverse benefit determination North Sound BHO or its formal designee intends to take;
2. The reasons for the adverse benefit determination and a citation of the rule(s) being implemented and the criteria used for the basis of the decision;
3. The enrollee's right to be provided, upon request and free of charge, reasonable access to and copies of all documents, records and other information relevant to the enrollee's adverse benefit determination.
4. A description of alternative services, if applicable.
5. An explanation of the individual's right to request a second opinion, appeal, or expedited appeal including:
 - a. The timeframes and processes to request a second opinion, expedited appeal, or appeal;
 - b. The rights and processes to have services continue pending resolution of the appeal;
 - c. The circumstances under which the individual may be required to pay the costs of these services;
 - d. Information on exhausting the BHO's one-level appeal process; and
 - e. The circumstances when, and processes by which, an individual can request a fair hearing.

Notices of Determination shall include:

1. The reason for the denial or offering of alternative services.
2. A description of alternative services, if available.
3. An explanation of the individual's right to file a grievance, request a second opinion, appeal, or expedited appeal, or administrative hearing including:

- a. The timeframes and processes to request a these processes
- b. The rights and processes to have services continue during these processes;
- c. The circumstances under which the individual may be required to pay the costs of these services;
- d. Information on exhausting the BHO's one level appeal process; and
- e. The circumstances when, and processes by which, an individual can request a fair hearing.

PROCEDURE

Notice Types

Notice of Service Authorization

Notices of Service Authorization (NOSAs) shall be provided to all individuals when they are authorized for services by North Sound BHO or its formal designee. NOSAs shall be issued by:

1. North Sound BHO for outpatient services.
2. North Sound BHO's formal designee for Inpatient Utilization Management (UM) for inpatient psychiatric services.

Notices of Adverse Benefit Determination

Notices of Adverse Benefit Determination shall be issued by:

1. North Sound BHO for outpatient services.
2. North Sound BHO's formal designee for Inpatient UM for psychatric inpatient services.
3. North Sound BHO or the BHO's formal designee for denials of expedited inpatient services.

Notices of Adverse Benefit Determination shall be provided to individuals and the requesting provider when:

1. North Sound BHO denies access to an intake evaluation/assessment appointment requested by a financially eligible individual.
 - a. Individuals with Washington Apple Health with a BHO or fully integrated managed care (FIMC) behavioral health benefit and those who meet funding priorities per North Sound BHO Policy 1574.00 – State and Substance Abuse Block Grant (SABG) Funding Plan are considered financially eligible.
 - b. North Sound BHO's policy is that no financially eligible individual is denied an intake evaluation/assessment appointment. Should a circumstance arise where a financially eligible individual would be denied an intake/assessment appointment, only the BHO may make this determination.

Or

2. North Sound BHO determines services beyond an intake evaluation/assessment or previously authorized benefit are not medically necessary and no services are authorized by North Sound BHO. When a Behavioral Health Agency (BHA) completes an intake evaluation/assessment and believes the individual is not eligible for continued services, they should submit a denial review request (DRR) following the procedures outlined in BHO Policy 1505.00.

Or

3. North Sound BHO denies access to Wraparound with Intensive Services (WISe) or substance use disorder (SUD) residential services. It is not a denial if there is not current capacity in the program.
 - a. If WISe services are requested by the youth (and family, if the youth is under age 13) and the youth is denied WISe or authorization is limited, the BHA should submit a DRR following the process in 3(c) of this section. This includes when WISe is requested by youth (and family, if the youth is under age 13) and the outcome of the Child/Adolescent Needs and Strengths (CANS) screen does not meet the algorithm.
 - b. If SUD residential services are specifically requested by an individual, and the BHA determines the individual does not meet criteria for residential services including not meeting the American Society of Addiction Medicine (ASAM) criteria, the BHA would submit a DRR following the process in 3(c) of this section.
 - c. Process for requesting a DRR: When the BHA determines the individual does not meet the additional criteria for WISe or SUD residential, the BHA with the program must complete the DRR for Intensive Service Programs form available on the North Sound BHO website and submit any requested documentation to North Sound BHO within one (1) business day in order for BHO staff to review and issue a timely Notice as needed. BHO staff with the appropriate credentials will make the final decision to authorize or deny access to the requested program.

Or

4. North Sound BHO reduces, suspends, or terminates previously authorized outpatient or residential services. North Sound BHO or its designee will not reduce, suspend, or terminate previously authorized inpatient psychiatric services.

Or

5. Service authorization decisions are not provided in a timely manner as defined by the State.

Or

6. North Sound BHO does not act within grievance and appeal system timeframes.

Or

7. North Sound BHO denies, in whole or in part, payment for services.

Notice of Determination

Notices of determination must be provided when an available non-Medicaid service is denied or limited. A Notice of Determination will also be provided to the requesting provider. Notices of Determination are only issued when a non-Medicaid service is available and the individual is financially eligible for that service according to BHO policy. When a BHA determines an individual is not clinically eligible for a non-Medicaid service, they should follow procedures as defined above under “Notice of Adverse Benefit Determination” to submit a DRR.

Timelines for Issuing Notices

Notices issued by North Sound BHO for outpatient and residential services

BHAs shall submit any necessary documentation to North Sound BHO so the determination and corresponding Notice may be issued per the following timelines.

All Notices (Notices of Service Authorization, Notices of Adverse Benefit Determination and Notices of Determination)

1. For standard service authorization and denial decisions, Notices shall be issued as expeditiously as the individual’s behavioral health condition requires, not exceeding 14 calendar days following receipt of the request for authorization or denial. An extension of up to 14 calendar days is possible if the individual or the provider requests it, or North Sound BHO justifies, to the Department of Social and Health Services (DSHS) upon request, a need for additional information and how the extension is in the individual’s interest.
2. If North Sound BHO extends the timeframes for issuing a Notice for standard decisions it must give the individual written notice of the reason for the decision to extend the timeframe and inform the individual of the right to file a grievance if he or she disagrees with that decision. North Sound BHO must carry out and issue its determination as expeditiously as the individual's health condition requires and no later than the date the extension expires.
3. For expedited service authorization and denial decisions, Notices shall be issued as expeditiously as the individual’s health condition requires, no later than 72 hours after receipt of the request for authorization or denial. An extension of up to 14 calendar days is possible if the individual or the provider requests it, or North Sound BHO justifies, to DSHS upon request, a need for additional information and how the extension is in the individual’s interest.

Notices of Adverse Benefit Determination and Notices of Determination

1. For denial of payment, on the date of the adverse determination affecting the claim/payment.
2. When service authorization decisions are not reached within the required timeframes, this constitutes a denial, and a notice is required on the date the timeframes expire.

3. For termination, suspension, or reduction of previously authorized services, at least 10 calendar days before the effective date of the action except in the following circumstances, the Notice may be issued on the date of the action:
 - a. North Sound BHO or designee has factual information confirming the death of an individual.
 - b. North Sound BHO or designee receives a clear written statement signed by an individual that he or she no longer wants services or gives information that requires termination or reduction of services and indicates he or she understands this must be the result of supplying that information.
 - c. The individual has been admitted to an institution where he or she is ineligible under the plan for further services.
 - d. The individual's whereabouts are unknown and the post office returns North Sound BHO or designee's mail directed to the individual indicating no forwarding address.
 - e. North Sound BHO establishes the fact the individual has been accepted for services by another local jurisdiction, state, territory, or commonwealth.
 - f. The individual's physician prescribes a change in the level of medical care.
 - g. The notice involves an adverse determination made with regard to the pre-admission screening requirements (for Nursing Facilities admissions) from section 1919(e)(7) of the Social Security Act.
 - h. The transfer or discharge from a facility will occur in an expedited fashion as described in Code of Federal Regulations (CFR) 42 Section 483.15(b)(4)(ii) and (b)(8) (Long Term Care Facilities).
 - i. Denial of payment or at the time of any adverse benefit determination directly affecting the claim.
4. When North Sound BHO has verifiable information indicating the action should be taken because of probable fraud by the individual, the Notice can be provided in as few as five (5) calendar days in advance of the action and the facts have been verified, if possible, through secondary services.
5. Refer to North Sound BHO Policy 1571.00 for inpatient notice of adverse benefit determination and required timelines.

ATTACHMENTS

None