

1.03 Heraya Philosophy of Care

Heraya provides access to members and enrollees to quality health care services through insured benefits and access plans. Regardless of the financial arrangement, Heraya and its providers adhere to a philosophy of care that is patient-centered and evidence-based. Heraya believes:

- Patients deserve care that is accessible, appropriate for their condition, considerate of their values and preferences and respectful of their autonomy, time, and resources.
- Providers must have the latitude to advocate for quality care for their patients and be able to provide that care without intrusion.
- Those who pay for the care deserve assurance that the resources they are paying for are used in ways consistent with contracted arrangements and expectations for appropriate care.

Access to Heraya providers is of primary importance to patients. Heraya policies set explicit targets for wait times, expectations for follow up of test results, missed appointments and referrals. Treatment plans and care recommendations are expected to adhere to community standards of practice and be consistent with best practices benchmarks established by Heraya clinicians, advisory groups, and Regional and Associate Medical Directors.

Under contracts for insured benefits Heraya providers have an obligation to provide “medically necessary” health care services to health plan members. Medical necessity implies that the care is appropriate for the condition, is being provided for that condition, is within the community standards of good care, and is for the benefit of the patient, not the caregiver. In practical terms, our philosophy of care can be summarized as:

“Treat and release.” Care is rendered to correct the presenting condition, bring it to maximum improvement, and lead to discharging the patient with appropriate instruction for follow-up, self-care, and prevention of future occurrences.

- The condition itself is one that is generally recognized throughout the health care community. While there may be discipline-specific clinical assessments (for example, subluxation or dysfunction in chiropractic or stagnation of blood and chi in acupuncture), these must also be characterized in diagnostic terms relevant and comprehensible to all clinicians.
- **“Maintenance” or “wellness” care is not a covered benefit in insured health plans.** While these modes of care are of value, they are not part of the insurance benefit that the payer is obligated to provide in most instances. Maintenance and wellness care are usually the financial responsibility of the patient. Maintenance care, wellness care and other non-covered services are featured in all-access plans (such as the Heraya CAMplus program).

These expectations and values are shared with each provider and held by all. We enable and encourage providers continuously to evaluate and enhance their own practices, philosophies, and goals.