



Wellplace

1333 Brewery Park Blvd., Suite 140, Detroit, M 48207



Standards: CARF: 2H1, 2H2, 2H3, 2H4, 2H5

Revision Date: 4/20/16; 4/10/17

Page: 1 of 3

Chapter: VIII. Utilization Management

Subject: B. Utilization Management for Substance Use Screens

I. POLICY:

It is the policy of Wellplace to ensure that the Access Center Clinicians are complete the Clinical Screens accurately, thoroughly and utilize sound clinical judgment to evaluate for medical necessity.

II. PURPOSE:

The purpose of this policy is to outline the process for peer and supervisory review of the clinical screens completed by the Access Center Clinicians.

III. APPLICATION:

This policy applies to the Substance Use Specialist(s), Substance Use Manager, Quality Coordinator, Chief Operating Officer

IV. DEFINITIONS:

None

V. PROCEDURES:

The Peer Review function is performed monthly and is developed as a quality assurance measure for ensuring that proper services are rendered for all telephonic calls relating to consumers accessing substance use services and as a module for identifying training needs.

The Peer Review is completed by each Substance Use Specialist on 1 or more of his or her peers each month. Each record shall be randomly selected and is then reviewed individually with each Substance Use Specialist by the Substance Use Manager monthly during supervision or earlier as needed. .

1. Substance Use Screening Records will be reviewed on a monthly basis utilizing the Substance Use Screening Audit Tool. The Wellplace Substance Use Screening Audit Tool addresses all areas of the screen to ensure accuracy and quality of the screens. All screens will be audited to ensure that diagnostic summary as well as the substance use screen is congruent with diagnosis, screening indicators and criteria.
2. Based on the average amount of screens completed each month, at minimum 2 screens per Substance Use Specialist will be reviewed monthly. Contingent Substance Use Specialists will have at minimum 2 of their screens reviewed quarterly.
3. When screening records are selected for review the person responsible for providing the screening shall not be solely responsible for the selection of his/her records to be reviewed and shall not be a reviewer of his/her own records.
4. The reviews of the screens shall be completed by each staff as a peer review function. All Access Center



Wellplace

1333 Brewery Park Blvd., Suite 140, Detroit, M 48207



Standards: CARF: 2H1, 2H2, 2H3, 2H4, 2H5

Revision Date: 4/20/16; 4/10/17

Page: 2 of 3

Chapter: VIII. Utilization Management

Subject: B. Utilization Management for Substance Use Screens

staff who complete reviews of substance use screens are Bachelor’s Level human services professionals and possess either a CADC (Certified Alcohol and Drug Counselor) credential or a certified Development Plan. When Substance Use Specialists complete utilization reviews, they will be completing peer reviews and are not reviewing any screens they completed themselves.

5. All Staff Peer Review tools are completed via the Survey Monkey Peer review tool monthly to complete the reviews.
6. Peer Review results are then viewed and shared with the Substance Use staff individually by the Substance Use Manager
7. Performance issues are addressed by the Substance Use Manager in monthly supervision or earlier.
8. Should an identified consistent pattern of non-compliance demonstrated by the Substance Use staff exist, the Substance Use Manager shall develop a Plan of Correction with the employee in question to rectify the problem.
9. Performance data is incorporated into ongoing staff training and development.
10. The Quality Coordinator collects and aggregates peer review data monthly to identify trends and track overall performance. Results are reviewed monthly and included in the semi-annual Quality Performance report.
11. All Substance Use UM results are reviewed in the Quality Improvement/Utilization Management Oversight Committee Meeting as scheduled by the Quality Department to identify trends and identify areas for improvement.

VI. QUALITY ASSURANCE:

The Wellplace Quality Improvement Committee shall monitor adherence to the policy as one element of its overall quality processes. The Wellplace Policy and Procedure Manual is reviewed and revised on an annual basis and is approved annually by the Wellplace Board of Managers. When applicable, the Wellplace subcontractor to whom this policy is applicable shall monitor adherence to this policy as part of a program of ongoing quality management.

VII. COMPLIANCE WITH ALL APPLICABLE LAWS:

Wellplace and its subcontractors are bound by all applicable federal, state, and county laws, rules, regulations, policies, and guidelines.

VIII. REFERENCES

None



Wellplace

1333 Brewery Park Blvd., Suite 140, Detroit, M 48207



Standards: CARF: 2H1, 2H2, 2H3, 2H4, 2H5	Revision Date: 4/20/16; 4/10/17	Page: 3 of 3
Chapter: VIII. Utilization Management	Subject: B. Utilization Management for Substance Use Screens	

IX. EXHIBITS:

1. Substance Use Screen Audit Tool