

Policy on Clinical Practice Guidelines

1. The Ventura County Health Care Plan (VCHCP) will adopt and disseminate clinical practice guidelines relevant to the Plan Membership for the provision of preventive, non-preventive acute and chronic medical services, and behavioral healthcare services. At any time the Plan will have guidelines for at least 2 acute or chronic medical conditions. At least two of the Plan's adopted guidelines will be included as the clinical basis for a portion of the Plan's Disease Management Program.

The Plan will determine the conditions appropriate for guidelines for this Plan based upon:

- a. High disease rates
 - b. High cost of the medical condition
 - c. High probability of disease complications
 - d. High probability that improvement in compliance will have an impact on outcomes.
 - e. High rates of hospitalization
2. The VCHCP will adopt at least 1 evidence-based preventive health guideline for each of the following: perinatal care, care for children up to 24 months old, care for children 2-19 years old, care for adults 20-64 years old, and care for adults 65 years and older.
 3. All guidelines will have the following features:
 - a. Procedure for adoption of guidelines from recognized sources:

Guidelines may be recommended by members of the provider network, the medical directors, and the nurses involved in the quality improvement department.

The guidelines will be evidence-based and are guidelines which are known to be effective in improving health outcomes. The Plan's guidelines will be adopted from sources which are recognized for the development of scientifically based guidelines and experts in the medical condition or disease state.

Recognized sources will include:
Professional medical associations
American Medical Association.

American College of Cardiology
American Orthopedic Association.
American Academy of Pediatrics
American Academy of Family Medicine
American College of Surgeons

Voluntary health organizations

American Diabetes Association.
American Heart Association
American Stroke Association.
American Lung Association.

NIH Centers and other governmental health organizations

National Heart Lung and Blood Institute
National Cancer Institute
U.S. Preventive Task Force
Centers for Disease Control
ACIP
Federal Drug Agency

Recognized Centers of Care for the Disease being considered

National Guideline Clearinghouse

Plan created clinical practice guidelines:

The Ventura County Health Care Plan Clinical Leadership may identify the need to assist practitioners and members in making decisions about appropriate health care for specific clinical circumstances or behavioral health services for which no guideline currently exists from one of the above expert organizations.

The clinical leader requests that the Medical Director add a topic to the next QA Committee meeting.

During the next QA Committee Meeting, the clinical leader presents information regarding the rationale for the development of a new clinical practice guideline to address a recognized need in the VCHCP Membership.

The QAC discusses the proposed guideline, and if there is agreement that it should be developed, an ad-hoc committee is formed to develop the guideline. The committee may be comprised of generalists who are familiar with the condition and will have at least two (2)

specialists who treat the condition. The committee may need to include experts who are not providers with the Health Plan, if there are not sufficient specialists available within the Plan to meet the needs of the committee.

The ad-hoc committee ensures the development of the guideline is evidence-based and that the guideline recommendations are known to be effective in improving health outcomes. This may be done by identifying scientific evidence or professional standards, or by soliciting expert opinion. The ad-hoc committee may share the draft guideline with other practitioners from the affected specialty to solicit suggestions for reasonable modifications. The ad-hoc committee presents the final version of the guideline along with supporting evidence to the QAC.

The QAC reviews the proposed guideline to ensure it is evidence-based and to assess its appropriateness for the VCHCP membership.

b. Adoption of guidelines

At the next appropriate meeting of the Quality Assurance Committee (QAC), the Medical Director will present the proposed guideline and related literature for discussion. The Quality Assurance Committee will review the guideline to ensure it is from a recognized source and to assess its appropriateness for the Ventura County Health Care membership. The Quality Assurance Committee will vote on whether or not to approve and adopt the guideline. The QA Department is responsible for notifying the requestor of the Quality Assurance Committee's decision.

c. Procedure upon the addition of a guideline:

The QAC Staff updates the list of approved guidelines and:

*Notifies the webmaster to update the Ventura County Health Care Plan website to include the specific name of the guideline in the list of published guidelines that have been adopted by the Ventura County Health Care Plan

*Notifies the Ventura County Health Care Plan provider network of the newly adopted guideline by fax or mail (as appropriate to each provider).

*Updates the clinical guideline review schedule to include review of the guideline within the next 24 months.

*Creates a permanent file for the guideline. This file may be in electronic or hard copy form. The file includes the guideline, any related literature, record of the approval date, record of any subsequent review dates, and information regarding any revisions.

d. Review and update of Clinical Practice Guidelines:

The VCHCP will ensure all guidelines are reviewed at least every 24 months or more frequently if new scientific evidence or national standards are published within the 24 month period.

The QA Department maintains a clinical practice guideline review schedule. The schedule identifies each guideline's initial adoption date, last review date, and next scheduled 24-month review date.

The QA Department review the clinical practice guideline review schedule on a monthly basis and flags any guideline that is due for review in the next 6 months.

The QA department conducts a search to determine if there is any new scientific evidence or updates related to the guideline

The QA Department also monitors adopted guideline sources on a monthly basis to determine if new scientific evidence or national standards have been published for any of VCHCP's adopted guidelines.

If new information is available, the QA Dept. reviews the information with the Medical Director, updates the guideline in redline, and places the guideline in the agenda for the next QAC meeting.

The Medical Director presents the redline version of the guideline and the supporting information to the QAC for discussion.

The QAC reviews the proposed guideline change to ensure it is evidence-based and continues to be appropriate for the VCHCP membership.

The QAC votes on whether or not to approve the guideline change.

If the guideline change is approved, the QA Dept. follows the same procedure as when a guideline is first adopted.

The Plan will review the guidelines at least every two years. The existing guidelines will be amended as appropriate or the approved guidelines will be changed as appropriate to the conditions described in #1. If the Plan becomes aware that a guideline adopted by an expert organization has changed, the Plan's QA Committee will, as soon as possible, review the revised guideline and update the Plan's guideline as appropriate. When there is a change in

the guideline, the Plan will make the guideline available to the Plan's providers by placing the guideline on the Web site and by sending a notice to all providers by fax and/or mail alerting the providers to the change of the guideline and where it can be found.

e. Distribution of Clinical Practice Guidelines.

The VCHCP distributes and promotes the use of evidence-based clinical practice guidelines to practitioners in an effort to improve health care quality and reduce unnecessary variation in care.

The procedure for distributing guidelines includes the following:

All guidelines that VCHCP has approved and adopted are posted on the VCHCP provider website either as a link to the nationally recognized source or as a PDF file.

Information regarding the specific VCHCP adopted guidelines and how to access them is included in the VCHCP Provider Manual. Practitioners who are new to the VCHCP provider network are given instructions on how to access the electronic version of the Provider Manual on the VCHCP website. New practitioners who do not have Internet access are provided with a hard copy of the VCHCP Provider Manual.

The QA Dept. issues a faxblast to notify practitioners when new guidelines are approved and adopted or when guidelines have been updated or reviewed. The faxblast informs practitioners how to access the VCHCP provider website to obtain the guideline or how to request a hard copy of the guideline if the practitioner does not have Internet access. The faxblast is issued within 30 days of approval by the QAC. For those practitioners who do not have fax access, the QA Dept. issues notification in writing by mail.

4. Monitoring of Performance Against Clinical Practice Guidelines

The VCHCP, on an annual basis, measures performance against guidelines by analyzing HEDIS results. The analysis may be part of evaluating the effectiveness of various quality improvement initiatives, or as part of our annual comprehensive HEDIS assessment.

5. Behavioral Health Clinical Practice Guidelines – The Ventura County Health Care Plan has delegated behavioral healthcare including the development and evaluation of behavioral health clinical practice guidelines to OptumHealth Behavioral Solutions of California (OHBS). The Health Plan will place on its website a link to the OHBS Clinical Practice Guidelines and will notify the Plan's Providers by fax or U.S. Mail that those guidelines are available on the Plan's website. The

Plan will notify its providers in this same manner at least every 2 years or as the Plan becomes aware of any changes in the OHBS Clinical Practice Guidelines.

A. Attachment: None

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