	Shasta County Health and Human Services Agency Mental Health Plan	
	Request for Second Opinion	No. 2014-08
		Issue Date: 05/27/2014
		Last Revised: 03/29/2023
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Policy

This policy communicates the requirements and steps to ensure that all Medi-Cal beneficiaries may request a second opinion when the MHP or its network provider has determined that a beneficiary is not entitled to specialty mental health services (SMHS) due to not meeting the criteria for access to SMHS.

The beneficiary can request a second opinion from the MHP either verbally or in writing. At the beneficiary's request, the MHP will provide a second opinion by a licensed mental health professional, other than a psychiatric technician or a licensed vocational nurse, made available by the MHP when medical necessity criteria has not been met, and the beneficiary is not entitled to any specialty mental health services from the MHP. The MHP will also determine whether the second opinion requires a face-to-face encounter with the beneficiary.


If the second opinion agrees with the first, the decision will be binding and the beneficiary would need to follow the Beneficiary Problem Resolution Process (see Adverse Benefit Determination, Appeals, and State Hearings Policy) for any appeals.

A Notice of Adverse Beneficiary Determination (NOABD) is issued for any adverse beneficiary action, and the Beneficiary Problem Resolution Process is followed. The beneficiary will also receive in writing any decision made on their request for second opinion.

Procedure

The following steps will be taken to ensure that all beneficiaries may receive a second opinion if the beneficiary disagrees with and Access Team decision.

- A. MHP staff who receive the request shall inform the beneficiary requesting the second opinion that they can contact the Quality Management program by telephone at (530) 245-6750 or toll free at (888) 385-5201. Alternatively, the beneficiary may also write to Quality Management at PO Box 496005, Redding, CA 96049-6005.
 - a. NOTE: The beneficiary may, at any time, request the assistance of the Patients' Rights Advocate.
- B. MHP staff will contact the Quality Management program to inform them of the beneficiary's request for second opinion by emailing hhsamcc@co.shasta.ca.us.
- C. Quality Management staff will contact the clinical division chief or the clinical program coordinator to initiate the Second Opinion request, confirm which provider is assigned to complete assessment, and monitor for completion and outcome of the assessment.

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- D. A clinical staff member not involved in the initial decision will see the client requesting the second opinion:
- If the second opinion agrees with the first, the decision is binding.
 - If the second opinion differs from the first, the case will be discussed with a third member of the Access Team. The decision of the third member is binding.
 - The decision will be communicated to the Compliance/Quality Improvement Team for tracking purposes by emailing hhsamcc@co.shasta.ca.us.
- E. Quality Management staff will send follow up notification of the decision (including the medical justification for the decision), in writing, to the beneficiary. Notification of decision, with medical justification, will be noted in the Medical Record as well.
- F. If the beneficiary is not satisfied with the decision, the beneficiary will be referred to the Beneficiary Problem Resolution process.
- G. Quality Management will track all requests and document the outcome of each request.

References

- 42 C.F.R. § 438.206(b)
- Cal Code Regs. Title 9 § 1810.405(e)
- MHP Agreement, Attachment 2, Section F

Authorization

The above policy has been reviewed and is authorized for immediate implementation:

DocuSigned by:

Miguel Rodriguez

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Miguel Rodriguez, LCSW, Mental Health Director
 Behavioral Health & Social Services
 Shasta County Health & Human Services Agency

04/03/2023 | 11:09 AM PDT

Date