

## Clinical Guidelines and Related Provider Requirements

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Community Behavioral Health (CBH) has adopted Clinical Practice Guidelines (CPGs) to outline best practices for the treatment of specific disorders or certain populations. These guidelines outline best practices for the such treatments and will be used by CBH to assess the quality of care provided to CBH members. As such, providers are advised to review and, where appropriate, implement these best practices in their care. CPGs apply to all clinical settings where members are seen with these disorders. CPGs should be used in conjunction with any level-of-care-specific performance standards as well as all other required CBH, NIAC, state, and federal regulations and standards.

CBH has updated two existing CPGs. The most recent version of all CPGs can be found in Section 7.2., “Clinical Guidelines,” of the [CBH Provider Manual](#).

Updated documents include:

1. Clinical Guidelines for Opioid Use Disorder (OUD)
2. Clinical Guidelines for the Prescribing and Monitoring of Benzodiazepines and Related Medications

*Please note that the Clinical Guidelines for Tapering Benzodiazepines have been subsumed into these guidelines and can be found in Appendix A.*

To ensure alignment and best practices, CBH recommends that providers review the updated CPGs and make any necessary updates or revisions to provider policies and procedures.

Adherence to the CPGs will be assessed through CBH monitoring and oversight, including Quality, Clinical, and Compliance Department protocols. Additionally, components may be reviewed as part of NIAC initial and recredentialing reviews. To assess quality of care and align with state and regulatory requirements, CBH will also be utilizing several specific metrics for each CPG, which are detailed in the table below.

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Clinical Guidelines	Quality Metrics
<p><i>Clinical Practice Guidelines for Opioid Use Disorder (OUD)</i></p>	<ol style="list-style-type: none"> <li>1. Naloxone Prescription: Percentage of members with OUD who have at least one pharmacy claim for naloxone in the last year</li> <li>2. MAT-OUD: Percentage of members with OUD who receive both MAT and counseling</li> <li>3. HEDIS® Follow Up After High-Intensity Care for Substance Use Disorder (FUI)</li> </ol>
<p><i>Clinical Guidelines for the Prescribing and Monitoring of Benzodiazepines and Related Medications</i></p>	<ol style="list-style-type: none"> <li>1. Average rate of benzodiazepine prescribing</li> <li>2. Rate of Benzodiazepine prescribing to members also receiving opioid prescriptions</li> <li>3. Rate of benzodiazepine prescribing to members receiving methadone</li> <li>4. Rate of benzodiazepine prescribing to members receiving buprenorphine</li> <li>5. Rate of Benzodiazepine prescribing to members with substance use disorder</li> </ol>

These requirements take effect **August 21, 2021**. Please direct any questions to [CBH.PharmacyInitiatives@phila.gov](mailto:CBH.PharmacyInitiatives@phila.gov).