Subject: Second Opinions

Objective:
I. To ensure that Health Share/Tuality Health Alliance (THA) has a process in place to allow Oregon Health Plan (OHP) members to acquire a second medical or surgical opinion.

Policy:
I. The Health Share Member Handbook is provided to all OHP-THA members within 30 days of their Health Share/THA plan enrollment. The Member Handbook indicates that members have the right to be involved in the development of their treatment plan; to be informed of all covered and non-covered services; and, under certain circumstances, to receive a second medical or surgical opinion without cost to them.

II. Quarterly THA Member Newsletters are mailed to members and are available on the THA Website. These newsletters provide additional information/instructions for obtaining a second opinion.

III. A second opinion may be requested under any of the following circumstances:
   a. The member’s diagnosis is in doubt due to conflicting test results;
   b. There are questions about the member’s diagnosis or plan of care regarding a condition that threatens loss of life, limb, or bodily function;
   c. The clinical indications are complex, unclear, or confusing;
   d. There are questions about the reasonableness or necessity of the member’s recommended surgical procedure;
   e. The member’s current treatment plan is not improving his/her condition and it is documented that there has been appropriate compliance with the recommended plan.

IV. A second opinion may be requested/provided in the following manner:
   a. The member’s current practitioner or the member him/herself may choose another THA network practitioner to provide a second medical or surgical opinion.
   b. THA Medical Management and THA Medical Director may assist in locating/providing a qualified second opinion practitioner.
   c. If a “like qualified” Full, Associate, or Contracted practitioner is not available within the THA network, the PCP or the member may choose an out-of-plan second opinion practitioner; appointment with an out-of-plan practitioner must be authorized by THA Medical Management.
   d. Appropriate second opinion authorization will be documented/tracked in the Plexis claims and authorization system.
   e. The member is informed that he/she will not receive second opinion charges.
f. In the event that the recommendations of the first and second practitioner differ regarding the need for surgery or other major medical procedure, the THA Medical Director may authorize a third opinion.

References:
- 42 CFR 438.206(b)(3)
- 2012 OHA Coordinated Care Organization Contract #139071 (Exhibit B.3.2.)
- 2013 Health Share Member Handbook
- Health Share RAE Participation Agreement

Formulated: November 2007

Reviewed: August 2010
August 2013

THA Plan Director
THA Medical Director