

Effective Date: January 2009

Subject: Exchange of Information

Overview: This document describes:

- ❖ HPHC's expectations regarding the exchange of information between behavioral health (BH) and medical practitioners, specialists, and providers; and
- ❖ The mechanisms in place to ensure the timely, effective, and confidential exchange of relevant information.

Policy:

Many medical conditions may result from, or be exacerbated by, behavioral health issues. In addition, identification and consideration of medical issues is important in the treatment of BH disorders.

- ❖ Effective coordination of all care is dependent upon clear and timely communication among the practitioners, providers, and facilities who care for patients. Effective communication allows better decision-making regarding treatment interventions, and decreases the potential for fragmentation of treatment and/or adverse medication interactions.

HPHC requires that affiliated practitioners and providers caring for the same member share relevant information (as permitted by applicable confidentiality policies and laws) regarding the member's diagnosis and treatment as needed to ensure effective coordination of care.

Since HPHC members may initiate behavioral health services through self-referral, BH practitioners play a major role in ensuring that the appropriate exchange of information is coordinated.

- ❖ BH practitioners/providers are expected to routinely ask the member to complete an authorization for release of information to the PCP (and other treating practitioners as appropriate for the individual situation) at the time of the initial appointment in a BH setting.
- ❖ The authorization form must state clearly whether the member agrees to or declines the release of information; the document must be maintained in the treatment record.

If the member consents to the release of information, the BH practitioner is responsible for providing relevant information (including diagnosis, proposed treatment, and medication) to the PCP and/or treating practitioners. Such communication must be documented in the treatment record.

- ❖ BH practitioners are expected to complete the United Behavioral Health (UBH) Health Care Coordination Form and forward it to the PCP and/or treating practitioners.

HPHC Continuity & Coordination of Care Policy

At least annually HPHC, through delegation oversight and other monitoring activities (e.g., practitioner surveys, chart reviews), measures the effectiveness with which the exchange of information occurs.

- ❖ Results of these measures are analyzed, reviewed by HPHC's Medical Management and Quality Committee (MMQC), and presented to HPHC's Clinical Quality Assurance Committee (CQAC) for review and intervention as appropriate.

Revisions to date:

- ❖ **Revised:** 1/03, 12/04, 6/06, 1/09
- ❖ **Initiated:** 5/02