Title: Neurosurgical Refe	erral Guidelines Policy	[,] # :		
Origin Date: 10/10/13	Author: Chris Cammisa, MD, Medica	l Consultant		
Revised:	Author: Chris Cammisa, MD, Medical Consultant			
Applies to:				
☐ Medi-Cal	☐ Medicare	□ Commercial		
□ BHC	☐ State Sponsored	⊠All	□ N/A	
Regulatory/Accreditation:	_			
□ DMHS:	☐ HCFA:	□ DHS:		
☐ Other Reg. References:	□ NCQA:	□ N/A		
Units:				
☐ Administration	☐ Advice Nurses	☐ All Staff		
☐ Business Services	☐ Case Management	☐ Health Ed/Cultural Ling.		
☐ Marketing	☐ Member Services	☐ Planning, Survey, Reg Affairs		
☐ Provider Affairs	Quality Management	■ Auth/Utilization Management		

DESKTOP REFERENCE

Background/Purpose – CCHP is fortunate to have an excellent network of well qualified Neurosurgeons who are willing to provide services to CCHP members. However, it is necessary for the plan to prior authorize referrals to Neurosurgical specialty services in order to ensure that this valuable resource is appropriately utilized for all CCHP members.

POLICY

Based on discussion held between CCHP contracted Neurosurgeons and representatives of the Health Plan the criteria for initial consultation by Neurosurgery includes:

- A complete, recent history and physical examination with focus on neurological and behavioral
 issues performed by the member's primary care provider including what conservative therapies
 have been tried and their results and previous specialty evaluations and results.
- Evidence of recent imaging as appropriate which should accompany the referral request when submitted to the plan and the neurosurgical consultant.
- If the member has been initially evaluated by an allied health practitioner, there must be documentation that a physician has consulted on the member and agrees with the referral.
- Documentation that the referral is likely to require neurosurgical treatment. Examples would be evidence of neurological findings supported by abnormalities on imaging studies for patients being considered for laminectomy or evidence of 6 months or more of conservative therapy for patients being considered for lumbar fusion.

• For members with spine problems assigned to the RMC network, members should considered for referral to the RMC spine clinic for evaluation of back problems prior to neurosurgical evaluation as long as there is not an urgent need for evaluation and there is a moderate to low likelihood of surgical intervention. The RMC spine clinic specialist is happy to discuss cases being considered for neurosurgical referral with the PCP. Urgent or emergent neurosurgical referrals can be submitted directly to CCHP.

Documentation of the items above should be forwarded to the health plan with the prior authorization request and to the consultant specialist.