Precertification of Neuropsychological Services

Official Position of the National Academy of Neuropsychology
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In the last quarter of the 20th Century, healthcare organizations emerged that came to be known generally as managed care organizations (MCOs). These organizations became administrators of benefit plans for many corporate employers in an effort to manage health care in a way that would lead to the provision of appropriate and efficient services at reduced cost. One means of cost control implemented by these organizations was the process of requiring a precertification review of diagnosis and proposed procedures by the MCO in order for the healthcare professional to receive payment for services rendered. Precertification of services such as non-emergency surgery, certain medical diagnostic tests, substance abuse treatment, inpatient psychiatric care, and psychological and neuropsychological testing became commonplace in the decade of the 1990s.

As long as the managed care system that requires precertification exists, the National Academy of Neuropsychology (NAN) encourages its members to work in a constructive and helpful manner to assist our patients in receiving necessary assessment and treatment within this system. Likewise, NAN recognizes the legitimacy of cost control and the reduction and elimination of non-essential healthcare services, although NAN also recognizes that denial of clinical neuropsychological services through inappropriate precertification procedures can have serious adverse effects on patient care.

MCOs engage a wide variety of personnel to review and evaluate the necessity for clinical neuropsychological services, including neuropsychological assessment, neurocognitive rehabilitation, and psychotherapy in individuals with central nervous system (CNS) compromise who are vulnerable to developing CNS dysfunction. Individuals who are employed by MCOs to make such judgments may or may not have training in clinical neuropsychology and, in many cases, are not licensed psychologists. With regard to precertification of clinical neuropsychological services, individuals making such judgments should ideally be licensed psychologists with specialty training in Clinical Neuropsychology, who meet the criteria established by NAN in their definition of a clinical neuropsychologist (National Academy of Neuropsychology, 2003). Judgments and decisions regarding the necessity of clinical neuropsychological assessment and intervention should be based upon neuropsychological specialty knowledge and expertise with regards to CNS compromised patients.

Making determinations about the necessity of clinical neuropsychological services, in many cases, requires specialty expertise that can only be provided by a psychologist with specialty training and knowledge in Clinical Neuropsychology. It is NAN’s position that MCOs should identify appropriately credentialed clinical neuropsychologists, or at the least, licensed clinical psychologists with specialty training in Clinical Neuropsychology
to assist with and consult on precertification reviews of such cases, to assure that the appropriate standard of care is being considered and maintained. In addition to assisting the MCOs in understanding and applying appropriate specialty knowledge in Clinical Neuropsychology in individual cases, NAN encourages neuropsychologists to work with patients to seek appropriate certification of necessary clinical neuropsychological services. Where possible, clinical neuropsychologists should provide appropriate documentation that will allow another clinical neuropsychologist or qualified clinical psychologist, who is reviewing the case file, to make a reasonable determination regarding appropriate services. Clinical neuropsychologists should work cooperatively with MCOs to assure appropriate patient care, but also are encouraged to work with patients to seek appropriate administrative remedies and appeals where necessary.

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**References**