



**PBH UM/Access Communication Bulletin
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Practice Guidelines**

To: PBH Network Providers

**From: Craig B. Hummel, MD
PBH Medical Director**

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RE: Practice Guidelines

Practice guidelines are intended to assist providers and consumers in clinical decision-making and to improve care. They also document evidence available to determine appropriate care. Guidelines are not meant to dictate clinical practice but are evidenced based and an excellent source for guidance in the care of disorders. One needs to keep in mind that each patient is an individual and that each provider has his or her own approach to delivery of care. Therefore, all treatment must be individualized to the patient. Good clinical judgment should be used in all situations and at times will supersede practice guidelines.

PBH will use practice guidelines and clinical standards to evaluate effectiveness and appropriateness of care. This will be performed by the Utilization Management unit of PBH. Care that is deemed outside the norm will be evaluated by these guidelines. Providers may also use these guidelines as a road map for effective evidence based care. We also intend consumers to use these guidelines to help them make choices about treatment decisions.

This year PBH has added many guidelines for the treatment of ID/DD. These were derived by work groups from the Clinical Advisory Committee. This is landmark as there are no other guidelines in the field of ID/DD.

Good examples of the use of a guideline are the following:

1. A provider is treating a patient who suffers from schizophrenia who is still psychotic after a trial of 3 antipsychotics. The guidelines clearly show that the next step is for the patient to be placed on Clozaril. The provider should make arrangements for the patient to receive Clozaril. If

the case were reviewed by UR, we would require that the patient be placed on Clozaril if there were no contraindications and the patient was willing.

2. A patient with depression is being treated with hypnosis. The guidelines don't recommend hypnosis for the treatment of depression. Instead they recommend medication and/or CBT for the treatment of depression. We would only reimburse for the uses of those modalities.

Many of these guidelines have been adopted from the American Psychiatric Association and the Veterans Administration. PBH staff and consultants who are considered experts in their fields have developed several of these guidelines. All of the guidelines have been reviewed and accepted by the PBH Clinical Advisory Committee that consists of staff, practitioners and consumers.

The complete Guidelines can be found at:

<http://www.pbhsolutions.org/guidelines/>

For a hard copy call Katresa Jones at 704-939-7707

Please use these guidelines as a road map and an education tool. They are best used when patients are not achieving improvement goals.

PBH will continue to monitor, revise, and add to this list of guidelines.