

DEVELOPMENTAL TESTING LIMITED 96110

Provider:	Member ID:	
Review	Reviewer	
Date:	Name:	

1.	Does the purpose of the evaluation meet medical necessity criteria? (NOTE: If Question #1 scores a 1.5, then the purpose does not meet medical necessity but the documentation demonstrates medical necessity. If Question #1 scores 0, then all remaining questions score 0.)	3	1.5	0	
2.	Is it clearly documented that the member was present for the evaluation? (NOTE: If question #2 scores a 0, then all remaining questions score 0.)	1	0		
3.	Does the evaluation meet service definition (evaluation by a psychologist including psychological testing with interpretation and report)? (NOTE: If question #3 scores 0, then all remaining questions score 0.)	1	0		
4.	 Does the report contain the following: Date of the service Location of the service Time spent (start/stop times) Signature with appropriate credentials (NOTE: if there is no signature with appropriate credentials within 15 days of the start of the service, all remaining questions score 0.) 	3	1.5	0	
5.	Is there sufficient testing administered related to the presenting problem?	3	1.5	0	
6.	Were the administered tests/evaluations congruent to the purpose of the evaluation?	3	1.5	0	
7.	Does the report contain the results (scores and category) of the administered tests/evaluations?	3	1.5	0	
8.	Does the report contain the interpretation of the administered tests/evaluations?	3	1.5	0	
9.	Does the report contain the documentation of a mental status exam that contains the following: • Appearance	3	2	1	0

	Behavior				
	 Attitude 				
Level of Consciousness					
Orientation					
Speech					
	Mood & Affect				
 Thought Process/Form & Thought Content 					
	Suicidality & Homicidality				
	Insight & Judgment				
10.	Does the report contain the rendering of the member's	3	2	1	0
	diagnosis within the DSM or ICD methodology?				
11.	Was an analysis of testing interpretations incorporated in the	3	1.5	0	
	rationale for diagnosis?				
12.	Does the report contain recommendations consistent with the		1.5	0	
	findings of the administered tests/evaluations?				

Total Score = _____ [possible 32]

BEST PRACTICE QUESTIONS (do not factor into the scoring)

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Is the time claimed congruent to the	Does the documentation indicate that the
manufacturer's standard times? 1 - YES 0 -	results of the testing were reviewed with
NO	the consumer and/or family when
	appropriate? 1 - YES 0 - NO