

HEALTH PLAN POLICY	
Policy Title: Member Education and Self-Referral for Behavioral Health Services	Policy Number: OPMS20 Revision: B
Department: Operations	Sub-Department: Member Services
Applies to Product Lines: <input type="checkbox"/> Medicaid <input type="checkbox"/> Children’s Health Insurance Plan <input checked="" type="checkbox"/> Health Insurance Exchange <input checked="" type="checkbox"/> Medicare <input checked="" type="checkbox"/> USFHP <input checked="" type="checkbox"/> Commercial Insured <input type="checkbox"/> Non Insured Business	
Origination/Effective Date: 09/28/2017	
Reviewed Date(s):	Revision Date(s): 04/24/2019, 05/04/2020

SCOPE:

This policy applies to all CHRISTUS Health Plan members and describes policies related to member self-referral for any Behavioral Health services from network providers and available Member Health education available for members with Behavioral Health conditions regarding accessible Network Providers with Behavioral Health relevant experience.

DEFINITIONS AND ACRONYMS:

- **Network Provider** – is a health care provider who has completed the credentialing process and has signed a contracted agreement to be part of CHRISTUS Health Plan’s network of providers who participate in the CHRISTUS program. A network provider accepts the negotiated rate as payment in full for services rendered.
- **Self-referral** - any service or specialty appointment which the member can schedule and obtain the service(s) without having to seek a provider’s request for either a direct referral or a prior authorization (e.g., substance abuse counseling and treatment).

POLICY:

CHRIST Health Plan permits its members to self-refer to any Network Behavioral Health Services Provider without a referral from the Member’s PCP. The ability of the member to participate in the selection of the appropriate behavioral health provider is communicated on the CHRISTUS member portal, the online provider directory as well as the Evidence of Coverage document.

The online provider directory contains information about the relevant experience of the Behavioral Healthcare Provider.

Members with Behavioral Health conditions that are also assigned to a case manager will be provided telephonic education regarding their ability to self-refer for covered services within the Provider Network. This education will be documented in the Case Management system.

REFERENCES:

- UMCC 8.1.15.2

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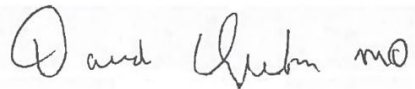
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RELATED DOCUMENTS:

- CHRISTUS Provider Manual
- CHRISTUS Provider Directory
- CHRISTUS Evidence of Coverage



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REVISION HISTORY:

Revision	Date	Description of Change	Committee
New	09/28/2017	Initial release.	Board of Directors
A	04/24/2019	Annual review. Removed Medicaid and CHIP and added Commercial Insured to lines of business.	Executive Leadership
B	05/04/2020	Annual review. No change to content.	Executive Leadership