GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1999

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HOUSE BILL 715

Committee Substitute Favorable 4/23/99 Senate Health Care Committee Substitute Adopted 5/11/99

Short Title: Utilization Review/ASAM Criteria.	(Public)
Sponsors:	_
Referred to:	

March 30, 1999

A BILL TO BE ENTITLED

AN ACT TO PROVIDE THAT UTILIZATION REVIEW CRITERIA FOR SUBSTANCE ABUSE TREATMENT BE CRITERIA ADOPTED BY THE AMERICAN SOCIETY OF ADDICTION MEDICINE (ASAM) OR SIMILAR CRITERIA.

The General Assembly of North Carolina enacts:

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Section 1. G.S. 58-50-61(d) reads as rewritten:

"(d) Program Operations. – In every utilization review program, an insurer or URO shall use documented clinical review criteria that are based on sound clinical evidence and that are periodically evaluated to assure ongoing efficacy. An insurer may develop its own clinical review criteria or purchase or license clinical review criteria. Criteria for determining when a patient needs to be placed in a substance abuse treatment program shall be either (i) the diagnostic criteria contained in the most recent revision of the American Society of Addiction Medicine Patient Placement Criteria for the Treatment of Substance-Related Disorders or (ii) criteria adopted by the insurer or its URO. The Department, in consultation with the Department of Health and Human Services, may

17 require proof of compliance with this subsection by a plan or URO.

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Qualified health care professionals shall administer the utilization review program and oversee review decisions under the direction of a medical doctor. A medical doctor shall evaluate the clinical appropriateness of noncertifications. Compensation to persons involved in utilization review shall not contain any direct or indirect incentives for them to make any particular review decisions. Compensation to utilization reviewers shall not be directly or indirectly based on the number or type of noncertifications they render. In issuing a utilization review decision, an insurer shall: obtain all information required to make the decision, including pertinent clinical information; employ a process to ensure that utilization reviewers apply clinical review criteria consistently; and issue the decision in a timely manner pursuant to this section."

Section 2. This act becomes effective October 1, 1999, and applies to utilization reviews conducted on and after that date.