

Clinical Utilization Management Guidelines

Attached is a list of the Clinical Utilization Management (UM) Guidelines Wellpoint has adopted.

The full list of *Medical Policies* and *Clinical UM Guidelines* are publicly available on the *Medical Policy and Clinical UM Guideline subsidiary website*. Their purpose is to help you provide quality care by reducing inappropriate use of medical resources.

InterQual® Criteria or MCG Care Guidelines are used for:

- Medical necessity review for medical and behavioral health inpatient review.
- Inpatient site of service appropriateness.
- Inpatient rehabilitation and skilled nursing facility review.
- Outpatient based service or procedure where there is not an established Medical Policy or Clinical UM Guideline.

In addition, American Society of Addiction Medicine® criteria is used for substance abuse services according to state requirements.

Medicaid state contracts, regulatory guidance, CMS requirements and our *Medical Policy/Clinical UM Guidelines* supersede MCG Care Guidelines and InterQual Criteria.

Note: We make determinations of medical necessity on a case-by-case basis in accordance with the definition of medical necessity that is contained within the Medicaid state contract, regulatory guidance, CMS requirements or in our *Medical Necessity Criteria Policy ADMIN.*0004.

If the request doesn't meet established criteria guidelines, it will be referred to a licensed physician reviewer with the appropriate clinical expertise to make a decision.