Consistency in Inpatient Utilization Review and Authorization Practices Procedure

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Purpose
To provide Utilization Management Reviewers or Inpatient Unit Clinicians with procedures to ensure consistency with inpatient Treatment Authorization Requests (TAR) authorization practices.

Procedures
The Utilization Management Unit will conduct consistency with authorization studies annually and more frequently if necessary. The following procedures shall be utilized to establish an assessment of inter-rater reliability:

- Lead Inpatient Reviewer shall randomly select a sample of five (5) TARs from both Short Doyle and Fee-For-Service hospitals.
- Inpatient and Lead Inpatient Reviewers shall each review the five (5) TARs selected by the Lead Inpatient Reviewer within ten (10) business days from the date of the receipt.
- Upon completing their review, Inpatient Reviewers shall complete authorization worksheets and make determinations as to whether requests for inpatient day payment shall be approved or referred to the physician advisor for review. Reviewers shall then submit the authorization worksheets to the Lead Inpatient Reviewer.
- Lead Inpatient Reviewer will be responsible for:
  - Reviewing authorization worksheets;
  - Determining the degree of inter-rater agreement among the clinicians; and
  - Submitting inter-rater reliability findings to Program Manager II and Nurse Supervisor of Quality Management (QM) via electronic mail.
- QM Program Manager or Nurse Supervisor will be responsible for implementing any applicable training as a result of the authorization study. Training may include team review and discussion of findings.

Reference
California Code of Regulations, Title 9, Section 1810.440(b)(1)(2)(3)

Related Policy
DBH Standard Practice Manual:
- QM6038: Consistency in Inpatient and Outpatient Utilization Review and Authorization Practices Policy
- QM6038-2: Consistency in Outpatient Utilization Review and Authorization Practices Procedure