Policy Development Process - IN MP - AD-0914	05/01/2022-12/31/2022
Policy Type	
ADMINISTRATIVE	

According to the rules of Mental Health Parity Addiction Equity Act (MHPAEA), coverage for the diagnosis and treatment of a behavioral health disorder will not be subject to any limitations that are less favorable than the limitations that apply to medical conditions as covered under this policy.

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A. Conditions of Coverage), then the plan contract (i.e., Evidence of Coverage) will be the controll determination.



#### A. Subject

## **Policy Development Process**

### B. Background

CareSource utilizes a systematic way to develop policies through a standard operating procedure that improves efficiency, increases productivity and quality, and provides consistent policy products to stakeholders and others. This process starts with the identification of a policy need, including policy intent and triage, and then, thorough research and collaboration leads CareSource to determine best practice for members.

According to the tenets of Mental Health Parity Addiction Equity Act (MHPAEA), coverage for the diagnosis and treatment of a behavioral health disorder will not be subject to any limitations that are less favorable or more restrictive than the limitations that apply to medical conditions as covered by CareSource policies.

#### C. Definitions

- Administrative Policies Policies written to provide guidance to providers on administration of behavioral or physical health benefits.
- AllMed A vendor with independent, external review specialists, who complete
  impartial medical reviews prior to final medical policy approval and implementation.
- Business Owner An individual who identifies a gap in information or benefits and
  recommends or requests that a topic be researched for possible creation or
  clarification of medical necessity criteria, reimbursement information or administrative
  conditions to assist in providing consistent and quality services to CareSource
  members. The business owner supports the development of a policy.
- Clinical Policy Governance Committee (CPGC) The official governing body, comprised of medical and behavioral health subject matter experts, among others, charged with the approval of new or revised clinical policies relating to medical necessity determinations. The CPGC is responsible for determining whether the proposed clinical policy is clearly defined, clinically evidenced-based, assures a high level of member safety and quality of care, and articulates a business value.
- Medical/Clinical Policies Policies written with medical criteria, including current evidence-based research, best practice, studies, etc., whichle.714 0 015 Tc -0.015 Tw 0.214 0 1d[i











