



CLINICAL PRACTICE GUIDELINES POLICY AND PROCEDURE

In this document, CCC is referenced in place of CCC and CHA.

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Printed copies are for reference only. Please refer to the electronic copy for the latest version.

Terms not defined in the DEFINITIONS section of this document may be found in the Glossary.

1 PURPOSE

1.1 The purpose of this policy is to ensure a method for adopting practice guidelines consistent with 42 CFR 438.236. The guidelines adopted will serve as a broad description of clinical guidelines approved and used by Cascade Comprehensive Care (CCC). Contracted providers are encouraged to use and adopt additional evidence based guidelines.

2 SCOPE

2.1 Intended for use by case management, utilization review, compliance, communication, member services, and quality departments as well as contracted providers.

3 POLICY STATEMENT

- 3.1 CCC will adopt clinical practice guidelines that will guide coverage decisions and clinical care with the objective of providing high quality, cost effective care to its members.
- 3.2 Guidelines will be based on valid and reliable clinical evidence.
- 3.3 Guidelines will be adopted from a highly credible and respected source.
- 3.4 Guidelines should have gone through extensive vetting and peer review.
- 3.5 Guideline selection should be prioritized based on CCC, provider and member needs.
- 3.6 Guidelines should be adopted in consultation with contracting health care providers.
- 3.7 Guidelines will be disseminated to relevant providers and, upon request, to members and potential members.

4 PROCEDURE

4.1 The Chief Medical Officer (CMO) is primarily responsible for the process of guideline adoption and dissemination.

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- 4.2 The directors of quality, case management, and pharmacy shall identify needs for additional guidelines and propose additional guidelines for adoption.
- 4.3 Contracted providers may identify needs for additional guidelines and propose candidate guidelines for adoption.
- 4.4 Provider input into proposed guidelines will be sought through the Pharmacy and Therapeutics (P and T), Utilization Management (UM), or Quality Management (QM) committees as appropriate.
- 4.5 The CMO will recommend guidelines for adoption. Adoption will be determined by the P and T, UM, or QM committees as appropriate.
- 4.6 Practice guidelines will be disseminated to providers through at least four of the following:
 - 4.6.1 Practice guidelines are referenced in the provider manual which is revised and mailed annually.
 - 4.6.2 Practice guidelines are referenced on our web page with links provided.
 - 4.6.3 Practice guidelines for pharmacological treatment are disseminated to all providers through the online and print versions of the formulary, which is revised bi-annually.
 - 4.6.4 Practice guidelines are disseminated at provider trainings.
 - 4.6.5 Practice guidelines that are cited in authorization denials or modifications are usually referenced or copied in notifications to providers.
 - 4.6.6 When appropriate provider education is done by phone or in person.
- 4.7 Clinical Practice guidelines are available to members and potential members.
 - 4.7.1 Brief explanations of clinical practice guidelines and links will be posted on our website.
 - 4.7.2 Utilization review staff, case managers, and pharmacy staff may explain guidelines to any member with questions about their coverage determinations or recommended care.
 - 4.7.3 Providers are encouraged to share with members any guidelines that are relevant to their treatment and health care.

5 RESPONSIBILITIES

Compliance, Monitoring and Review

- 5.1 The Executive Approval Committee will review this policy and procedure for compliance with the Oregon Health Authority (OHA) contract and guidelines at least once a year, or as applicable.

Reporting

- 5.2 No additional reporting is required.

Records Management

- 5.3 Team Members must maintain all records relevant to administering this policy and procedure in a recognized record management system.

6 DEFINITIONS

7 RELATED LEGISLATION AND DOCUMENTS

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7.1 42 CFR §438.236

7.2 [Health Insurance Portability and Accountability Act \(HIPAA\)](#)

7.3 [Oregon Health Authority \(OHA\): Coordinated Care Organizations \(CCO\)](#)

8 FEEDBACK

8.1 Team Members may provide feedback about this document by emailing policyfeedback@cascaedcomp.com.

9 APPROVAL AND REVIEW DETAILS

Approval and Review	Details
Advisory Committee to Approval	Executive Approval Committee
Committee Review Dates	09/28/2018
Approval Dates	10/01/2018

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