**Consistency in Inpatient and Outpatient Utilization Review and Authorization Practices Policy**

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<th>Effective Date</th>
<th>05/22/2012</th>
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<td>Revision Date</td>
<td>01/28/2014</td>
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<td>Director</td>
<td>CaSonya Thomas</td>
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**Policy**

It is the policy of the Department of Behavioral Health (DBH) that the Access Unit and the Utilization Management Unit demonstrate consistency with authorization practices that assure appropriate access to Specialty Mental Health services.

**Purpose**

To establish an annual assessment of inter-rater reliability to ensure the Department’s Inpatient and Outpatient Utilization Reviewers’ decision making process indicate consistency and adherence to authorization criteria as defined by California Code of Regulations, Title 9.

**Definition**

Inter-Rater Reliability/Inter-Rate Agreement - the degree of agreement amongst two or more raters in reviewing the same authorization documentation.

**Inpatient Utilization Review** - review and authorization performed by the Quality Management Inpatient division for inpatient service providers.

**Outpatient Utilization Review** - review and authorization performed by the Access Unit for outpatient Fee-For-Service providers.

**Regulation**

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

**Related Procedures**

DBH Standard Practice Manual:
- QM6038-1: Consistency in Inpatient Utilization Review and Authorization Practices Procedure
- QM6038-2: Consistency in Outpatient Utilization Review and Authorization Practices Procedure