



NETWORK *Notification*

Notice Date: April 14, 2022
To: Ohio Medicaid Providers
From: CareSource
Subject: BH OAHP Readmission Policy
Effective Date: November 18, 2021

Summary

Effective Nov. 18, 2021, the managed care entities (MCE) members of the Ohio Association of Health Plans (OAHP), including CareSource, received approval from the Ohio Department of Medicaid (ODM) to implement a standard 30-day behavioral health readmission policy and associated claim and clinical review programming that addressed behavioral health-specific guidelines set forth by ODM.

The policy and associated claims and clinical review program reviews all qualifying behavioral health readmissions occurring within 30 days to determine if the readmission was a preventable clinically-related readmission. The policy articulates the quality and documentation expectations for the roles and responsibilities of various entities involved in the treatment and discharge planning of an individual with a behavioral health concern who requires hospitalization.

Please note the following highlights from policy revisions:

- Reviews will be limited to readmissions to same facility as initial admission
- Pertinent and complete medical records for both admissions must be included with the claim submission to determine if the admission is appropriate or is considered a preventable clinically-related readmission
- Failure to provide complete medical records for a post-service clinical readmission review will result in an automatic administrative denial of the claim for the readmission
- Prior authorization processes and determinations are separate from any readmission review processes and determinations

Impact

Payments for readmissions determined to be a preventable clinically-related readmission will be adjusted to collapse the admissions into a single DRG payment.

Questions?

To review the [full policy](#), including policy effective dates for each MCE included in a [previous network notification](#), and for any questions, please visit our Policies page at: **CareSource.com** > Tools and Resources > [Provider Policies](#) or reach out to your Health Partner Representative.

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