

Doc to Doc Handbook

Updated 2021



**MINES
& ASSOCIATES**

A National Business Psychology Firm

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MINES and Associates

As reviewer for our clients in treatment around appropriateness of level of care for MINES you are an essential part of our comprehensive mental health and substance abuse treatment network. It is our goal to provide the highest quality services in the least restrictive level of care to our clients and self-insured payors. MINES provides specialty managed behavioral healthcare services. These include case management, complex case management, and intensive case management. As part of these levels of case management, MINES does precertification, concurrent review/utilization review, aftercare oversight, and interdisciplinary consultation and collaboration with medical personnel.

Philosophy

MINES is committed to early identification, effective quality treatment and preventive action in order to best meet the needs in the least restrictive level of care for Patients and their family members.

Standards

MINES is committed to providing the highest quality of care and service to its Patients in the most cost-effective, time efficient, and least restrictive manner. All Patients will be treated within the appropriate systems context; be it family, work or community. MINES is committed to an active stance of accountability to the patients it serves, be they corporate or individual. MINES conducts ongoing evaluation of the quality of its services. Outcome in psychotherapy is best evaluated via multiple dependent outcome measures that are closely linked to behavioral anchored assessment tools. As such, the firm utilizes a systems approach, which integrates cognitive and behavioral techniques that provide quantifiable assessment and outcome measures within a bio/social context. Therefore, it is reasonable for our Patients to expect documented evidence of the measures employed, their relationship to treatment goals and their effectiveness. As quality care can only occur within a context of frequent and open communication, MINES requests regular communication with its Patients, providers and affiliates. Quality of care is primarily an issue of personal and professional ethics. MINES adheres to the highest of ethical and legal standards.

UR Criteria

Over the years MINES has developed an extensive UR criteria for all levels of care to help keep within our philosophy. Please refer to our [UR criteria](#).

Levels of Care

Through MINES managed behavioral health programs, MINES manages and determines the appropriate level of care for patients receiving mental health or substance use disorder treatment. In most cases, the MINES clinical case manager has worked with the facility where the client is being treated to come together and find the best treatment plan for the client which entails moving the client to the appropriate level of care in order to getting the client back out in their community.

Disagreements about level of care

At times, facilities disagree with MINES determination of the level of care that is necessary to treat the Patient. The following steps may occur in reviewing the medically necessary level of care.

MINES Internal Process

The MINES clinical team meets weekly (daily as necessary) to review all cases and decisions made regarding appropriateness of level of care.

Peer to Peer

If the facility requests a Peer to Peer to discuss our process and decision regarding level of care, this is done with a MINES clinician who is not managing the case and the staff from the facility.

Doc to Doc

If the facility still feels that the decision around level of care needs to go higher, a doc to doc is requested. In these cases, MINES hires an external doctor to review the case and determine what level is appropriate.

Payor Review

If no reconciliation is made after the doc to doc, it goes to the payor, which is a self-insured entity, to be reviewed in an appeal status to determine payment for the services.

Doc to Doc Requirements

Professional Background

MINES requires training at the doctoral level in medicine or psychology, and appropriate expertise in treating and managing the diagnosis under review.

CV

We do request you give us an updated CV yearly. This helps us determine which cases best suit you.

Location

Due to the fact the review can happen through email and phone calls, location is not a hinderance. You can be practicing anywhere and be able to complete reviews for MINES.

Doc to Doc Process

Outreach

MINES will outreach you to see if you are available to do a doc to doc review. We will provide documentation of what we need you to know to be able to discuss the patient's case with the treating facility's doctor and to help in report writing. These reviews are time sensitive so availability within a day is typically requested. We expect that you will respond the same day of us contacting you via email to let us know if you can take this case.

If you expect you will be unavailable for extended length of time, please inform MINES Provider Relations at providerinfo@minesandassociates.com so that we can remove you from this referral list until you notify us of your availability. This ensures the progression of this request.

Discussion

MINES case manager will discuss the specifics of the case and what has been authorized and why.

Review

Please review all documentation provided. During the doc to doc review with the facility, you will be discussing the facility's recommendation for the current medical necessity level of care. Please discuss the questions that MINES case manager has provided to you. Also, review the client's treatment course, medications and appropriateness of those medications or dosages, safety planning completed and discharge

planning. Your professional opinion regarding the medically necessary level of care will inform our response to the facility.

Report

Please write a report on your findings and send to the case manager. The report should include your analysis, evaluation, and recommendations for this Patient's care.

Billing

Billing should be submitted to the case manager with whom you are working and to MINES Account Payable. You can fax billing to 303-832-9701. You will be paid hourly for your services per your agreed contracted rate; however, we would expect that any time over 2 hours would be approved by the case manager that you are working with. If you want to discuss your rate, please contact providerinfo@minesandassociates.com.

Types of Cases

There are several types of cases that you may see. Here are some of the more common:

Eating Disorder

Some facilities believe strongly in the most restrictive level of care model for this population in order to refeed clients to proper weight. They frequently do not appear to use evidence-based practice such as Hopkins protocols for refeeding. We are evaluating and determining the medically necessary level in order for the client to be able to learn how to be in their community while still working on their disordered eating behaviors. Eating disorders are chronic conditions that in most cases require life-long management. Inpatient care is for medical stabilization in these cases, not ongoing treatment given the chronicity.

Substance Use Disorder

Some facilities assume with little or no evidence-based practice or individual patient clinical data that a patient has the best chance at sobriety by automatically admitting into more structured levels of care for a particular set of time rather than evaluating the client individually for the medically necessary level of care. Substance use disorders are chronic conditions that in most cases require life-long management. Inpatient care is for medical stabilization in these cases, not ongoing treatment given the chronicity.

Other Mental Health Diagnosis

Another subgroup of facilities hold a position that a client's symptoms of suicide, psychosis, or grave disability need to be completely eradicated at the patient level of hospitalization before they can be discharged rather than assessing for baseline functioning, safety planning, and appropriately discharge planning to the medically necessary level of care. We are looking at the safety risks, stabilization, their overall functioning, and support.

For all the above examples the bio/psycho/social/medical constellation of symptoms are considered along with elements of acuity versus chronicity, patient's motivation and resources for change, maximum medical improvement given the Patient's history of treatment and outcome at various levels.

FAQ

1. How do you send communications back and forth to the case manager?

You will need to send through secured email or a generic email without any client information (such as name, ID, DOB, case details). You can also fax to 303-832-9701. All MINES staff voicemails are confidential so you can contact us that way as well.

2. Am I liable for decisions I make?

Yes. We are hiring you due to your expertise and expect that you have the appropriate level of liability insurance should the need arise.

3. Could I be taken to court or be called for expert testimony for the decisions I make?

Yes, in today's litigious society it may occur that you could be involved in court proceedings. That being said, in 40 years MINES nor its medical/psychological consultants have never gone to court or had a case settle out of court.

4. What if I am not familiar with a protocol for a certain case?

Please communicate this with the case manager so that we can discuss with you what we are looking at and why. We can also find someone else to review the case if you are unfamiliar with the protocol.

5. How do I access the secured email I have received?

All communication will be done through a secured email. If you have issues accessing or finding the secured email, please look in your junk email or contact the case manager you are working with and they can assist you in how to access this.

6. Do we only communicate through secured email?

There may be times we work with you to transfer documents securely through other means as well as times we may want to schedule a phone call to discuss the case and/or findings.