



Colorado Health Partnerships, LLC
Pikes Peak ♦ SyCare ♦ West Slope Casa ♦ ValueOptions

**Enhanced Clinical Management
Thirty-Five Individual Therapy Sessions within a fiscal year.**

Client Name: _____
Medicaid ID: _____
DOB: _____

Utilization Management process for mental health center providers

- A report showing clients who receive more than 35 individual sessions in a fiscal year within the mental health center will be sent to supervisors for internal review of the cases.
- Supervisors will review the members receiving this amount of therapy, and make a determination regarding diagnosis, service mix, over utilization, and discharge.
- Supervisors will make a supervisory note in the member’s chart regarding this review, and update the treatment plan if appropriate.

Date Note Entered in Chart: _____

What was discussed? _____

Supervisor’s Name: _____

Date: _____

Supervisor’s Signature: _____

Telephone #: _____