

OTHER CONDITIONS THAT MAY BE A FOCUS OF CLINICAL ATTENTION (PREVIOUSLY V-CODE CONDITIONS)

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BENEFIT CONSIDERATIONS

Before using this guideline, please check the member's specific benefit plan requirements and any federal or state mandates, if applicable.

COVERAGE RATIONALE

Other Conditions That May Be a Focus of Clinical Attention as primary diagnoses defined in the current edition of the Diagnostic and Statistical Manual of the American Psychiatric Association are excluded. Indications for coverage are limited to circumstances where (Certificate of Coverage, 2001, 2007, 2009, 2011):

- Other Conditions That May Be a Focus of Clinical Attention are a secondary diagnosis; and
- The primary diagnosis is a covered condition; and
- Treatment is principally focused on the primary diagnosis.

The lack of a specific exclusion of a service does not imply that the service is covered.

The following are examples of circumstances under which mental health treatment for Other Conditions That May Be a Focus of Clinical Attention (V-Code Condition) are excluded (not an all-inclusive list):

- The problem is the focus of diagnosis or treatment and the individual has no behavioral health condition (e.g., a partner relational problem in which neither partner has symptoms that meet criteria for a behavioral health condition).
- The individual has a behavioral health condition, but it is unrelated to the presenting problem (e.g., a partner relational problem in which one of the partners has an incidental behavioral health condition), and the problem – not the behavioral health condition – is the focus of diagnosis or treatment.

According to the DSM, the diagnostic category Other Conditions That May Be a Focus of Clinical Attention includes conditions and problems that may be a focus of clinical attention or that may otherwise affect the diagnosis, course, prognosis, or treatment of a behavioral health condition. Other Conditions That May Be a Focus of Clinical Attention are not considered behavioral health diagnoses. They are meant to draw attention to additional issues that may be encountered during treatment (Diagnostic and Statistical Manual of Mental Disorders, 5th ed.; DSM-5; American Psychiatric Association, 2013).

A "primary diagnosis" (i.e., principal diagnosis) is defined as the condition that after a complete evaluation is determined to be the chief cause for treatment and also becomes the focus of treatment. When a person has multiple diagnoses, the first disorder listed is assumed to be the primary diagnosis unless the provider otherwise spec (DSM-5, 2013). Other Conditions That May Be a Focus of Clinical Attention are only covered as a "secondary diagnosis," (i.e., a diagnosis that is not the principal focus of treatment).

The requested service or procedure must be reviewed against the language in the member's benefit document. When the requested service or procedure is limited or excluded from the member's benefit document, or is otherwise defined differently, it is the terms of the member's benefit document that prevails.

All services must be provided by or under the direction of a properly qualified behavioral health provider.

LEVEL OF CARE GUIDELINES

Optum / OptumHealth Behavioral Solutions of California Level of Care Guidelines are available at:
<https://www.providerexpress.com/content/ope-provexpr/us/en/clinical-resources/guidelines-policies/locg.html>

The Level of Care Guidelines are a set of objective and evidence-based behavioral health guidelines used to standardize coverage determinations, promote evidence-based practices, and support members' recovery, resiliency, and wellbeing.

UNITEDHEALTHCARE BENEFIT PLAN DEFINITIONS

For plans using 2001 and 2004 generic UnitedHealthcare COC/SPD, unless otherwise specified
Covered Health Service(s)

Those health services provided for the purpose of preventing, diagnosing or treating a sickness, injury, mental illness, substance abuse, or their symptoms.

A Covered Health Service is a health care service or supply described in *Section 1: What's Covered--Benefits as a Covered Health Service*, which is not excluded under *Section 2: What's Not Covered--Exclusions*.

For plans using 2007 and 2009 generic UnitedHealthcare COC/SPD, unless otherwise specified
Covered Health Service(s)

Those health services, including services, supplies, or Pharmaceutical Products, which we determine to be all of the following:

- Provided for the purpose of preventing, diagnosing or treating a sickness, injury, mental illness, substance abuse, or their symptoms.
- Consistent with nationally recognized scientific evidence as available, and prevailing medical standards and clinical guidelines as described below.
- Not provided for the convenience of the Covered Person, Physician, facility or any other person.
- Described in the *Certificate of Coverage* under *Section 1: Covered Health Services* and in the *Schedule of Benefits*.
- Not otherwise excluded in the *Certificate of Coverage* under *Section 2: Exclusions and Limitations*.

In applying the above definition, "scientific evidence" and "prevailing medical standards" shall have the following meanings:

- "Scientific evidence" means the results of controlled clinical trials or other studies published in peer-reviewed, medical literature generally recognized by the relevant medical specialty community.
- "Prevailing medical standards and clinical guidelines" means nationally recognized professional standards of care including, but not limited to, national consensus statements, nationally recognized clinical guidelines, and national specialty society guidelines.

For plans using 2011 and more recent generic UnitedHealthcare COC/SPD, unless otherwise specified
Covered Health Care Service(s) - health care services, including supplies or Pharmaceutical Products, which we determine to be all of the following:

- Medically Necessary.
- Described as a Covered Health Care Service in the *Certificate* under *Section 1: Covered Health Care Services* and in the *Schedule of Benefits*.
- Not excluded in the *Certificate* under *Section 2: Exclusions and Limitations*.

Medically Necessary - health care services provided for the purpose of preventing, evaluating, diagnosing or treating a Sickness, Injury, Mental Illness, substance-related and addictive disorders, condition, disease or its symptoms, that are all of the following as determined by us or our designee.

- In accordance with Generally Accepted Standards of Medical Practice.
- Clinically appropriate, in terms of type, frequency, extent, site and duration, and considered effective for your Sickness, Injury, Mental Illness, substance-related and addictive disorders, disease or its symptoms.
- Not mainly for your convenience or that of your doctor or other health care provider.

- Not more costly than an alternative drug, service(s) or supply that is at least as likely to produce equivalent therapeutic or diagnostic results as to the diagnosis or treatment of your Sickness, Injury, disease or symptoms.

Generally Accepted Standards of Medical Practice are standards that are based on credible scientific evidence published in peer-reviewed medical literature generally recognized by the relevant medical community, relying primarily on controlled clinical trials, or, if not available, observational studies from more than one institution that suggest a causal relationship between the service or treatment and health outcomes.

If no credible scientific evidence is available, then standards that are based on Doctor specialty society recommendations or professional standards of care may be considered. We have the right to consult expert opinion in determining whether health care services are Medically Necessary. The decision to apply Doctor specialty society recommendations, the choice of expert and the determination of when to use any such expert opinion, shall be determined by us.

We develop and maintain clinical policies that describe the Generally Accepted Standards of Medical Practice scientific evidence, prevailing medical standards and clinical guidelines supporting our determinations regarding specific services.

APPLICABLE CODES

The following list(s) of procedure and/or diagnosis codes is provided for reference purposes only and may not be all inclusive. Listing of a code in this guideline does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member-specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other policies and guidelines may apply.

ICD-10 Diagnosis Code	ICD-10 Description
E66.9	Obesity, unspecified
N94.3	Premenstrual tension syndrome
R41.83	Borderline intellectual functioning
T74.01XA	Adult neglect or abandonment, confirmed, initial encounter
T74.01XD	Adult neglect or abandonment, confirmed, subsequent encounter
T74.02XA	Child neglect or abandonment, confirmed, initial encounter
T74.02XD	Child neglect or abandonment, confirmed, subsequent encounter
T74.11XA	Adult physical abuse, confirmed, initial encounter
T74.11XD	Adult physical abuse, confirmed, subsequent encounter
T74.12XA	Child physical abuse, confirmed, initial encounter
T74.12XD	Child physical abuse, confirmed, subsequent encounter
T74.21XA	Adult sexual abuse, confirmed, initial encounter
T74.21XD	Adult sexual abuse, confirmed, subsequent encounter
T74.22XA	Child sexual abuse, confirmed, initial encounter
T74.22XD	Child sexual abuse, confirmed, subsequent encounter
T74.31XA	Adult psychological abuse, confirmed, initial encounter
T74.31XD	Adult psychological abuse, confirmed, subsequent encounter
T74.32XA	Child psychological abuse, confirmed, initial encounter
T74.32XD	Child psychological abuse, confirmed, subsequent encounter
Z55.9	Problems related to education and literacy, unspecified
Z56.82	Military deployment status
Z59.0	Homelessness
Z59.1	Inadequate housing
Z59.3	Problems related to living in residential institution
Z59.5	Extreme poverty

ICD-10 Diagnosis Code	ICD-10 Description
Z59.9	Problem related to housing and economic circumstances, unspecified
Z60.2	Problems related to living alone
Z60.3	Acculturation difficulty
Z60.9	Problem related to social environment, unspecified
Z62.810	Personal history of physical and sexual abuse in childhood
Z62.811	Personal history of psychological abuse in childhood
Z62.820	Parent-biological child conflict
Z62.898	Other specified problems related to upbringing
Z63.0	Problems in relationship with spouse or partner
Z63.4	Disappearance and death of family member
Z63.5	Disruption of family by separation and divorce
Z63.8	Other specified problems related to primary support group
Z64.0	Problems related to unwanted pregnancy
Z64.1	Problems related to multiparity
Z64.4	Discord with counselors
Z65.0	Conviction in civil and criminal proceedings without imprisonment
Z65.5	Exposure to disaster, war, and other hostilities
Z69.010	Encounter for mental health services for victim of parental child abuse
Z69.011	Encounter for mental health services for perpetrator of parental child abuse
Z69.021	Encounter for mental health services for perpetrator of non-parental child abuse
Z69.11	Encounter for mental health services for victim of spousal or partner abuse
Z69.12	Encounter for mental health services for perpetrator of spousal or partner abuse
Z69.81	Encounter for mental health services for victim of other abuse
Z71.9	Counseling, unspecified
Z72.810	Child and adolescent antisocial behavior
Z72.9	Problem related to lifestyle, unspecified
Z75.3	Unavailability and inaccessibility of health-care facilities
Z75.4	Unavailability and inaccessibility of other helping agencies
Z76.5	Malingering [conscious simulation]
Z91.19	Patient's noncompliance with other medical treatment and regimen
Z91.49	Other personal history of psychological trauma, not elsewhere classified
Z91.5	Personal history of self-harm
Z91.83	Wandering in diseases classified elsewhere
Z91.89	Other specified personal risk factors, not elsewhere classified

DEFINITIONS

Other Conditions That May Be a Focus of Clinical Attention may otherwise affect the diagnosis, course, prognosis or treatment of a behavioral health condition. These conditions are not considered behavioral health conditions, but are meant to draw attention to additional issues that may be encountered during treatment.

REFERENCES*

American Psychiatric Association. *Diagnostic and statistical manual of mental disorders* (5th ed.) 2013; Arlington, VA: American Psychiatric Publishing.

Generic UnitedHealthcare Certificate of Coverage, 2001

Generic UnitedHealthcare Certificate of Coverage, 2007

Generic UnitedHealthcare Certificate of Coverage, 2009

Generic UnitedHealthcare Certificate of Coverage, 2011

Generic UnitedHealthcare Certificate of Coverage, 2017

*Additional reference materials can be found in the reference section(s) of the applicable Level of Care Guidelines

HISTORY/REVISION INFORMATION

Date	Action/Description
05/09/2017	<ul style="list-style-type: none">Version 1 – Annual Review
05/09/2018	<ul style="list-style-type: none">Annual Update: Updates to formatting, references checked