

February 17, 2021

**Re: A bill to relating to behavioral health; amending ORS 414.766 and 743A.168**

Dear Committee Members:

On behalf of Change Healthcare, I respectfully share our comments related to House Bill 3046

**Change Healthcare and Its InterQual Tool Described**

Change Healthcare provides health care technology solutions to create a more effective and efficient healthcare system. As a key facilitator of value-based healthcare, Change Healthcare collaborates with our customers and partners to accelerate the journey toward improved lives and healthier communities. We provide visible measures of quality and value not only at the point of care, but also between, after, and in between care episodes.

Change Healthcare develops and licenses industry leading InterQual® criteria which has been the gold standard for clinical decision support content and tools for over 40 years. There are over 4,000 providers and payers who utilize our InterQual criteria to help ensure that they make clinically appropriate medical utilization decisions grounded in evidence-based medicine. The continued retention of our client base for decades for both providers and payers for our InterQual criteria attests to the quality of our criteria. For many years, Change Healthcare has been a valued partner to health plans and providers serving beneficiaries in the State of Oregon.

Independent counsel has assessed our Behavioral Health criteria and have found them to be in alignment with Federal Mental Health Parity Law. Change Healthcare has successfully worked with other States that have reviewed our InterQual Behavioral Health criteria, and these other jurisdictions have found our criteria to meet the strict requirements of each given state. Specifically, Change Healthcare is a qualified vendor of Behavioral Health Clinical Review Criteria in the State of Connecticut since 2013, under Connecticut General Statutes §38a-591c.

**Our Support for Improving the Quality of Care**

Change Healthcare applauds the efforts of the State of Oregon to improve the quality of care provided to those suffering from mental health illnesses. We

would like to offer our expertise with the following comment related to issues addressed in the above referenced bill.

**We urge caution in Naming a Specific Review Criteria Tool, and Request Instead for Authorization of Any Appropriately Objective, Evidence-Based Review Criteria Tool**

We believe the State should clarify the intent of Section 2. ORS 743A.168 (5). Specifically, we ask the state to clarify the intent of this section to allow for providers and payers to continue using third party criteria as long as they meet the requirements under Section 2. ORS 743A.168 (5).

This would reduce any ambiguity in interpretation of requirements by the Agency of implementation should this bill become Law. We are certain that the intent of the State is to leverage the most recent evidence-based findings in mental health care or, at the least, allow for utilization of the most current criteria as clinical evidence-based practices advance.

Therefore, we suggest the language at **SECTION 2.** ORS 743A.168 (5) be amended as follows (underlined verbiage suggested for insertion, strikethrough for deletion):

**(5)(a) Any medical necessity or utilization review conducted under subsection (2)(h) of this section for the diagnosis, prevention or treatment of behavioral health conditions or relating to service intensity, level of care placement, continued stay or discharge must be based solely on the following:**

**(A) Standards of care and clinical practice that are generally nationally recognized and generally accepted by health care providers practicing in the relevant clinical specialties such as psychiatry, psychology, clinical social work, addiction medicine and counseling and marriage and family therapy for the diagnosis, prevention and treatment of behavioral health conditions in children, adolescents and adults.**

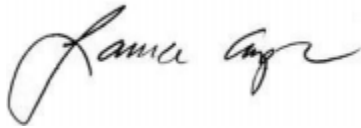
**(B) Valid, clinical criteria that are sourced to evidence-based sources medicine such as peer-reviewed scientific studies and medical literature, clinical practice guidelines and recommendations of nonprofit health care provider professional associations, specialty societies, agencies of the federal government and drug labeling approved by the United States Food and Drug Administration.**

**Conclusion**

Change Healthcare would welcome the opportunity to meet with policymakers or agencies to undertake a detailed review of InterQual medical necessity criteria, and how InterQual can address the intent of the State of Oregon. We have found that policymakers in other states have benefitted greatly from face-to-face discussion with our clinical leaders when evaluating InterQual criteria.

Thank you in advance for your consideration of our commentary and Change Healthcare would welcome the opportunity to provide further insight into our InterQual criteria.

Regards,



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Change Healthcare

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<sup>1</sup> Change Healthcare internal analyses