

# ParityManager™ Report

Maryland Department of Health

Medicaid - Merged Optum FFS Jai 9142020

August 31, 2022

3

Parity Flags

# Executive Summary

The table below displays a count of parity flags for each Standard.

	Parity Flag
Standard 4: Annual/Lifetime Dollar Limits	0
Standard 6: Financial Requirements	0
Standard 7: Quantitative Treatment Limitations (QTLs) Requirements	0
Standard 8: Identification of Nonquantitative Treatment Limitations (NQTLs)	3

The table below displays a list of Standards missing information and need additional input.

	Missing Information
Standard 4: Annual/Lifetime Dollar Limits	Yes
Standard 6: Financial Requirements	Yes
Standard 7: Quantitative Treatment Limitations (QTLs) Requirements	Yes
Standard 10: Comparative Analyses "In Operation"	Yes

The URAC ParityManager™ facilitates the processes that a modern parity compliance program needs to have but, as a document management and communications software solution, ParityManager™ does not in and of itself automatically result in parity compliant operations.

## Standard 4: Annual/Lifetime Dollar Limits

The number of flags per classification and limit type combination is shown.

	Parity Flag
Lifetime Dollar Limits	0
Annual Dollar Limits	0

If either section is considered incomplete, it is reported in the table below.

	Missing Information
Lifetime Dollar Limits	Y
Annual Dollar Limits	Y

## Standard 6: Financial Requirements

The number of flags per classification and limit type combination is shown.

	Parity Flag			
	Deductible	Copay	Coinsurance	Out-of-pocket maximum
Inpatient	0	0	0	0
Outpatient - Other	0	0	0	0
Outpatient - Office Based	0	0	0	0
Emergency Benefits	0	0	0	0
Prescription Drugs	0	0	0	0

Any classification/limit type combination considered incomplete is reported in the table below.

	Missing Information			
	Deductible	Copay	Coinsurance	Out-of-pocket maximum
Inpatient	Y	Y	Y	Y
Outpatient - Other	Y	Y	Y	Y
Outpatient - Office Based	Y	Y	Y	Y
Emergency Benefits	Y	Y	Y	Y
Prescription Drugs	Y	Y	Y	Y

# Standard 7: Quantitative Treatment Limitations (QTLs) Requirements

The number of flags per classification and limit type combination is shown.

Parity Flag			
	Day Limits	Hour Limits	Visit Limits
Inpatient	0	0	0
Outpatient - Other	0	0	0
Outpatient - Office Based	0	0	0
Emergency Benefits	0	0	0
Prescription Drugs	0	0	0

Any classification/limit type combination considered incomplete is reported in the table below.

Missing Information			
	Day Limits	Hour Limits	Visit Limits
Inpatient	Y	Y	Y
Outpatient - Other	Y	Y	Y
Outpatient - Office Based	Y	Y	Y
Emergency Benefits	Y	Y	Y
Prescription Drugs	Y	Y	Y

## Standard 8: Identification of Nonquantitative Treatment Limitations (NQTLs)

The number of flags per classification and category combination shown below.

	Parity Flag		
	Mental Health	Substance Use Disorder	Medical/Surgical
Inpatient	0	1	0
Outpatient - Other	1	1	0
Outpatient - Office Based	0	0	0
Emergency Benefits	0	0	0
Prescription Drugs	0	0	0

Any classification/category/NQTL combination considered incomplete is reported in the table below.

	Missing Information		
	Mental Health	Substance Use Disorder	Medical/Surgical
Inpatient	-	-	-
Outpatient - Other	-	-	-
Outpatient - Office Based	-	-	-
Emergency Benefits	-	-	-
Prescription Drugs	-	-	-

# Universal Application of NQTL

Classification: Inpatient  
NQTL: Fail first policies or step therapy protocols  
**PARITY FLAG**

Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

Factors

Medical/Surgical

Mental Health/Substance Use Disorder

- Not Applicable

Definitions

- **Not Applicable:** does not apply

Medical/Surgical

Mental Health/Substance Use Disorder

1. **Not Applicable**  
Evidentiary Standard  
Source

Operations Measures

Medical/Surgical

Mental Health/Substance Use Disorder

- NQTL does not apply to any services in this classification

References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx



# Classification: Inpatient NQTL: Outlier Management

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

## Factors

### Medical/Surgical

- Excessive utilization
- Fiscal Responsibility
- Safety risks

### Mental Health/Substance Use Disorder

- Excessive utilization
- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Not Applicable
- Service type
- Severity or chronicity of an illness
- Variability in quality

## Definitions

- **Excessive utilization:** Procedures for which we have identified possible over-utilization.
- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Not Applicable:** does not apply
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

### Medical/Surgical

1. **Excessive utilization**  
Evidentiary Standard  
Source
2. **Fiscal Responsibility**  
Evidentiary Standard  
Source
3. **Safety risks**  
Evidentiary Standard  
Source

### Mental Health/Substance Use Disorder

1. **Excessive utilization**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Not Applicable
  - Utilization is two standard deviations above average utilization per episode of care.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
  - Not Applicable
2. **High levels of variation in length of stay**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Not Applicable
  - Utilization is two standard deviations above average utilization per episode of care.Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 3. **Least restrictive appropriate level of care**

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 4. **Not Applicable**

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 5. **Service type**

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 6. **Severity or chronicity of an illness**

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 7. **Variability in quality**

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of

care such as ASAM criteria or APA treatment guidelines.

- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

## Operations Measures

### Medical/Surgical

- Degree of discretion exercised by utilization review staff
- Frequency that authorization requirements are waived
- Frequency with which reviews are conducted
- Number of days or visits authorized per review
- Utilization trends

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria
- Outlier Management Data

### References

- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020 - Sample.xlsx
- Sample monthly FWA report - Standard Template - MD.xlsx
- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- Auth Stats for June 2020.xlsx
- MDS3.0 NC\_Comp\_v1.0 Nov 2009.pdf
- NHT #213-Hosp#200-MDC#61-NF LOC.pdf
- CAP Overutilizersv3.pdf

# Classification: Inpatient NQLT: concurrent review

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

## Factors

### Medical/Surgical

- Appropriateness of utilization
- Excessive utilization
- Fiscal Responsibility
- Industry Standards
- Medical Necessity
- Not Applicable
- Patient Safety
- Service type

### Mental Health/Substance Use Disorder

- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Service type
- Severity or chronicity of an illness
- Variability in quality

## Definitions

- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

### Medical/Surgical

#### 1. Appropriateness of utilization

Evidentiary Standard  
Source

#### 2. Excessive utilization

Evidentiary Standard  
Source

#### 3. Fiscal Responsibility

Evidentiary Standard  
Source

#### 4. Industry Standards

Evidentiary Standard  
Source

#### 5. Medical Necessity

Evidentiary Standard  
Source

#### 6. Not Applicable

Evidentiary Standard  
Source

#### 7. Patient Safety

Evidentiary Standard  
Source

#### 8. Service type

Evidentiary Standard  
Source

### Mental Health/Substance Use Disorder

#### 1. High levels of variation in length of stay

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQLT to benefits

#### 2. Least restrictive appropriate level of care

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQLT to benefits

#### 3. Service type

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 4. Severity or chronicity of an illness

##### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

##### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 5. Variability in quality

##### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

##### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

## Operations Measures

### Medical/Surgical

- Degree of discretion exercised by utilization review staff
- Frequency that authorization requirements are waived
- Frequency with which reviews are conducted
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Number of days or visits authorized per review
- Utilization trends

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020.xlsx
- NHT #213-Hosp#200-MDC#61-NF LOC.pdf
- 3871B form rev 01132016.pdf
- Inter-rater Reliability Study 2019.pdf
- 2019 Physician Inter-Rater Reliability Audit.pdf

# Classification: Inpatient NQTL: data collection

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

## Factors

- |   |   |
|---|---|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> |
|---|---|

## Definitions

- **Not Applicable:** does not apply

Medical/Surgical

1. **Not Applicable**  
Evidentiary Standard  
Source

Mental Health/Substance Use Disorder

1. **Not Applicable**  
Evidentiary Standard  
Source

## Operations Measures

- |   |  |
|---|--|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li><li>• NQTL does not apply to any services in this classification</li></ul> |
|---|--|

### References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx
- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

# Classification: Inpatient NQLT: medical necessity

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

## Factors

### Medical/Surgical

- Appropriateness of utilization
- Excessive utilization
- Fiscal Responsibility
- Industry Standards
- Service type

### Mental Health/Substance Use Disorder

- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Service type
- Severity or chronicity of an illness
- Variability in quality

## Definitions

- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

### Medical/Surgical

#### 1. **Appropriateness of utilization**

Evidentiary Standard

Source

#### 2. **Excessive utilization**

Evidentiary Standard

Source

#### 3. **Fiscal Responsibility**

Evidentiary Standard

Source

#### 4. **Industry Standards**

Evidentiary Standard

Source

#### 5. **Service type**

Evidentiary Standard

Source

### Mental Health/Substance Use Disorder

#### 1. **High levels of variation in length of stay**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQLT to benefits
- Medical expert reviews

#### 2. **Least restrictive appropriate level of care**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQLT to benefits
- Medical expert reviews

#### 3. **Service type**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

#### 4. Severity or chronicity of an illness

##### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

##### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

#### 5. Variability in quality

##### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

##### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

## Operations Measures

### Medical/Surgical

- Degree of discretion exercised by utilization review staff
- Frequency that authorization requirements are waived
- Frequency with which reviews are conducted
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Number of days or visits authorized per review
- Utilization trends

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- Auth Stats for June 2020.xlsx
- 3871B form rev 01132016.pdf
- NHT #213-Hosp#200-MDC#61-NF LOC.pdf
- Inter-rater Reliability Study 2019.pdf
- Appeals Timeliness Report.pdf



# Classification: Inpatient

## NQTL: prior authorization/pre authorization

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Claim types with high percentage of fraud
- Excessive utilization
- Fiscal Responsibility
- Industry Standards
- Medicare/Medicaid program participation eligibility
- Not Applicable
- Patient Safety
- Service type

#### Mental Health/Substance Use Disorder

- Least restrictive appropriate level of care
- Severity or chronicity of an illness

### Definitions

- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness

#### Medical/Surgical

1. **Claim types with high percentage of fraud**  
Evidentiary Standard  
Source
2. **Excessive utilization**  
Evidentiary Standard  
Source
3. **Fiscal Responsibility**  
Evidentiary Standard  
Source
4. **Industry Standards**  
Evidentiary Standard  
Source
5. **Medicare/Medicaid program participation eligibility**  
Evidentiary Standard  
Source
6. **Not Applicable**  
Evidentiary Standard  
Source
7. **Patient Safety**  
Evidentiary Standard  
Source
8. **Service type**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **Least restrictive appropriate level of care**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
2. **Severity or chronicity of an illness**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

## Operations Measures

### Medical/Surgical

- Degree of discretion exercised by utilization review staff
- Frequency that authorization requirements are waived
- Frequency with which reviews are conducted
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Number of days or visits authorized per review
- Utilization trends

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- Auth Stats for June 2020.xlsx
- NHT #213-Hosp#200-MDC#61-NF LOC.pdf
- 3871B form rev 01132016.pdf
- Inter-rater Reliability Study 2019.pdf
- PCP follow up 1st qtr 2020-Barb.pdf

# Classification: Outpatient - Other

## NQTL: Outlier Management

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Excessive utilization
- Fiscal Responsibility
- Industry Standards
- Not Applicable
- Safety risks
- Service type

#### Mental Health/Substance Use Disorder

- Excessive utilization
- High variability in cost per episode of care
- Least restrictive appropriate level of care
- Service type
- Severity or chronicity of an illness
- Variability in quality

### Definitions

- **Excessive utilization:** Procedures for which we have identified possible over-utilization.
- **High variability in cost per episode of care:** High cost of care relative to similar therapies. This is the cost relative to cost of care with similar drugs used for the same diagnosis and condition based on scientific evidence, standards of practice, and relevant findings of government agencies, medical associations, national commissions, peer-reviewed journals, and authoritative compendia.
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

#### Medical/Surgical

1. **Excessive utilization**  
Evidentiary Standard  
Source
2. **Fiscal Responsibility**  
Evidentiary Standard  
Source
3. **Industry Standards**  
Evidentiary Standard  
Source
4. **Not Applicable**  
Evidentiary Standard  
Source
5. **Safety risks**  
Evidentiary Standard  
Source
6. **Service type**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **Excessive utilization**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Utilization is two standard deviations above average utilization per episode of care.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
2. **High variability in cost per episode of care**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Utilization is two standard deviations above average utilization per episode of care.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
3. **Least restrictive appropriate level of care**

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

### 4. Service type

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

### 5. Severity or chronicity of an illness

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

### 6. Variability in quality

#### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Utilization is two standard deviations above average utilization per episode of care.

#### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

## Operations Measures

#### Medical/Surgical

- Frequency with which reviews are conducted
- Utilization trends

#### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria
- Outlier Management Data

#### References

- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020 - Sample.xlsx
- 1.Sample monthly FWA report - Standard Template - MD.xlsx

- Auth Stats for June 2020.xlsx
- PACE Quality Measure Testing\_HPMS Memo\_4 21 15.pdf
- CAP Overutilizersv3.pdf

# Classification: Outpatient - Other

## NQTL: Service Limitations

### PARITY FLAG

#### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

#### Factors

##### Medical/Surgical

##### Mental Health/Substance Use Disorder

- Not Applicable
- Service type

#### Definitions

- **Not Applicable:** does not apply
- **Service type:** Type of service being requested.

##### Medical/Surgical

##### Mental Health/Substance Use Disorder

#### 1. Not Applicable

##### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable

##### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

#### 2. Service type

##### Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable

##### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

#### Operations Measures

##### Medical/Surgical

##### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers

- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria
- NQTL does not apply to any services in this classification

#### References

- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020.xlsx
- DO NOT APPLY NQTLS to OP -Other SUD v2.0.docx

# Classification: Outpatient - Other NQTL: concurrent review

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

## Factors

### Medical/Surgical

- Appropriateness of utilization
- Excessive utilization
- Fiscal Responsibility
- Health plan accreditation standards for quality assurance
- Medical Necessity
- Medicare/Medicaid program participation eligibility
- Not Applicable
- Patient Safety
- Quality and performance measures (including customer feedback)
- Safety risks
- Separate payments for managing a patient's care outside of face-to-face contact (e.g., care management)
- Service type

### Mental Health/Substance Use Disorder

- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Not Applicable
- Service type
- Severity or chronicity of an illness
- clinical indications or evidence

## Definitions

- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Not Applicable:** does not apply
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **clinical indications or evidence:** Professional standards and protocols - defined as comparative effectiveness studies and clinical trials

### Medical/Surgical

1. **Appropriateness of utilization**  
Evidentiary Standard  
Source
2. **Excessive utilization**  
Evidentiary Standard  
Source
3. **Fiscal Responsibility**  
Evidentiary Standard  
Source
4. **Health plan accreditation standards for quality assurance**  
Evidentiary Standard  
Source
5. **Medical Necessity**  
Evidentiary Standard  
Source
6. **Medicare/Medicaid program participation eligibility**  
Evidentiary Standard  
Source

### Mental Health/Substance Use Disorder

1. **High levels of variation in length of stay**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
2. **Least restrictive appropriate level of care**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits



- 7. **Not Applicable**  
Evidentiary Standard  
Source
- 8. **Patient Safety**  
Evidentiary Standard  
Source
- 9. **Quality and performance measures (including customer feedback)**  
Evidentiary Standard  
Source
- 10. **Safety risks**  
Evidentiary Standard  
Source
- 11. **Separate payments for managing a patient's care outside of face-to-face contact (e.g., care management)**  
Evidentiary Standard  
Source
- 12. **Service type**  
Evidentiary Standard  
Source

- 3. **Not Applicable**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
 Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- 4. **Service type**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
 Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- 5. **Severity or chronicity of an illness**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
 Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- 6. **Clinical indications or evidence**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
 Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

## Operations Measures

### Medical/Surgical

- Degree of discretion exercised by utilization review staff
- Frequency with which reviews are conducted
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Utilization trends
- evaluation of annual concurrent reviews and prior authorization reviews completed on a quarterly basis

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020.xlsx
- HH Cert and Plan of Care 485 Form example.pdf
- DME - DMS Audiology Review Procedures (8.04.2020).docx
- Inter-rater Reliability Study 2019.pdf
- 2.3rd Qtr 2005 - 2019.pdf
- POS Evaluation\_08JUL20.xlsx

# Classification: Outpatient - Other

## NQTL: data collection

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

### Factors

- |   |   |
|---|---|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> |
|---|---|

### Definitions

- **Not Applicable:** does not apply

- |   |  |
|---|--|
| <p><u>Medical/Surgical</u></p> <p>1. <b>Not Applicable</b></p> <p>Evidentiary Standard</p> <p>Source</p> <ul style="list-style-type: none"><li>◦ Not Applicable</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <p>1. <b>Not Applicable</b></p> <p>Evidentiary Standard</p> <p>Source</p> |
|---|--|



### Operations Measures

- |   |   |
|---|---|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li></ul> |
|---|---|

#### References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx
- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

# Classification: Outpatient - Other

## NQTL: fail first requirements/step therapy

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

### Factors

#### Medical/Surgical

- Appropriateness of utilization
- Fiscal Responsibility
- Industry Standards
- Medical Necessity

#### Mental Health/Substance Use Disorder

- Not Applicable

### Definitions

- **Not Applicable:** does not apply

#### Medical/Surgical

##### 1. **Appropriateness of utilization**

Evidentiary Standard  
Source

##### 2. **Fiscal Responsibility**

Evidentiary Standard  
Source

##### 3. **Industry Standards**

Evidentiary Standard  
Source

##### 4. **Medical Necessity**

Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

##### 1. **Not Applicable**

Evidentiary Standard  
Source

### Operations Measures

#### Medical/Surgical

- Degree of discretion exercised by utilization review staff

#### Mental Health/Substance Use Disorder

- NQTL does not apply to any services in this classification

#### References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx
- DME - DMS Audiology Review Procedures (8.04.2020).docx

# Classification: Outpatient - Other

## NQTL: medical necessity

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

### Factors

#### Medical/Surgical

- Appropriateness of utilization
- Excessive utilization
- High variability in cost per episode of care
- Industry Standards
- Lack of clinical efficiency of treatment or service
- Medical Necessity
- Relative reimbursement rates
- Service type

#### Mental Health/Substance Use Disorder

- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Least restrictive appropriate level of care
- Service type
- Severity or chronicity of an illness
- Variability in quality

### Definitions

- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** lowest level of care the individual can be safely and effectively treated.
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

#### Medical/Surgical

1. **Appropriateness of utilization**  
Evidentiary Standard  
Source
2. **Excessive utilization**  
Evidentiary Standard  
Source
3. **High variability in cost per episode of care**  
Evidentiary Standard  
Source
4. **Industry Standards**  
Evidentiary Standard  
Source
5. **Lack of clinical efficiency of treatment or service**  
Evidentiary Standard  
Source
6. **Medical Necessity**  
Evidentiary Standard  
Source
7. **Relative reimbursement rates**  
Evidentiary Standard  
Source
8. **Service type**  
Evidentiary Standard

#### Mental Health/Substance Use Disorder

1. **High levels of variation in length of stay**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
2. **Least restrictive appropriate level of care**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
3. **Least restrictive appropriate level of care**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 4. Service type

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 5. Severity or chronicity of an illness

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 6. Variability in quality

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

## Operations Measures

### Medical/Surgical

- Degree of discretion exercised by utilization review staff
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria
- Utilization trends
- tracking of denial of plans of service that do not meet medical necessity

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- NHT #213-Hosp#200-MDC#61-NF LOC.pdf
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- Auth Stats for June 2020.xlsx
- Inter-rater Reliability Study 2019.pdf

# Classification: Outpatient - Other

## NQTL: prior authorization/pre authorization

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Elasticity of demand
- Excessive utilization
- Fiscal Responsibility
- Industry Standards
- Medicare/Medicaid program participation eligibility
- Not Applicable
- Patient Safety

#### Mental Health/Substance Use Disorder

- Not Applicable
- Service type
- Severity or chronicity of an illness

### Definitions

- **Not Applicable:** does not apply
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness

#### Medical/Surgical

1. **Elasticity of demand**  
Evidentiary Standard  
Source
2. **Excessive utilization**  
Evidentiary Standard  
Source
3. **Fiscal Responsibility**  
Evidentiary Standard  
Source
4. **Industry Standards**  
Evidentiary Standard  
Source
5. **Medicare/Medicaid program participation eligibility**  
Evidentiary Standard  
Source
6. **Not Applicable**  
Evidentiary Standard  
Source
7. **Patient Safety**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **Not Applicable**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
  - Not Applicable
2. **Service type**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
  - Not Applicable
3. **Severity or chronicity of an illness**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

## Operations Measures

### Medical/Surgical

- Degree of discretion exercised by utilization review staff
- Frequency with which reviews are conducted
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Number of days or visits authorized per review
- Utilization trends
- evaluation of annual concurrent reviews and prior authorization reviews completed on a quarterly basis

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- NHT #213-Hosp#200-MDC#61-NF LOC.pdf
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020.xlsx

# Classification: Outpatient - Office Based

## NQTL: Outlier Management

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Excessive utilization
- Fiscal Responsibility
- High variability in cost per episode of care
- Industry Standards
- Not Applicable
- Relative reimbursement rates
- Service type

#### Mental Health/Substance Use Disorder

- Excessive utilization
- High levels of variation in length of stay
- High variability in cost per episode of care
- Least restrictive appropriate level of care
- Not Applicable
- Service type
- Severity or chronicity of an illness
- Variability in quality

### Definitions

- **Excessive utilization:** Procedures for which we have identified possible over-utilization.
- **High levels of variation in length of stay:** this is an error and should not be listed
- **High variability in cost per episode of care:** High cost of care relative to similar therapies. This is the cost relative to cost of care with similar drugs used for the same diagnosis and condition based on scientific evidence, standards of practice, and relevant findings of government agencies, medical associations, national commissions, peer-reviewed journals, and authoritative compendia.
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Not Applicable:** does not apply
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

#### Medical/Surgical

1. **Excessive utilization**  
Evidentiary Standard  
Source
2. **Fiscal Responsibility**  
Evidentiary Standard  
Source
3. **High variability in cost per episode of care**  
Evidentiary Standard  
Source
4. **Industry Standards**  
Evidentiary Standard  
Source
5. **Not Applicable**  
Evidentiary Standard  
Source
6. **Relative reimbursement rates**  
Evidentiary Standard  
Source
7. **Service type**

#### Mental Health/Substance Use Disorder

1. **Excessive utilization**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Not Applicable
  - Utilization is two standard deviations above average utilization per episode of care.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
  - Not Applicable
2. **High levels of variation in length of stay**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Not Applicable



- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 3. High variability in cost per episode of care

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 4. Least restrictive appropriate level of care

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 5. Not Applicable

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 6. Service type

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

### 7. Severity or chronicity of an illness

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

8. Variability in quality

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable
- Utilization is two standard deviations above average utilization per episode of care.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

## Operations Measures

Medical/Surgical

- Frequency with which reviews are conducted
- Utilization trends
- audits tracker (monthly)
- duplicate records (monthly)
- provider financial analysis (monthly)

Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria
- Outlier Management Data

References

- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- 1.Sample monthly FWA report - Standard Template - MD.xlsx
- Auth Stats for June 2020.xlsx
- PACE Quality Measure Testing\_HPMS Memo\_4 21 15.pdf
- CAP Overutilizersv3.pdf

# Classification: Outpatient - Office Based

## NQTL: Service Limitations

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

- |   |   |
|---|---|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• Service type</li></ul> |
|---|---|

### Definitions

- **Service type:** Type of service being requested.

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|--|
| <p><u>Medical/Surgical</u></p> <p>1. <b>Not Applicable</b><br/>Evidentiary Standard<br/>Source</p> |
|--|

- |  |
|--|
| <p><u>Mental Health/Substance Use Disorder</u></p> <p>1. <b>Service type</b><br/>Evidentiary Standard</p> <ul style="list-style-type: none"><li>◦ Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.</li></ul> <p>Source</p> <ul style="list-style-type: none"><li>◦ Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits</li></ul> |
|--|

### Operations Measures

- |   |  |
|---|--|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• Authorization Denial Rates for MH/SUD</li><li>• Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers</li><li>• Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria</li></ul> |
|---|--|

#### References

- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- Auth Stats for June 2020.xlsx
- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

# Classification: Outpatient - Office Based

## NQTL: concurrent review

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Appropriateness of utilization
- Fiscal Responsibility
- Medical Necessity
- Patient Safety

#### Mental Health/Substance Use Disorder

- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Least restrictive appropriate level of care
- Service type
- Severity or chronicity of an illness
- Variability in quality
- clinical indications or evidence

### Definitions

- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Least restrictive appropriate level of care:** lowest level of care the individual can be safely and effectively treated.
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.
- **clinical indications or evidence:** Professional standards and protocols - defined as comparative effectiveness studies and clinical trials

#### Medical/Surgical

##### 1. Appropriateness of utilization

Evidentiary Standard  
Source

##### 2. Fiscal Responsibility

Evidentiary Standard  
Source

##### 3. Medical Necessity

Evidentiary Standard  
Source

##### 4. Patient Safety

Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

##### 1. High levels of variation in length of stay

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

##### 2. Least restrictive appropriate level of care

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

##### 3. Least restrictive appropriate level of care

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 4. Service type

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 5. Severity or chronicity of an illness

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 6. Variability in quality

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 7. Clinical indications or evidence

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

## Operations Measures

### Medical/Surgical

- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Utilization trends

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020.xlsx
- Inter-rater Reliability Study 2019.pdf
- 3rd Qtr 2005 - 2019.pdf

# Classification: Outpatient - Office Based

## NQTL: data collection

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

### Factors

- |   |   |
|---|---|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> |
|---|---|

### Definitions

- **Not Applicable:** does not apply

Medical/Surgical

1. **Not Applicable**  
Evidentiary Standard  
Source

Mental Health/Substance Use Disorder

1. **Not Applicable**  
Evidentiary Standard  
Source

### Operations Measures

- |   |  |
|---|--|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li><li>• NQTL does not apply to any services in this classification</li></ul> |
|---|--|

#### References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx
- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

# Classification: Outpatient - Office Based NQTL: fail first requirements/step therapy

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

## Factors

- |   |   |
|---|---|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• Not Applicable</li></ul> |
|---|---|

## Definitions

- **Not Applicable:** does not apply

- |  |
|--|
| <p><u>Medical/Surgical</u></p> <p>1. <b>Not Applicable</b><br/>Evidentiary Standard<br/>Source</p> |
|--|

- |  |
|--|
| <p><u>Mental Health/Substance Use Disorder</u></p> <p>1. <b>Not Applicable</b><br/>Evidentiary Standard<br/>Source<ul style="list-style-type: none"><li>◦ Not Applicable</li></ul></p> |
|--|

## Operations Measures

- |  |  |
|--|--|
| <p><u>Medical/Surgical</u></p> <ul style="list-style-type: none"><li>• Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers</li><li>• Utilization trends</li></ul> | <p><u>Mental Health/Substance Use Disorder</u></p> <ul style="list-style-type: none"><li>• NQTL does not apply to any services in this classification</li><li>• NQTL does not apply to any services in this classification</li></ul> |
|--|--|

### References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx
- Inter-rater Reliability Study 2019.pdf
- 3rd Qtr 2005 - 2019.pdf

# Classification: Outpatient - Office Based

## NQTL: medical necessity

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Appropriateness of utilization
- Excessive utilization
- High variability in cost per episode of care
- Industry Standards
- Lack of adherence to quality standards
- Lack of clinical efficiency of treatment or service
- Medical Necessity
- Relative reimbursement rates
- Service type

#### Mental Health/Substance Use Disorder

- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Service type
- Severity or chronicity of an illness
- Variability in quality

### Definitions

- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** Lowest level of care the individual can be safely and effectively treated.
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

#### Medical/Surgical

- 1. Appropriateness of utilization**  
Evidentiary Standard  
Source
- 2. Excessive utilization**  
Evidentiary Standard  
Source
- 3. High variability in cost per episode of care**  
Evidentiary Standard  
Source
- 4. Industry Standards**  
Evidentiary Standard  
Source
- 5. Lack of adherence to quality standards**  
Evidentiary Standard  
Source
- 6. Lack of clinical efficiency of treatment or service**  
Evidentiary Standard  
Source
- 7. Medical Necessity**  
Evidentiary Standard  
Source
- 8. Relative reimbursement rates**  
Evidentiary Standard

#### Mental Health/Substance Use Disorder

- 1. High levels of variation in length of stay**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- 2. Least restrictive appropriate level of care**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.Source
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- 3. Service type**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.



Source

#### 9. Service type

Evidentiary Standard

Source

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 4. Severity or chronicity of an illness

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

#### 5. Variability in quality

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

## Operations Measures

### Medical/Surgical

- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Utilization trends
- duplicate restorations (quarterly)

### Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

### References

- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf
- Auth Stats for June 2020.xlsx
- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Inter-rater Reliability Study 2019.pdf
- Copy of TopPayee - 2020-07-31.pdf
- PCP follow up 1st qtr 2020-Barb.pdf

# Classification: Outpatient - Office Based

## NQTL: prior authorization/pre authorization

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Claim types with high percentage of fraud
- Excessive utilization
- Fiscal Responsibility
- High variability in cost per episode of care
- Industry Standards
- Medical Necessity
- Not Applicable
- Patient Safety
- Relative reimbursement rates
- Service type

#### Mental Health/Substance Use Disorder

- High levels of variation in length of stay
- Least restrictive appropriate level of care
- Not Applicable
- Service type
- Severity or chronicity of an illness
- Variability in quality

### Definitions

- **High levels of variation in length of stay:** this is an error and should not be listed
- **Least restrictive appropriate level of care:** lowest level of care the individual can be safely and effectively treated.
- **Not Applicable:** does not apply
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Variability in quality:** Drugs must be marketed as safe and therapeutically active formulations whose performance is consistent and predictable.

#### Medical/Surgical

1. **Claim types with high percentage of fraud**  
Evidentiary Standard  
Source
2. **Excessive utilization**  
Evidentiary Standard  
Source
3. **Fiscal Responsibility**  
Evidentiary Standard  
Source
4. **High variability in cost per episode of care**  
Evidentiary Standard  
Source
5. **Industry Standards**  
Evidentiary Standard  
Source
6. **Medical Necessity**  
Evidentiary Standard  
Source
7. **Not Applicable**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **High levels of variation in length of stay**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Not ApplicableSource
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
  - Not Applicable
2. **Least restrictive appropriate level of care**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - Not ApplicableSource
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

**8. Patient Safety**

Evidentiary Standard

Source

**9. Relative reimbursement rates**

Evidentiary Standard

Source

**10. Service type**

Evidentiary Standard

Source

- Not Applicable

**3. Not Applicable**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

**4. Service type**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

**5. Severity or chronicity of an illness**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

**6. Variability in quality**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- Not Applicable

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Not Applicable

## Operations Measures

Medical/Surgical

- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Utilization trends
- services preauthorized not received (monthly)

Mental Health/Substance Use Disorder

- Authorization Denial Rates for MH/SUD
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

References

- ATTACHMENT M Contract - ASO PBHS 20-18319 (1).pdf
- Auth Stats for June 2020.xlsx
- MDH ASO RFP OPASS 20-18319 11.29.18 (7).pdf



# Classification: Emergency Benefits NQL: Outlier Management

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

## Factors

### Medical/Surgical

- Fiscal Responsibility
- Industry Standards

### Mental Health/Substance Use Disorder

- Not Applicable

## Definitions

- **Not Applicable:** does not apply

### Medical/Surgical

1. **Fiscal Responsibility**  
Evidentiary Standard  
Source
2. **Industry Standards**  
Evidentiary Standard  
Source

### Mental Health/Substance Use Disorder

1. **Not Applicable**  
Evidentiary Standard  
Source

## Operations Measures

### Medical/Surgical

- Utilization trends

### Mental Health/Substance Use Disorder

- NQL does not apply to any services in this classification

### References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx
- Copy of Copy of High ER Utilizers 4th Q 2019.xlsx

# Classification: Emergency Benefits NQLT: medical necessity

## Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

## Factors

### Medical/Surgical

- Claim types with high percentage of fraud
- Fiscal Responsibility
- Industry Standards
- Medical Necessity
- Patient Safety

### Mental Health/Substance Use Disorder

- Not Applicable

## Definitions

- **Not Applicable:** does not apply

### Medical/Surgical

1. **Claim types with high percentage of fraud**  
Evidentiary Standard  
Source
2. **Fiscal Responsibility**  
Evidentiary Standard  
Source
3. **Industry Standards**  
Evidentiary Standard  
Source
4. **Medical Necessity**  
Evidentiary Standard  
Source
5. **Patient Safety**  
Evidentiary Standard  
Source

### Mental Health/Substance Use Disorder

1. **Not Applicable**  
Evidentiary Standard  
Source

## Operations Measures

### Medical/Surgical

- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Utilization trends

### Mental Health/Substance Use Disorder

- NQLT does not apply to any services in this classification

### References

- Optum Benefits Mapping\_MDH Revisions\_7.17.20.xlsx
- Inter-rater Reliability Study 2019.pdf
- 2019 Physician Inter-Rater Reliability Audit.pdf
- Copy of Copy of High ER Utilizers 4th Q 2019.xlsx

# Classification: Prescription Drugs

## NQTL: Outlier Management

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Fiscal Responsibility
- Industry Standards

#### Mental Health/Substance Use Disorder

- Not Applicable

### Definitions

- **Not Applicable:** does not apply

#### Medical/Surgical

1. **Fiscal Responsibility**  
Evidentiary Standard  
Source
2. **Industry Standards**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **Not Applicable**  
Evidentiary Standard
  - Not ApplicableSource
  - Not Applicable

### Operations Measures

#### Medical/Surgical

- Utilization trends

#### Mental Health/Substance Use Disorder

- NQTL does not apply to any services in this classification

#### References

- We DO NOT apply any NQTLs to the Emergency and Pharmacy Benefits.docx
- CAP underut hedis 5.20.pdf

# Classification: Prescription Drugs

## NQTL: fail first requirements/step therapy

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Appropriateness of utilization
- Fiscal Responsibility
- Industry Standards
- Medical Necessity
- Not Applicable
- Patient Safety

#### Mental Health/Substance Use Disorder

- Internal auditing for treatment compliance via concurrent review of treatment plans and medical documentation
- Lack of clinical efficiency of treatment or service
- Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee
- Not Applicable
- Safety risks
- Service type
- Severity or chronicity of an illness
- Site visit requirements
- fail first protocol

### Definitions

- **Internal auditing for treatment compliance via concurrent review of treatment plans and medical documentation:** Process review activities to review a participant's course and efficacy of treatment to determine the approval or renewal of a prior authorization for their drug.
- **Lack of clinical efficiency of treatment or service:** treatment that is not based on evidenced based clinical criteria such as InterQual guidelines.
- **Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee:** A drug's classification within the Preferred Drug List (PDL), which is a list of the Department's Preferred and Non- Preferred drugs developed by the Department's Preferred Drug Program via recommendations made by the Pharmacy & Therapeutics (P&T) Committee
- **Not Applicable:** does not apply
- **Safety risks:** Safety consistent with FDA approved labeling, including black box warnings. Potential for abuse or diversion, significant potential for inappropriate use or narrow safety margin. Lack of compelling evidence.
- **Service type:** Type of service being requested.
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **Site visit requirements:** If the Applicant is not accredited by an agency recognized by the Credentialing Entity in, a site visit of the organization is required and results must be found to be satisfactory with a passing score of 85% or higher.
- **fail first protocol:** fail first protocol

#### Medical/Surgical

1. **Appropriateness of utilization**  
Evidentiary Standard  
Source
2. **Fiscal Responsibility**  
Evidentiary Standard  
Source
3. **Industry Standards**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **Internal auditing for treatment compliance via concurrent review of treatment plans and medical documentation**  
Evidentiary Standard
  - A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.



#### 4. Medical Necessity

Evidentiary Standard

Source

#### 5. Not Applicable

Evidentiary Standard

Source

#### 6. Patient Safety

Evidentiary Standard

Source

- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

#### 2. Lack of clinical efficiency of treatment or service

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

#### 3. Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

#### 4. Not Applicable

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

**5. Safety risks**

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

**6. Service type**

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable

- State and Federal requirements

## 7. Severity or chronicity of an illness

### Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

## 8. Site visit requirements

### Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

## 9. fail first protocol

### Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Not Applicable
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

### Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits

- Internal claims analysis
- Medical expert reviews
- Not Applicable
- State and Federal requirements

## Operations Measures

### Medical/Surgical

- Clinical Criteria applied based on FDA labeling and requirements and Official
- Compendium Internal monitoring of prior authorizations to determine compliance of treatment/service plans for drug efficacy based on concurrent review of treatment plans, service usage, and drug utilization
- Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews
- Utilization trends

### Mental Health/Substance Use Disorder

- Clinical Criteria applied based on FDA labeling and requirements and Official
- Compendium Internal monitoring of prior authorizations to determine compliance of treatment/service plans for drug efficacy based on concurrent review of treatment plans, service usage, and drug utilization
- Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews
- Utilization trends

### References

- 01b - JAI PT Minutes 03.31.20 Draft.pdf

# Classification: Prescription Drugs

## NQTL: medical necessity

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_9.10.20.pdf

### Factors

#### Medical/Surgical

- Appropriateness of utilization
- Fiscal Responsibility
- Industry Standards
- Medical Necessity
- Patient Safety

#### Mental Health/Substance Use Disorder

- Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee
- clinical appropriateness/medical necessity
- fiscal responsibility/cost effectiveness

### Definitions

- **Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee:** A drug's classification within the Preferred Drug List (PDL), which is a list of the Department's Preferred and Non- Preferred drugs developed by the Department's Preferred Drug Program via recommendations made by the Pharmacy & Therapeutics (P&T) Committee
- **clinical appropriateness/medical necessity:** Identified measures in place to determine the most appropriate treatment option for participants based on the participant's medical status, the placement of the treatment option on the PDL, and the treatment option's clinical criteria.
- **fiscal responsibility/cost effectiveness:** Examination of a drug's actual cost and rebateable status for the State with an emphasis on cost conservation and reduction of waste for the Department while still maintaining the accessibility of care to participants

#### Medical/Surgical

##### 1. Appropriateness of utilization

Evidentiary Standard  
Source

##### 2. Fiscal Responsibility

Evidentiary Standard  
Source

##### 3. Industry Standards

Evidentiary Standard  
Source

##### 4. Medical Necessity

Evidentiary Standard  
Source

##### 5. Patient Safety

Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

##### 1. Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews

##### 2. clinical appropriateness/medical necessity

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of

care such as ASAM criteria or APA treatment guidelines.

- FDA Prescribing Information & Official Compendium

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews

### 3. **fiscal responsibility/cost effectiveness**

Evidentiary Standard

- A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews

## Operations Measures

### Medical/Surgical

- Clinical Criteria applied based on FDA labeling and requirements and Official
- Compendium Internal monitoring of prior authorizations to determine compliance of treatment/service plans for drug efficacy based on concurrent review of treatment plans, service usage, and drug utilization
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews
- Utilization trends

### Mental Health/Substance Use Disorder

- Clinical Criteria applied based on FDA labeling and requirements and Official
- Compendium Internal monitoring of prior authorizations to determine compliance of treatment/service plans for drug efficacy based on concurrent review of treatment plans, service usage, and drug utilization
- Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews
- Utilization trends

### References

- Tier 2 and NPD Clinical Criteria.pdf
- Inter-rater Reliability Study 2019.pdf
- 05Antihyperlipidemics - Fenofibrates Q4 2019 example trend report.pdf

# Classification: Prescription Drugs

## NQTL: prior authorization/pre authorization

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Claim types with high percentage of fraud
- Fiscal Responsibility
- Industry Standards
- Medical Necessity
- Not Applicable
- Patient Safety

#### Mental Health/Substance Use Disorder

- Lack of clinical efficiency of treatment or service
- Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee
- Not Applicable
- Severity or chronicity of an illness
- clinical appropriateness/medical necessity
- fail first protocol

### Definitions

- **Lack of clinical efficiency of treatment or service:** treatment that is not based on evidenced based clinical criteria such as InterQual guidelines.
- **Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee:** A drug's classification within the Preferred Drug List (PDL), which is a list of the Department's Preferred and Non- Preferred drugs developed by the Department's Preferred Drug Program via recommendations made by the Pharmacy & Therapeutics (P&T) Committee
- **Not Applicable:** does not apply
- **Severity or chronicity of an illness:** Does the medication match the severity and chronicity of the illness
- **clinical appropriateness/medical necessity:** Identified measures in place to determine the most appropriate treatment option for participants based on the participant's medical status, the placement of the treatment option on the PDL, and the treatment option's clinical criteria.
- **fail first protocol:** fail first protocol

#### Medical/Surgical

1. **Claim types with high percentage of fraud**  
Evidentiary Standard  
Source
2. **Fiscal Responsibility**  
Evidentiary Standard  
Source
3. **Industry Standards**  
Evidentiary Standard  
Source
4. **Medical Necessity**  
Evidentiary Standard  
Source
5. **Not Applicable**  
Evidentiary Standard  
Source
6. **Patient Safety**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **Lack of clinical efficiency of treatment or service**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - FDA Prescribing Information & Official Compendium
  - Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorizationSource
  - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
  - Medical expert reviews
2. **Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee**  
Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

**3. Not Applicable**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

**4. Severity or chronicity of an illness**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

**5. clinical appropriateness/medical necessity**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium
- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

**6. fail first protocol**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium



- Process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with their prior authorization

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Medical expert reviews

## Operations Measures

### Medical/Surgical

- Clinical Criteria applied based on FDA labeling and requirements and Official
- Compendium Internal monitoring of prior authorizations to determine compliance of treatment/service plans for drug efficacy based on concurrent review of treatment plans, service usage, and drug utilization
- Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers
- Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews
- Utilization trends

### Mental Health/Substance Use Disorder

- Clinical Criteria applied based on FDA labeling and requirements and Official
- Compendium Internal monitoring of prior authorizations to determine compliance of treatment/service plans for drug efficacy based on concurrent review of treatment plans, service usage, and drug utilization
- Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews
- Utilization trends

# Classification: Prescription Drugs

## NQTL: tiered drug formulary

### Definitions

NONE PROVIDED. SEE DOCUMENT REFERENCES

#### References

- Maryland Medicaid\_Parity Analysis Definitions\_7.16.20.pdf

### Factors

#### Medical/Surgical

- Fiscal Responsibility
- Industry Standards

#### Mental Health/Substance Use Disorder

- Excessive utilization
- Lack of clinical efficiency of treatment or service
- Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee
- Safety risks
- clinical appropriateness/medical necessity
- fiscal responsibility/cost effectiveness

### Definitions

- **Excessive utilization:** Procedures for which we have identified possible over-utilization.
- **Lack of clinical efficiency of treatment or service:** treatment that is not based on evidenced based clinical criteria such as InterQual guidelines.
- **Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee:** A drug's classification within the Preferred Drug List (PDL), which is a list of the Department's Preferred and Non- Preferred drugs developed by the Department's Preferred Drug Program via recommendations made by the Pharmacy & Therapeutics (P&T) Committee
- **Safety risks:** Safety consistent with FDA approved labeling, including black box warnings. Potential for abuse or diversion, significant potential for inappropriate use or narrow safety margin. Lack of compelling evidence.
- **clinical appropriateness/medical necessity:** Identified measures in place to determine the most appropriate treatment option for participants based on the participant's medical status, the placement of the treatment option on the PDL, and the treatment option's clinical criteria.
- **fiscal responsibility/cost effectiveness:** Examination of a drug's actual cost and rebateable status for the State with an emphasis on cost conservation and reduction of waste for the Department while still maintaining the accessibility of care to participants

#### Medical/Surgical

1. **Fiscal Responsibility**  
Evidentiary Standard  
Source
2. **Industry Standards**  
Evidentiary Standard  
Source

#### Mental Health/Substance Use Disorder

1. **Excessive utilization**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
  - FDA Prescribing Information & Official Compendium  
Source
    - Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
    - Internal claims analysis
    - Medical expert reviews
2. **Lack of clinical efficiency of treatment or service**  
Evidentiary Standard
  - Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of

care such as ASAM criteria or APA treatment guidelines.

- FDA Prescribing Information & Official Compendium

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews

**3. Medication status on Preferred Drug List (PDL) as determined by the Preferred Drug Program via recommendations by the Pharmacy & Therapeutics (P&T) Committee**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium

Source

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- Internal claims analysis
- Medical expert reviews

**4. Safety risks**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews

**5. clinical appropriateness/medical necessity**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
- Medical expert reviews

**6. fiscal responsibility/cost effectiveness**

Evidentiary Standard

- Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
- FDA Prescribing Information & Official Compendium

Source

- Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits
- Internal claims analysis
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- Utilization trends