

HEALTH PLAN OF SAN JOAQUIN					
Subject: Over / Under Utilization of Services Monitoring					
Department: Medical Management				Policy #: UM05	
Effective Date: 02/01/1996	Committee/Approval Date: QMUM 11/20/14 1/2015; PRC 06/16	Review/Revision Dates: 03/05; 06/08; 10/08; 02/11; 9/14; 1/15; 06/16			
Applies To:	Medi-Cal	Yes	X	No	
	MCAP	Yes	X	No	
	TPA	Yes		No	X

PURPOSE:

The purpose of this policy is to describe the overall process Health Plan of San Joaquin (HPSJ) uses to monitor under and over utilization. It also defines how findings are handled and the steps that may be taken to remediate issues.

POLICY

HPSJ will facilitate the delivery of appropriate care, identify mechanisms to detect and correct potential over / under utilization of services and identify benchmarks for ‘best practices’.

PROCEDURE

A. Monitoring

1. Monitoring for over / under utilization of services and ‘best practices’ will involve several types of data and reports which may include, but are not limited to,
 - a. HEDIS measures.
 - b. Initial Health Assessment (IHA).
 - c. Physician practice profiles from Utilization Management data.
 - d. Data from member complaints and PCP change request.
 - e. Data on inpatient days and discharges.
 - f. Pharmacy utilization.
 - g. Outpatient utilization data.
2. Emergency Room visits will be monitored on a monthly basis to determine frequency of use by patients.
3. Compliance and determination of ‘best practice’ with Preventive Care Guidelines is routinely assessed during facility site audits and HEDIS.
4. Selected common procedures are monitored for under and over utilization.

B. Reporting

Identification of potential over / under utilization is reported to the Quality Management Utilization Management (QMUM) committee for analysis and recommendations

C. Notification

1. Depending on the issue, a member of the Provider Services, Quality Improvement or Utilization Management department will inform the Provider of the concern of and recommendation from the QMUM Committee.
2. A corrective action plan (CAP) may be initiated with instructions to Director of Utilization Management with a date to return the completed document to the QMUM committee.
3. Measurement of the interventions will be conducted at appropriate intervals and reported back to the QMUM Committee.

D. Provider Education

Providers are educated on and encouraged to use the physician portal system to obtain report card information that informs them of their members who are in need of preventive services.

REFERENCE

Health Plan of San Joaquin
Approval: Signatures on File

DHCS Contract Deliverables

<i>Contract Reference</i>	<i>Date of Approval</i>	<i>DHCS Unit</i>		<i>Contract Reference</i>	<i>Date of Approval</i>	<i>DHCS Unit</i>
5.f	3/2/12	<i>Member Rights & Program Integrity</i>		A.18.5	Sent to DHCS 06/30/16	<i>Per contract manager approval from 2012 stands due to no significant changes.</i>