TUFTS Health Plan

a Point32Health company

Behavioral Health Acute Treatment Services for Substance Use Disorders: Level 3.7, Pregnancy Enhanced Services

These performance specifications apply to the following Tufts Health Plan products:

- ☐ Tufts Health Plan Commercial[1]
- ☐ Tufts Medicare Preferred HMO (a Medicare Advantage product)[2]
- ☒ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)[2]

These performance specifications apply to the following Tufts Health Public Plans products:

- ☐ Tufts Health Direct (a Massachusetts Qualified Health Plan (QHP) (a commercial product)
- ☒ Tufts Health Together (a MassHealth MCO Plan and Accountable Care Partnership Plan)
- ☐ Tufts Health RITogether (a Rhode Island Medicaid Plan)
- ☒ Tufts Health One Care (a dual-eligible product)

Providers contracted for this level of care or service will be expected to comply with applicable regulations set forth in the Code of Massachusetts Regulations and all requirements of these service-specific performance specifications in addition to the General Behavioral Health Performance specifications. All Performance specifications are located online at tuftshealthplan.com in the Provider Resource Center.

DEFINITION

The services contained here are specific to medically monitored detoxification services for pregnant addicted women. Additional specifications that are also required for this level of care are contained in the document titled Behavioral Health Acute Treatment Services for Substance Use Disorders, Level 3.7, which are also medically monitored detoxification services.

COMPONENTS OF SERVICE

In addition to the components of service outlined in Behavioral Health Acute Treatment Services for Substance Use Disorders, Level 3.7, this service should also include the following:

1. The facility shall admit pregnant women who are medically stable and do not require admission to an acute Level IV or Inpatient hospital, regardless of the number of weeks of gestation.
2. The facility will admit and have the capacity to treat Members who are currently receiving Methadone or other opiate replacement treatments. This capacity may take the form of active affiliation agreements with providers licensed to provide such treatments.
3. The facility will have expanded, appropriate protocols for detoxification of pregnant women.
4. Fetal monitoring equipment and appropriately skilled staff to utilize it will be available on site.
5. The facility will arrange all necessary medical and obstetric consultation within 48 hours of admission.
6. A minimum of 1 session per day will be provided of education and counseling on prenatal and postpartum care, HIV, and the AIDS virus.

STAFFING REQUIREMENTS

In addition to the staffing requirements outlined in Behavioral Health Acute Treatment Services for Substance Use Disorders, Level 3.7, this service should also include the following:

1. A minimum of 1 full-time registered nurse with formal training and prior medical experience in Obstetrics and Gynecology shall be on staff and shall lead the facility's treatment and discharge planning for these Members.

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1. Commercial products include HMO, POS, PPO, and CareLink℠ when Tufts Health Plan is the primary administrator.
2. Tufts Medicare Preferred and Tufts Health Plan SCO are collectively referred to in this payment policy as Senior Products.

2. For facilities with more than 4 pregnant Members, an additional .25 FTE registered nursing staff with Obstetrics/Gynecology training and experience.
3. The facility's multidisciplinary team includes other professional and medical staff with training and experience in Obstetrics and Gynecology.

SERVICE, COMMUNITY, AND COLLATERAL LINKAGES

In addition to the service community and collateral linkage requirements outlined in Behavioral Health Acute Treatment Services for Substance Use Disorders, Level 3.7, this service should also include the following:

1. If the facility is not located within a medical facility with Obstetrics/Gynecological capacity, the facility has a formal, operational agreement with a local Obstetrical/Gynecological medical unit.
2. The facility has a formal, operational emergency backup agreement for Obstetrical/Gynecological emergencies with a hospital within immediate proximity to the facility.
3. Linkage to services is initiated upon admission and as part of the treatment plan may include, but are not limited to:
   - Prenatal care
   - Family reproductive health programs
   - Early intervention programs
   - High-risk infant/ family support programs
   - Healthy start
   - WIC and other nutritional programs
   - Battered women's shelters, safe housing, transitional living
   - Violence prevention program
   - Childcare/ babysitting housing
   - Transportation
   - Legal services
   - Transitional assistance
   - Behavioral health community partners

QUALITY MANAGEMENT (QM)

1. The facility will develop and maintain a quality management plan that is consistent with that of Tufts Health Public Plans, and which utilizes appropriate measures to monitor, measure and improve the activities and services it provides.
2. A continuous quality improvement process is utilized and will include outcome measures and satisfaction surveys to measure and improve the quality of care and service delivered to Members, including youth and their families.
3. Clinical outcomes data must be made available to Tufts Health Public Plans upon request and must be consistent with Tufts Health Public Plans' performance standard for acute inpatient services.
4. All Reportable Adverse Incidents will be reported to Tufts Health Public Plans within 1 business day of their occurrence per Tufts Health Public Plans' policy and DMH licensing requirements. A Reportable Adverse Incident is an occurrence that represents actual or potential harm to the well-being of a Member, or to others by action of a Member, who is receiving services managed by Tufts Health Public Plans or has recently been discharged from services managed by Tufts Health Public Plans.
5. The facility/program will adhere to all reporting requirements of DPH and/or DMH regarding Serious Incidents and all related matters
6. All substance use treatment providers must track, by referral source:
   - Referrals for services;
   - The outcome of each referral (i.e., admission, etc.); and
7. If the substance use disorder treatment provider refuses to accept a referral, the reason for the refusal.

PROCESS SPECIFICATIONS

Treatment Planning and Documentation

In addition to the process specification requirements outlined in Behavioral Health Acute Treatment Services for Substance Use Disorders, Level 3.7, this service should also include the following:

1. A bio-psychosocial assessment is conducted within 24-hours of admission by a registered nurse or more highly credentialed medical professional. This includes an obstetrical/gynecological history and assessment, and when medically indicated, a prenatal examination.
2. Ensure that Behavioral Health Clinical Assessments conducted by Behavioral Health Providers are in writing, dated and signed, and include, at a minimum, the following:

- Clinical formulation, rationale for admission or continuance of care, discussion of any possible diversionary or lower levels of care, recommendations, and strengths.

3. Assessments include a formal screening for all psychosocial risk factors characteristic of pregnant women with substance use disorders.
4. The treatment plan addresses prenatal (or postpartum if appropriate) issues and is developed in consultation with the Member's Primary Care Provider and/or Obstetrician/Gynecologist.
5. If the Member does not have a preexisting Obstetrician/Gynecologist, the facility will make a referral immediately upon admission.
6. As clinically indicated and with consent, the facility provides consultation and education to the Member's significant other and family members.
7. Ongoing prenatal examinations are provided on site and as medically indicated.
8. All progress notes meet appropriate DPH and JCAHO licensing requirements.

Discharge Planning and Documentation

In addition to the process specification requirements outlined in Behavioral Health Acute Treatment Services for Substance Use Disorders, Level 3.7, this service should also include the following:

1. All medical follow-up appointments are scheduled prior to discharge and are relayed to the woman verbally and in writing prior to discharge.

DOCUMENT HISTORY

- January 2024: Tufts Health One Care (a dual-eligible product) name change.
- July 2020: Template Updates