

Memo

To: UCare Network Providers

From: UCare's Medical, Mental Health, and Substance Use Disorders Utilization Management

Department

Date: 12/18/2023

Re: Utilization Management Criteria

Utilization Management Criteria

UCare's Medical, Mental Health, and Substance Use Disorders Utilization Management Program is based on nationally recognized, evidence-based medical necessity guidelines developed by Change Healthcare. UCare uses the decision support tool, InterQual, which is provided electronically by Change Healthcare. InterQual is built on Medicare criteria and is reviewed annually by a panel of national experts, including physicians, surgeons, psychiatrists, physical therapists, and other health care professionals. Additionally, our vendor continuously monitors changes to NCDs, LCDs, and other national guidelines and requirements and provides quarterly releases of changes to the medical necessity criteria.

UCare staff are trained on an annual basis and as criteria change during the year. UCare's medical necessity criteria are applied based on member needs and a thorough assessment of specific medical services available within the local delivery system. UCare routinely evaluates the adequacy of our networks to ensure member access to all types of care, including primary care, specialists, hospitals, skilled & custodial nursing facilities, home care agencies, and other ancillary services. UCare works with members to arrange out-of-network care when needed care is unavailable within the local delivery system.

UCare applies a hierarchy of criteria when conducting medical necessity reviews. UCare makes available to physicians and all other health care professionals the medical necessity criteria used when making medical necessity determinations. Information regarding accessing these criteria is available on the UCare website, and requests are also taken via phone.

The utilization management criteria are presented annually to the Utilization Management Policy Review Committee and Quality Improvement Advisory & Credentialing Committee for adoption and approval. The Utilization Management Program is based on the following guidelines and criteria are applied in the rank order below:



UCare Medicare Plans (Medicare Advantage)

- 1. Change Healthcare InterQual Medical Necessity Criteria.
- 2. Written criteria developed and published by the Center for Medicare and Medicaid Services (CMS) may be used for medical necessity decisions.
 - a. Local coverage determinations (LCDs)
 - b. National coverage determination (NCDs)
- 3. Medicare Benefit Policy Manual Chapter 8, Coverage of Extended Care (SNF) Services Under Hospital Insurance.
- 4. UCare medical policy is applied when none of the above is appropriate to the coverage determination.

Minnesota Senior Health Options (MSHO) & Connect + Medicare

- 1. Change Healthcare InterQual Medical Necessity Criteria.
- 2. Written criteria developed and published by the Center for Medicare and Medicaid Services (CMS) may be used for medical necessity decisions.
 - a. Local coverage determinations (LCDs)
 - b. National coverage determination (NCDs)
- 3. Medicare Benefit Policy Manual Chapter 8, Coverage of Extended Care (SNF) Services Under Hospital Insurance.
- 4. When Medicare criteria are not met, or the service is not covered by Medicare, and a benefit is available under the State of Minnesota Department of Human Services (DHS) benefit set, then staff will apply DHS criteria as found in the Minnesota Health Care Plans (MCHP) provider manual, or American Society of Addiction Medicine (ASAM) Criteria, as applicable. UCare medical policy is applied when none of the above is appropriate to the coverage determination.

Prepaid Medical Assistance Program (PMAP), MinnesotaCare (MnCare), Minnesota Senior Care Plus, and Special Needs Basic Care (SNBC)

- 1. Change Healthcare InterQual Medical Necessity Criteria.
- 2. When InterQual criteria are not available, then staff will apply DHS criteria as found in the Minnesota Health Care Plans (MCHP) provider manual, or American Society of Addiction Medicine (ASAM) Criteria, as applicable.
 - UCare medical policy is applied when none of the above is appropriate to the coverage determination.

UCare Individual & Family Plans

1. Change Healthcare InterQual Medical Necessity Criteria. American Society of Addiction Medicine (ASAM) Criteria, as applicable for Substance Use Disorder services.

UCare medical policy is applied when none of the above is appropriate to the coverage determination.