

Benefits
Concurrent Review
Med/Surg

Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
1915c: nursing (private duty) (21+ years of age)		X			
Acute Care Services (Births/Deliveries)	X				
Acute Care Services (Medical/Surgical)	X				
Amputations--inpatient	X				
Amputations--outpatient			X		
Ancillary Services	X				
Anesthesia--Inpatient	X				
Applied Behavior Analysis (autism services)--primarily in-home		X			
Applied Behavior Analysis (autism services)--primarily in-home		X			
Audiology Services (hearing loss assessment and treatment)			X		
Autism: adult life planning		X			
Autism: Environmental accessibility adaption		X			
Autism: Family leave (retainer day)		X			
Autism: family training		X			
Autism: Intensive individual support services		X			
Autism: Residential habilitation (regular and intensive)		X			
Autism: Respite care		X			
Autism: Therapeutic integration (regular and intensive)		X			
Bariatric Surgery	X				
Brain Injury: Day habilitation		X			
Brain injury: Individual support services		X			
Brain injury: medical Day Care		X			
Brain Injury: Residential habilitation		X			
Brain injury: Supported employment		X			
Bypass surgery--inpatient	X				
Bypass surgery--outpatient				X	
Capsule Endoscopy				X	
Cardiac Procedures (non-emergent)--inpatient	X				
Cardiac Procedures (non-emergent)--outpatient				X	
Cardiac Rehabilitation				X	
CFC: Accessibility adaptations		X			
CFC: assistive technology		X			
CFC: Consumer training		X			
CFC: environmental assessments		X			
CFC: home delivered meals		X			
CFC: Personal emergency response system		X			
CFC: Transition services		X			
Chemotherapy--inpatient	X				
Chemotherapy--outpatient				X	
Circumcision				X	
Community Pathways and Community Supports waivers: Assistive technology and services		X			
Community Pathways and Community Supports waivers: Behavioral support services		X			
Community Pathways and Community Supports waivers: Career exploration		X			
Community Pathways and Community Supports waivers: Community development		X			
Community Pathways and Community Supports waivers: Day habilitation		X			
Community Pathways and Community Supports waivers: Employment discovery and customization		X			
Community Pathways and Community Supports waivers: Employment services		X			
Community Pathways and Community Supports waivers: Environmental assessment		X			

Community Pathways and Community Supports waivers: Environmental modification				X
Community Pathways and Community Supports waivers: Family and peer mentoring supports				X
Community Pathways and Community Supports waivers: Family caregiver training and empowerment				X
Community Pathways and Community Supports waivers: Housing support services				X
Community Pathways and Community Supports waivers: Individual and family directed goods and services				X
Community Pathways and Community Supports waivers: Medical Day Care				X
Community Pathways and Community Supports waivers: Nurse case management and delegation				X
Community Pathways and Community Supports waivers: Nurse consultation				X
Community Pathways and Community Supports waivers: Nurse health case management				X
Community Pathways and Community Supports waivers: Participant education, training and advocacy				X
Community Pathways and Community Supports waivers: Personal supports				X
Community Pathways and Community Supports waivers: Respite care services				X
Community Pathways and Community Supports waivers: Support broker services				X
Community Pathways and Community Supports waivers: Supported employment				X
Community Pathways and Community Supports waivers: Transportation				X
Community Pathways and Community Supports waivers: Vehicle modification				X
Community Pathways only: community living				X
Community Pathways only: live-in caregiver supports				X
Community Pathways only: Remote support services				X
Community Pathways only: Shared living				X
Community Pathways only: Support living				X
Community Pathways only: transition services				X
Corrective Surgery--inpatient	X			
Corrective Surgery--outpatient				X
Cosmetic Procedures--Inpatient	X			
CPAS and CFC: Nurse monitoring			X	
CPAS and CFC: Personal assistance services			X	
Dermatology Procedures				X
Diagnostic and X-ray services: CT--inpatient	X			
Diagnostic and X-ray services: MRI--inpatient	X			
Diagnostic and X-ray services: PET--inpatient	X			
Diagnostic and X-ray services: Radiography--inpatient	X			
Dialysis--Inpatient	X			
Dialysis--outpatient				X
Disposable Medical Equipment (w/o HCPCS)			X	
Disposable Medical Supplies (> \$500.00)			X	
Durable Medical Equipment (> \$1,000.00)			X	
Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS)			X	
Durable Medical Equipment (w/o HCPCS)			X	
Durable Medical Equipment rental (≤ 3 months)			X	
EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician)			X	
Erectile Dysfunction Procedures	X			
Eye Procedures--Inpatient	X			
Family Supports: Assistive technology and services			X	
Family Supports: Behavioral support services			X	
Family Supports: Environmental assessment			X	
Family Supports: Environmental modification			X	
Family Supports: Family and peer mentoring supports			X	
Family Supports: Family caregiver training and empowerment			X	
Family Supports: Housing support services			X	
Family Supports: Individual and family directed goods and services			X	
Family Supports: Nurse case management and delegation			X	

Family Supports: Nurse consultation				X
Family Supports: Participant education, training and advocacy				X
Family Supports: Personal supports				X
Family Supports: Respite care services				X
Family Supports: Support broker services				X
Family Supports: Transportation				X
Family Supports: Vehicle modification				X
Gender affirmation surgery	X			
Genetic Testing				X
Grafts/Implants	X			
Grafts/Implants--outpatient				X
HCBS: Assisted living				X
HCBS: Behavioral consultation				X
HCBS: behavioral consultation				X
HCBS: case management				X
HCBS: family training				X
HCBS: Medical Day Care				X
HCBS: Nutritionist/Dietician				X
HCBS: nutritionist/Dietician				X
HCBS: senior Center Plus				X
HH: Home Health Aide				X
HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing)				X
HH: Home Health Aide (≤ 1 visit per day; ≤ 4 hours of service per day; visit w/ skilled nursing; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X
HH: Occupational therapy				X
HH: Occupational therapy				X
HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate))				X
HH: Occupational therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X
HH: physical therapy				X
HH: physical therapy				X
HH: Physical therapy				X
HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate)				X
HH: Physical therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X
HH: Registered Nurse				X
HH: registered Nurse				X
HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)				X
HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X
HH: Speech therapy				X
HH: Speech therapy				X
HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)				X
HH: Speech therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X
Home Health Services: medical supplies used for home heath visit				X
Home Health Services: occupational therapy				X
Home Health Services: physical therapy				X
Home Health Services: skilled nursing services				X
Home Health Services: speech pathology services				X
Hospice: home health and aide services				X
Hospice: Medical appliances and supplies				X
Hospice: Medical social services				X
Hospice: nursing services				X
Hospice: Short-term inpatient care	X			
Hospice Care--Inpatient	X			
Hospice Care--Outpatient				X

Hospital Care--inpatient	X			
Hyperbaric Oxygen Therapy				X
Hysterectomy	X			
ICS: Assisted living			X	
ICS: behavioral consultation			X	
ICS: Behavioral consultation				X
ICS: case management			X	
ICS: Family training			X	
ICS: Medical Day Care			X	
ICS: Nutritionist/Dietician			X	
ICS: Nutritionist/Dietician				X
ICS: senior Center Plus			X	
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	X			
Investigational Surgeries/Clinical Trials--inpatient	X			
Investigational Surgeries/Clinical Trials--outpatient				X
MCO administered prescription drug				X
Medical Day Care waiver with associated services(16+ years of age):			X	
Nerve Stimulator--outpatient				X
Neurostimulators	X			
Neurosurgical procedures--inpatient	X			
Neurosurgical procedures--outpatient				X
NICU/Sick baby/Detained baby	X			
Nursing Facility: Activities	X			
Nursing Facility: Dental services	X			
Nursing Facility: Dietary services	X			
Nursing Facility: Laboratory, radiology and other diagnostic testing	X			
Nursing Facility: Nursing services	X			
Nursing Facility: Pharmaceutical services	X			
Nursing Facility: Physician services	X			
Nursing Facility: Social work	X			
Nursing Facility: Specialized rehabilitation	X			
Occupational Therapy				X
Occupational Therapy--inpatient	X			
Oncology Services--inpatient	X			
Oncology Treatment				X
Oral Surgery Adult				X
Oral Surgery Child				X
Outpatient hospital care (non-emergent)				X
Outpatient Rehabilitative services				X
Outpatient Surgery (Ambulatory Surgery Center)				X
Oxygen (w/o HCPCS)			X	
PACE: Day health care			X	
PACE: In-home care			X	
PACE: Meals			X	
PACE: Nursing care			X	
PACE: Personal care			X	
PACE: Recreation			X	
PACE: Social work			X	
PACE: Transportation			X	
Pain Management Procedures				X
Pain Management Visits				X
Physical Therapy				X

Physical Therapy--inpatient						X
Plastic and Restorative Surgery--inpatient						X
Plastic and Restorative Surgery--outpatient						X
Podiatry Services						X
Post-Stabilization Services						X
Post-Stabilization Services-inpatient						X
Post-Stabilization Services-outpatient						X
Proton Therapy Treatment						X
Pulmonary Rehab						X
Rehabilitation Services (Acute)						X
Remote Patient Monitoring					X	
Room and Board						X
Sleep Studies /Sleep Apnea Studies						X
Somatic services related to gender dysphoria						X
Specialty Care						X
Speech Therapy--inpatient						X
Spinal Cord Stimulator						X
Sterlization services--inpatient						X
Surgery (nonurgent)--inpatient						X
Surgery (urgent)--inpatient						X
Transplants						X
Transplants Pre and Post Transplant Services						X
Transplants Pre and Post Transplant Services--outpatient						X
Transportation between hospitals						X
Wound Vacuum-assisted closure (VAC)						X

MH/SUD

Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Acute Care Services	X				
Ambulatory detoxification			X		
Biofeedback			X		
Electroconvulsive therapy (ECT)--outpatient			X		
Evaluation and Management-Outpatient			X		
Family Therapy--outpatient			X		
Group therapy--outpatient			X		
Group therapy--outpatient			X		
health home services for MH reasons (serious and persistent mental illness (SPMI) - services by mobile treatment services (MTS) or psychological rehabilitation programs			X		
Individual therapy--outpatient			X		
Individual therapy--outpatient			X		
Inpatient ASAM 4.0	X				
Inpatient Detoxification--hospital	X				
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	X				
Intensive outpatient (IOP)			X		
Intensive Outpatient (IOP)--ASAM 2.1			X		
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)			X		
MAT Initial Intake (Evaluation and Management, Including Rx)			X		
MAT Ongoing (Evaluation and Management, including Rx)			X		
Methadone Maintenance			X		
Mobile treatment-Assertive community treatment (ACT)		X			
Mobile treatment-non-ACT		X			
Multiple family group therapy			X		
Not Applicable		X			X

Nursing Facility: SUD services	X		
nursing facility MH services	X		
Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified			X
Partial hospitalization (PHP)			X
Psychiatric Rehabilitation Services			X
Psychological or neuropsychological testing and evaluation			X
Residential SUD Treatment--ASAM 3.1	X		
Residential SUD Treatment--ASAM 3.3	X		
Residential SUD Treatment--ASAM 3.5	X		
Residential SUD Treatment--ASAM 3.7	X		
Residential SUD Treatment--ASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	X		
Residential Treatment Centers	X		
Special Psychiatric Hospital	X		
Targeted Case Management		X	
Therapeutic Behavioral Services			X
Traumatic Brain Injury (TBI) Day Habilitation			X

Benefits
Medical necessity
Med/Surg

Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
(1) Preventive services (cleanings, fluoride, etc.) - Clinic;			X		
(1) Preventive services (semiannual cleanings, fluoride, etc.) - Clinic;			X		
(2) Diagnostic services (oral exams, x-rays, etc.) - Clinic;			X		
(2) Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;		X			
(3) Diagnostic services (oral exams, x-rays, sealants, etc.) - Clinic;			X		
(3) Restorative services (fillings, crowns, etc) - Clinic;			X		
(4) Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;		X			
(4) Endodontic services (root canals, etc.) - Clinic;			X		
(5) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;			X		
(5) Restorative services (fillings, crowns, etc) - Clinic;			X		
(6) Prosthodontics (adjustment of dentures, etc.) - Clinic;			X		
(6) Restorative services (fillings, crowns, etc) - OP OR/ASC;		X			
(7) Endodontic services (root canals, etc.) - Clinic;			X		
(7) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic; and			X		
(8) Anesthesia - Clinic.			X		
(8) Endodontic services (root canals, etc.) - OP OR/ASC;		X			
(9) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;			X		
(10) Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;		X			
(11) Prosthodontics (dentures, etc.) - Clinic;			X		
(12) Prosthodontics (dentures, etc.) - OP OR/ASC;		X			
(13) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;			X		
(14) Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;		X			
(15) Orthodontic services - Clinic;			X		
(16) Anesthesia - Clinic; and			X		
(17) Anesthesia - OP OR/ASC.		X			
1915c: case management		X			
1915c: certified Nursing Assistant/Home Health Aide		X			
1915c: medical Day Care		X			
1915c: nursing (private duty) (21+ years of age)		X			
1915c: physician participation in plan of care meeting			X		
1915c: Physician participation in plan of care meeting			X		
Acne Services			X		
Acupuncture			X		
Acute Care Services (Births/Deliveries)	X				
Acute Care Services (Medical/Surgical)	X				
Air Ambulance				X	
Amputations--inpatient	X				
Amputations--outpatient			X		
Ancillary Services	X				
Anesthesia--Inpatient	X				
Applied Behavior Analysis (autism services)--primarily in-home		X			
Applied Behavior Analysis (autism services)--primarily in-home		X			
Audiology Services (hearing loss assessment and treatment)			X		
Augmentive communication devices		X			
Autism: adult life planning		X			
Autism: Environmental accessibility adaption		X			
Autism: Family leave (retainer day)		X			
Autism: family training		X			
Autism: Intensive individual support services		X			
Autism: Residential habilitation (regular and intensive)		X			
Autism: Respite care		X			
Autism: Therapeutic integration (regular and intensive)		X			
Bariatric Surgery	X				
Blood/Blood Products			X		
Brain Injury: Day habilitation		X			
Brain injury: Individual support services		X			
Brain injury: medical Day Care		X			
Brain Injury: Residential habilitation		X			
Brain injury: Supported employment		X			
Bypass surgery--inpatient	X				
Bypass surgery--outpatient			X		
Capsule Endoscopy			X		
Cardiac Procedures (non-emergent)--inpatient	X				
Cardiac Procedures (non-emergent)--outpatient			X		
Cardiac Rehabilitation			X		

Care Management				X
CFC: Accessibility adaptations				X
CFC: assistive technology				X
CFC: Consumer training				X
CFC: environmental assessments				X
CFC: home delivered meals				X
CFC: Personal emergency response system				X
CFC: Transition services				X
Chemotherapy--inpatient		X		
Chemotherapy--outpatient				X
Chiropractic Services				X
Circumcision				X
Clinic Services--Coumadin Clinic				X
Clinic Services--FQHC				X
Clinic Services--Heart Failure Clinic				X
Clinic Services--Other				X
Clinic Services--SBHC				X
Clinic Services--Wound Clinic				X
Community Pathways and Community Supports waivers: Assistive technology and services				X
Community Pathways and Community Supports waivers: Behavioral support services				X
Community Pathways and Community Supports waivers: Career exploration				X
Community Pathways and Community Supports waivers: Community development				X
Community Pathways and Community Supports waivers: Day habilitation				X
Community Pathways and Community Supports waivers: Employment discovery and customization				X
Community Pathways and Community Supports waivers: Employment services				X
Community Pathways and Community Supports waivers: Environmental assessment				X
Community Pathways and Community Supports waivers: Environmental modification				X
Community Pathways and Community Supports waivers: Family and peer mentoring supports				X
Community Pathways and Community Supports waivers: Family caregiver training and empowerment				X
Community Pathways and Community Supports waivers: Housing support services				X
Community Pathways and Community Supports waivers: Individual and family directed goods and services				X
Community Pathways and Community Supports waivers: Medical Day Care				X
Community Pathways and Community Supports waivers: Nurse case management and delegation				X
Community Pathways and Community Supports waivers: Nurse consultation				X
Community Pathways and Community Supports waivers: Nurse health case management				X
Community Pathways and Community Supports waivers: Participant education, training and advocacy				X
Community Pathways and Community Supports waivers: Personal supports				X
Community Pathways and Community Supports waivers: Respite care services				X
Community Pathways and Community Supports waivers: Support broker services				X
Community Pathways and Community Supports waivers: Supported employment				X
Community Pathways and Community Supports waivers: Transportation				X
Community Pathways and Community Supports waivers: Vehicle modification				X
Community Pathways only: community living				X
Community Pathways only: live-in caregiver supports				X
Community Pathways only: Remote support services				X
Community Pathways only: Shared living				X
Community Pathways only: Support living				X
Community Pathways only: transition services				X
Corrective Surgery--inpatient		X		
Corrective Surgery--outpatient				X
Cosmetic Procedures--Inpatient		X		
Cosmetic Procedures/Surgeries--outpatient				X
CPAS and CFC: Nurse monitoring				X
CPAS and CFC: Personal assistance services				X
Dermatology Procedures				X
Diabetic Education				X
Diagnostic and X-ray services: CT--inpatient		X		
Diagnostic and X-ray services: CT--outpatient				X
Diagnostic and X-ray services: MRI--inpatient		X		
Diagnostic and X-ray services: MRI--outpatient				X
Diagnostic and X-ray services: PET--inpatient		X		
Diagnostic and X-ray services: PET--outpatient				X
Diagnostic and X-ray services: Radiography--inpatient		X		
Diagnostic and X-ray services: Radiography--outpatient				X
Dialysis--Inpatient		X		
Dialysis--outpatient				X
Disposable Medical Equipment (w/o HCPCS)				X
Disposable Medical Supplies (> \$500.00)				X
Disposable Medical Supplies (≤ \$500.00)				X

HH: Physical therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
HH: Registered Nurse				X	
HH: registered Nurse				X	
HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)				X	
HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
HH: Speech therapy				X	
HH: Speech therapy					X
HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)				X	
HH: Speech therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
HIV/AIDS laboratory services				X	
Home and Community Based Options waiver:					X
Home Health Services: medical supplies used for home health visit				X	
Home Health Services: occupational therapy				X	
Home Health Services: physical therapy				X	
Home Health Services: skilled nursing services				X	
Home Health Services: speech pathology services				X	
Hospice: Counseling services (including dietary, spiritual and bereavement)					X
Hospice: home health and aide services				X	
Hospice: Medical appliances and supplies				X	
Hospice: Medical social services				X	
Hospice: nursing services				X	
Hospice: Occupational therapy					X
Hospice: Physical therapy					X
Hospice: Physician services					X
Hospice: Short-term inpatient care		X			
Hospice: Speech therapy					X
Hospice Care--Inpatient		X			
Hospice Care--Outpatient			X		
Hospital Care--inpatient		X			
Hyperbaric Oxygen Therapy					X
Hysterectomy		X			
ICS: Assisted living			X		
ICS: behavioral consultation			X		
ICS: Behavioral consultation					X
ICS: case management			X		
ICS: Family training			X		
ICS: Medical Day Care			X		
ICS: Nutritionist/Dietician			X		
ICS: Nutritionist/Dietician					X
ICS: senior Center Plus			X		
Infusion/Maintenance Drug Infusion					X
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)		X			
Investigational Surgeries/Clinical Trials--inpatient		X			
Investigational Surgeries/Clinical Trials--outpatient					X
Laboratory Services			X		
MCO administered prescription drug					X
Medical Day Care Waiver with associated services			X		
Medical Day Care waiver with associated services(16+ years of age):			X		
Molecular Pathology Labs			X		
National Diabetes Prevention Program			X		
National Diabetes Prevention Program Services					X
Nerve Stimulator--outpatient					X
Neuro-Psychological Testing/Developmental Delay Programs			X		
Neuro-Psychological Testing/Developmental Delay Programs					X
Neurostimulators		X			
Neurosurgical procedures--inpatient		X			
Neurosurgical procedures--outpatient					X
Newborn Office Services					X
NICU/Sick baby/Detained baby		X			
Nursing Facility: Activities		X			
Nursing Facility: Dental services		X			
Nursing Facility: Dietary services		X			
Nursing Facility: Laboratory, radiology and other diagnostic testing		X			
Nursing Facility: Nursing services		X			
Nursing Facility: Pharmaceutical services		X			
Nursing Facility: Physician services		X			
Nursing Facility: Social work		X			
Nursing Facility: Specialized rehabilitation		X			
Nutritional Counseling					X

Anesthesia--Inpatient	X			
Biofeedback				X
Buprenorphine guest dosing				X
Discharge Day	X			
Drug Testing		X		
Electroconvulsive therapy (ECT)--inpatient	X			
Electroconvulsive therapy (ECT)--outpatient				X
Evaulation and Management-Outpatient				X
Family Psycho-Educational Therapy				X
Family therapy--inpatient	X			
Family Therapy--outpatient				X
Family therapy--SUD inpatient	X			
FFS MH Drug				X
FFS SUD Drug				X
Group therapy--inpatient	X			
Group therapy--outpatient				X
Group therapy--outpatient				X
Group therapy--SUD inpatient	X			
Health Behavior Assessment				X
Health Behavior Reassessment				X
health home services for MH reasons (serious and persistent mental illness (SPMI) - services by mobile treatment services (MTS) or psychological rehabilitation programs				X
health home services for SUD (opioid addiction) - opioid treatment program				X
Individual Psycho-Educational Therapy				X
Individual therapy--inpatient	X			
Individual therapy--outpatient				X
Individual therapy--outpatient				X
Individual therapy--SUD inpatient	X			
Inpatient ASAM 4.0	X			
Inpatient Detoxification--hospital	X			
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	X			
Intensive outpatient (IOP)				X
Intensive Outpatient (IOP)--ASAM 2.1				X
Laboratory Services		X		
Laboratory Services		X		
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)				X
MAT Initial Intake (Evaluation and Management, Including Rx)				X
MAT Ongoing (Evaluation and Management, including Rx)				X
Mental health assessment				X
Mental health reassessment				X
Methadone guest dosing				X
Methadone Maintenance				X
Mobile treatment-Assertive community treatment (ACT)		X		
Mobile treatment-non-ACT		X		
Multiple family group therapy				X
Not Applicable				X
Nursing Facility: SUD services	X			
nursing facility MH services	X			
Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified				X
Opioid Treatment Program (OTP) services - including med management				X
Partial hospitalization (PHP)				X
Partial Hospitalization (PHP)--ASAM 2.5				X
Patient Consultation	X			
Peer Support Services		X		
Psychiatric Rehabilitation Services				X
Psychological or neuropsychological testing and evaluation				X
Psychological or neuropsychological testing and evaluation--inpatient	X			
Residential SUD Treatment--ASAM 3.1	X			
Residential SUD Treatment--ASAM 3.3	X			
Residential SUD Treatment--ASAM 3.5	X			
Residential SUD Treatment--ASAM 3.7	X			
Residential SUD Treatment--ASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	X			
Residential Treatment Centers	X			
Special Psychiatric Hospital	X			
Targeted Case Management		X		
Therapeutic Behavioral Services				X
Transcranial Magnetic Stimulation (TMS)				X
Traumatic Brain Injury (TBI) Day Habilitation				X

Operation Measures

Medical necessity

Med/Surg

Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Clinical Criteria applied based on FDA labeling and requirements and Official					X
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					X
Degree of discretion exercised by utilization review staff	X	X			
Dollar spend trends					X
duplicate restorations (quarterly)			X		
Exception processes available for each NQTL requirement and when they may be applied.					X
Frequency that authorization requirements are waived	X				
Frequency with which reviews are conducted	X				X
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	X	X	X	
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	X	X			X
Number of days or visits authorized per review	X				
Requirements for the qualifications of provider staff involved in reviews	X	X	X	X	
The expertise of the persons who make denial determinations and whether such decision-makers with respect to mental health, substance use disorder and medical/surgical benefits have comparable expertise.	X	X	X	X	
tracking of denial of plans of service that do not meet medical necessity		X			
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews					X
Utilization trends					X

MH/SUD

Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Authorization Denial Rates for MH/SUD	X	X	X		
Clinical Criteria applied based on FDA labeling and requirements and Official					X
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					X
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	X	X		
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	X	X	X		
Not applicable				X	
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews					X
Utilization trends					X

**Benefits
Outlier Management**

Benefit	Med/Surg	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
(1) Preventive services (cleanings, fluoride, etc.) - Clinic;				X		
(1) Preventive services (semiannual cleanings, fluoride, etc.) - Clinic;				X		
(2) Diagnostic services (oral exams, x-rays, etc.) - Clinic;				X		
(2) Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;			X			
(3) Diagnostic services (oral exams, x-rays, sealants, etc.) - Clinic;				X		
(3) Restorative services (fillings, crowns, etc) - Clinic;				X		
(4) Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;			X			
(4) Endodontic services (root canals, etc.) - Clinic;				X		
(5) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;				X		
(5) Restorative services (fillings, crowns, etc) - Clinic;				X		
(6) Prosthodontics (adjustment of dentures, etc.) - Clinic;				X		
(6) Restorative services (fillings, crowns, etc) - OP OR/ASC;			X			
(7) Endodontic services (root canals, etc.) - Clinic;				X		
(7) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic; and				X		
(8) Anesthesia - Clinic.				X		
(8) Endodontic services (root canals, etc.) - OP OR/ASC;			X			
(9) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;				X		
(10) Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;			X			
(11) Prosthodontics (dentures, etc.) - Clinic;				X		
(12) Prosthodontics (dentures, etc.) - OP OR/ASC;			X			
(13) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;				X		
(14) Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;			X			
(15) Orthodontic services - Clinic;				X		
(16) Anesthesia - Clinic; and				X		
(17) Anesthesia - OP OR/ASC.			X			
Acne Services				X		
Acute Care Services (Births/Deliveries)		X				
Acute Care Services (Medical/Surgical)		X				
Amputations--inpatient		X				
Amputations--outpatient				X		
Ancillary Services		X				
Anesthesia--Inpatient		X				
Applied Behavior Analysis (autism services)--primarily in-home			X			
Applied Behavior Analysis (autism services)--primarily in-home			X			
Autism: adult life planning			X			
Autism: Environmental accessibility adaption			X			
Autism: Family leave (retainer day)			X			
Autism: family training			X			
Autism: Intensive individual support services			X			
Autism: Residential habilitation (regular and intensive)			X			
Autism: Respite care			X			
Autism: Therapeutic integration (regular and intensive)			X			
Bariatric Surgery		X				
Blood/Blood Products				X		
Brain Injury: Day habilitation			X			
Brain injury: Individual support services			X			
Brain injury: medical Day Care			X			
Brain Injury: Residential habilitation			X			
Brain injury: Supported employment			X			
Bypass surgery--inpatient		X				
Bypass surgery--outpatient				X		
Capsule Endoscopy				X		
Cardiac Procedures (non-emergent)--inpatient		X				
Cardiac Procedures (non-emergent)--outpatient				X		
Cardiac Rehabilitation				X		
CFC: home delivered meals			X			
Chemotherapy--inpatient		X				
Chemotherapy--outpatient				X		
Circumcision				X		
Clinic Services--Coumadin Clinic				X		
Clinic Services--FQHC				X		

Family Supports: Behavioral support services				X	
Family Supports: Environmental assessment				X	
Family Supports: Environmental modification				X	
Family Supports: Family and peer mentoring supports				X	
Family Supports: Family caregiver training and empowerment				X	
Family Supports: Housing support services				X	
Family Supports: Individual and family directed goods and services				X	
Family Supports: Nurse case management and delegation				X	
Family Supports: Nurse consultation				X	
Family Supports: Participant education, training and advocacy				X	
Family Supports: Personal supports				X	
Family Supports: Respite care services				X	
Family Supports: Support broker services				X	
Family Supports: Transportation				X	
Family Supports: Vehicle modification				X	
Foster Care Evaluation/Check-up for children entering State custody					X
Gender affirmation surgery	X				
Genetic Counseling					X
Grafts/Implants	X				
Grafts/Implants--outpatient					X
HCBS: case management				X	
HH: Home Health Aide				X	
HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing)				X	
HH: Home Health Aide (≤ 1 visit per day; ≤ 4 hours of service per day; visit w/ skilled nursing; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
HH: Occupational therapy				X	
HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)				X	
HH: Occupational therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
HH: physical therapy				X	
HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate)				X	
HH: Physical therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
HH: Registered Nurse				X	
HH: registered Nurse				X	
HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)				X	
HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
HH: Speech therapy				X	
HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)				X	
HH: Speech therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)				X	
Home Health Services: occupational therapy				X	
Home Health Services: physical therapy				X	
Home Health Services: skilled nursing services				X	
Home Health Services: speech pathology services				X	
Hospice: Short-term inpatient care	X				
Hospice Care--Inpatient	X				
Hospital Care--inpatient	X				
Hyperbaric Oxygen Therapy					X
Hysterectomy	X				
ICS: case management				X	
Infusion/Maintenance Drug Infusion					X
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	X				
Investigational Surgeries/Clinical Trials--inpatient	X				
Investigational Surgeries/Clinical Trials--outpatient					X
MCO administered prescription drug					X
Medical Day Care waiver with associated services(16+ years of age):				X	
National Diabetes Prevention Program Services					X
Nerve Stimulator--outpatient					X
Neuro-Psychological Testing/Developmental Delay Programs					X
Neurostimulators	X				
Neurosurgical procedures--inpatient	X				
Neurosurgical procedures--outpatient					X
Newborn Office Services					X
NICU/Sick baby/Detained baby	X				
Nursing Facility: Activities	X				
Nursing Facility: Dental services	X				
Nursing Facility: Dietary services	X				

Nursing Facility: Laboratory, radiology and other diagnostic testing		X				
Nursing Facility: Nursing services		X				
Nursing Facility: Pharmaceutical services		X				
Nursing Facility: Physician services		X				
Nursing Facility: Social work		X				
Nursing Facility: Specialized rehabilitation		X				
Nutritional Counseling				X		
Observation Stay up to 24 h						X
OB Ultrasound				X		
Occupational Therapy				X		
Occupational Therapy--inpatient		X				
Oncology Services--inpatient		X				
Oncology Treatment				X		
Oral Surgery Adult				X		
Oral Surgery Child				X		
Outpatient hospital care (emergent)				X		
Outpatient hospital care (non-emergent)				X		
Outpatient Rehabilitative services				X		
Outpatient Surgery (Ambulatory Surgery Center)				X		
Oxygen					X	
Oxygen (w/o HCPCS)					X	
PACE: Medical specialty services (podiatry, psychiatry, dentistry, optometry and audiology)				X		
PACE: Rehabilitation				X		
Pain Management Procedures				X		
Pain Management Visits				X		
Physical Therapy				X		
Physical Therapy--inpatient		X				
Plastic and Restorative Surgery--inpatient		X				
Plastic and Restorative Surgery--outpatient				X		
Podiatry Services				X		
Post-Stabilization Services				X		
Post-Stabilization Services-inpatient		X				
Post-Stabilization Services-outpatient				X		
Pregnancy-related Services (OB Care)				X		
Primary Care				X		
Proton Therapy Treatment				X		
Pulmonary Rehab				X		
Rehabilitation Services (Acute)		X				
Remote Patient Monitoring					X	
Room and Board		X				
Sleep Studies /Sleep Apnea Studies				X		
Somatic services related to gender dysphoria				X		
Specialty Care				X		
Speech Therapy--inpatient		X				
Speech Therapy--outpatient				X		
Spinal Cord Stimulator		X				
Sterlization services--inpatient		X				
Sterlization Services--outpatient				X		
Surgery (nonurgent)--inpatient		X				
Surgery (urgent)--inpatient		X				
Transplants		X				
Transplants Pre and Post Transplant Services		X				
Transplants Pre and Post Transplant Services--outpatient				X		
Transportation between hospitals		X				
Urgent Care				X		
Vision Services				X		
Wound Vacuum-assisted closure (VAC)				X		

MH/SUD

Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Acute Care Services	X				
Alcohol and/or drug assessment			X		
Ambulatory detoxification			X		
Biofeedback			X		

Drug Testing		X			
Electroconvulsive therapy (ECT)--outpatient				X	
Evaluation and Management-Outpatient				X	
Family Psycho-Educational Therapy				X	
Family Therapy--outpatient				X	
Group therapy--outpatient				X	
Group therapy--outpatient				X	
Health Behavior Assessment				X	
Health Behavior Reassessment				X	
Individual Psycho-Educational Therapy				X	
Individual therapy--outpatient				X	
Individual therapy--outpatient				X	
Inpatient ASAM 4.0		X			
Inpatient Detoxification--hospital		X			
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)		X			
Intensive outpatient (IOP)				X	
Intensive Outpatient (IOP)--ASAM 2.1				X	
Laboratory Services			X		
Laboratory Services			X		
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)				X	
MAT Initial Intake (Evaluation and Management, Including Rx)				X	
MAT Ongoing (Evaluation and Management, including Rx)				X	
Mental health assessment				X	
Mental health reassessment				X	
Mobile treatment-Assertive community treatment (ACT)			X		
Mobile treatment-non-ACT			X		
Multiple family group therapy				X	
Not Applicable					X
nursing facility MH services		X			
Opioid Treatment Program (OTP) services - including med management				X	
Partial hospitalization (PHP)				X	
Partial Hospitalization (PHP)--ASAM 2.5				X	
primary mental health services (assessment, clinical evaluation, referral to ASO)				X	
Psychiatric Rehabilitation Services				X	
Psychological or neuropsychological testing and evaluation				X	
Residential SUD Treatment--ASAM 3.1		X			
Residential SUD Treatment--ASAM 3.3		X			
Residential SUD Treatment--ASAM 3.5		X			
Residential SUD Treatment--ASAM 3.7		X			
Residential SUD Treatment--ASAM 3.7WM (Licensed ASAM 3.7D in Maryland)		X			
Residential Treatment Centers		X			
Special Psychiatric Hospital		X			
Targeted Case Management			X		
Therapeutic Behavioral Services				X	
Traumatic Brain Injury (TBI) Day Habilitation				X	

**Operation Measures
Outlier Management**

Measure	Med/Surg				
	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
audits tracker (monthly)			X		
Degree of discretion exercised by utilization review staff	X	X			
Dollar spend trends					X
duplicate records (monthly)			X		
Frequency that authorization requirements are waived	X				
Frequency with which reviews are conducted	X	X			X
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	X	X	X	
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	X	X			
Number of days or visits authorized per review	X				
Outlier Management Data		X			
provider financial analysis (monthly)			X		
Requirements for the qualifications of provider staff involved in reviews	X	X	X	X	
The expertise of the persons who make denial determinations and whether such decision-makers with respect to mental health, substance use disorder and medical/surgical benefits have comparable expertise.	X	X	X	X	
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews					X
Utilization trends					X

Measure	MH/SUD				
	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Authorization Denial Rates for MH/SUD	X				
Authorization Denial Rates for MH/SUD	X	X			
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	X	X		
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	X	X	X		
NQTL does not apply to any services in this classification				X	
NQTL does not apply to any services in this classification				X	
NQTL does not apply to any services in this classification					X
Outlier Management Data	X				
Outlier Management Data		X			
Outlier Management Data			X		

Benefits
Prior Authorization/Pre-Authorization

Benefit	Med/Surg	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
(1) Preventive services (cleanings, fluoride, etc.) - Clinic;				X		
(2) Diagnostic services (oral exams, x-rays, etc.) - Clinic;				X		
(2) Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;			X			
(3) Diagnostic services (oral exams, x-rays, sealants, etc.) - Clinic;				X		
(3) Restorative services (filings, crowns, etc.) - Clinic;				X		
(4) Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;			X			
(4) Endodontic services (root canals, etc.) - Clinic;				X		
(5) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;				X		
(5) Restorative services (filings, crowns, etc.) - Clinic;				X		
(6) Prosthodontics (adjustment of dentures, etc.) - Clinic;				X		
(6) Restorative services (filings, crowns, etc.) - OP OR/ASC;			X			
(7) Endodontic services (root canals, etc.) - Clinic;				X		
(7) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic; and				X		
(8) Anesthesia - Clinic.				X		
(8) Endodontic services (root canals, etc.) - OP OR/ASC;			X			
(9) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;				X		
(10) Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;			X			
(11) Prosthodontics (dentures, etc.) - Clinic;				X		
(12) Prosthodontics (dentures, etc.) - OP OR/ASC;			X			
(13) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;				X		
(14) Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;			X			
(15) Orthodontic services - Clinic;				X		
(17) Anesthesia - OP OR/ASC.			X			
Amputations--inpatient		X				
Amputations--outpatient				X		
Anesthesia--Inpatient		X				
Applied Behavior Analysis (autism services)--primarily in-home			X			
Autism: adult life planning			X			
Autism: Environmental accessibility adaption			X			
Autism: Family leave (retainer day)			X			
Autism: family training			X			
Autism: Intensive individual support services			X			
Autism: Residential habilitation (regular and intensive)			X			
Autism: Respite care			X			
Autism: Therapeutic integration (regular and intensive)			X			
Bariatric Surgery		X				
Brain Injury: Day habilitation			X			
Brain injury: Individual support services			X			
Brain injury: medical Day Care			X			
Brain Injury: Residential habilitation			X			
Brain injury: Supported employment			X			
Bypass surgery--inpatient		X				
Bypass surgery--outpatient				X		
Capsule Endoscopy				X		
Cardiac Procedures (non-emergent)--inpatient		X				
Cardiac Procedures (non-emergent)--outpatient				X		
Cardiac Rehabilitation				X		
CFC: Accessibility adaptations			X			
CFC: assistive technology			X			
CFC: Consumer training			X			
CFC: environmental assessments			X			
CFC: home delivered meals			X			
CFC: Personal emergency response system			X			
CFC: Transition services			X			
Chemotherapy--inpatient		X				
Chemotherapy--outpatient				X		
Circumcision				X		
Corrective Surgery--inpatient		X				

Corrective Surgery--outpatient				X
Cosmetic Procedures--Inpatient	X			
CPAS and CFC: Nurse monitoring		X		
CPAS and CFC: Personal assistance services		X		
Dermatology Procedures				X
Dialysis--Inpatient	X			
Dialysis--outpatient				X
Disposable Medical Equipment (w/o HCPCS)		X		
Disposable Medical Supplies (> \$500.00)		X		
Disposable Medical Supplies (≤ \$500.00)		X		
Durable Medical Equipment (> \$1,000.00)		X		
Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS)		X		
Durable Medical Equipment (w/o HCPCS)		X		
Durable Medical Equipment (≤ \$1,000.00)		X		
Durable Medical Equipment rental (> 3 months)		X		
Durable Medical Equipment rental (≤ 3 months)		X		
EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician)		X		
Erectile Dysfunction Procedures	X			
Eye Procedures--Inpatient	X			
FFS M/S Drug				X
Gender affirmation surgery	X			
Genetic Testing		X		
Grafts/Implants	X			
Grafts/Implants--outpatient				X
HCBS: Assisted living		X		
HCBS: Behavioral consultation		X		
HCBS: behavioral consultation				X
HCBS: family training		X		
HCBS: Medical Day Care		X		
HCBS: Nutritionist/Dietician		X		
HCBS: nutritionist/Dietician				X
HH: Home Health Aide		X		
HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing)		X		
HH: Occupational therapy		X		
HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate))		X		
HH: physical therapy		X		
HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate)		X		
HH: registered Nurse		X		
HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)		X		
HH: Speech therapy		X		
HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)		X		
HH: Speech therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)		X		
Home Health Services: medical supplies used for home health visit		X		
Home Health Services: occupational therapy		X		
Home Health Services: physical therapy		X		
Home Health Services: skilled nursing services		X		
Home Health Services: speech pathology services		X		
Hospice: Short-term inpatient care	X			
Hospice Care--Inpatient	X			
Hospice Care--Outpatient		X		
Hospital Care--inpatient	X			
Hyperbaric Oxygen Therapy				X
Hysterectomy	X			
ICS: Assisted living		X		
ICS: behavioral consultation		X		
ICS: Behavioral consultation				X
ICS: Family training		X		
ICS: Medical Day Care		X		
ICS: Nutritionist/Dietician		X		
ICS: Nutritionist/Dietician				X
ICS: senior Center Plus		X		
Infusion/Maintenance Drug Infusion				X

Institutional Long Term Care/Skilled Nursing Facility (first 90 days)		X				
Investigational Surgeries/Clinical Trials--inpatient		X				
Investigational Surgeries/Clinical Trials--outpatient					X	
MCO administered prescription drug						X
Neurostimulators		X				
Neurosurgical procedures--inpatient		X				
Nursing Facility: Activities		X				
Nursing Facility: Dental services		X				
Nursing Facility: Dietary services		X				
Nursing Facility: Laboratory, radiology and other diagnostic testing		X				
Nursing Facility: Nursing services		X				
Nursing Facility: Pharmaceutical services		X				
Nursing Facility: Physician services		X				
Nursing Facility: Social work		X				
Nursing Facility: Specialized rehabilitation		X				
Occupational Therapy					X	
Occupational Therapy--inpatient		X				
Oncology Services--inpatient		X				
Oncology Treatment					X	
Oral Surgery Adult					X	
Oral Surgery Child					X	
Outpatient hospital care (non-emergent)					X	
Outpatient Rehabilitative services					X	
Outpatient Surgery (Ambulatory Surgery Center)					X	
Oxygen (w/o HCPCS)				X		
PACE: In-home care				X		
PACE: Meals				X		
PACE: Medical specialty services (podiatry, psychiatry, dentistry, optometry and audiology)					X	
PACE: Nursing care				X		
PACE: Personal care				X		
PACE: Recreation				X		
PACE: Rehabilitation					X	
PACE: Social work				X		
PACE: Transportation				X		
Pain Management Procedures					X	
Pain Management Visits					X	
Physical Therapy					X	
Physical Therapy--inpatient		X				
Plastic and Restorative Surgery--inpatient		X				
Plastic and Restorative Surgery--outpatient					X	
Podiatry Services					X	
Post-Stabilization Services					X	
Post-Stabilization Services-outpatient					X	
Proton Therapy Treatment					X	
Pulmonary Rehab					X	
Rehabilitation Services (Acute)		X				
Remote Patient Monitoring				X		
Sleep Studies /Sleep Apnea Studies					X	
Somatic services related to gender dysphoria					X	
Speech Therapy--inpatient		X				
Spinal Cord Stimulator		X				
Surgery (nonurgent)--inpatient		X				
Transplants		X				
Transplants Pre and Post Transplant Services		X				
Transplants Pre and Post Transplant Services--outpatient					X	
Transportation between hospitals		X				
Wound Vacuum-assisted closure (VAC)					X	

MH/SUD

Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Acute Care Services	X				
Ambulatory detoxification			X		

Factors
Prior Authorization/Pre-Authorization

		Med/Surg				
	Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
	clinical appropriateness / medical necessity					R
	Elasticity of demand		R			
	Excessive utilization	R	R	R		R
	fail first protocol					R
	High variability in cost per episode of care			R		
	Lack of clinical efficiency of treatment or service	R	R	R		R
	Medicare/Medicaid program participation eligibility	R	R			R
	medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					R
	Provider discretion in determining type or length of treatment					R
	Quality and performance measures (including customer feedback)		R			
	Recent medical cost escalation					R
	Relative reimbursement rates			R		
	Safety risks					R
	Service type	R	R	R		
	Severity or chronicity of an illness	R	R	R		R

		MH/SUD				
	Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
	clinical appropriateness / medical necessity					R
	fail first protocol					R
	High levels of variation in length of stay		R	R		
	Lack of clinical efficiency of treatment or service					R
	Least restrictive appropriate level of care	R	R	R		
	medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					R
	Not Applicable	R	R	R		R
	Service type		R	R		
	Severity or chronicity of an illness	R	R	R		R
	Variability in quality		R	R		

**Operation Measures
Prior Authorization/Pre-Authorization**

Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Clinical Criteria applied based on FDA labeling and requirements and Official					X
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					X
Compliance with self-imposed, customer, or regulator-imposed network adequacy standards.					X
Consequences or penalties that apply to benefits when an NQTL requirement is not met.					X
Degree of discretion exercised by utilization review staff	X	X			
evaluation of annual concurrent reviews and prior authorization reviews completed on a quarterly basis		X			
Frequency that authorization requirements are waived	X				
Frequency with which reviews are conducted	X	X			X
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	X	X		
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	X				
Number of days or visits authorized per review	X	X			
Requirements for the qualifications of provider staff involved in reviews	X	X	X		
services preauthorized not received (monthly)			X		
The expertise of the persons who make denial determinations and whether such decision-makers with respect to mental health, substance use disorder and medical/surgical benefits have comparable expertise.	X	X	X		
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews					X
Utilization trends					X

Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Authorization Denial Rates for MH/SUD	X				
Authorization Denial Rates for MH/SUD		X	X		
Clinical Criteria applied based on FDA labeling and requirements and Official					X
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					X
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	X	X		
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	X	X	X		
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews					X
Utilization trends					X

**Benefits
Service limitations**

Benefit	Med/Surg	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
(2) Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;			X			
(4) Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;			X			
(6) Restorative services (filings, crowns, etc) - OP OR/ASC;			X			
(8) Endodontic services (root canals, etc.) - OP OR/ASC;			X			
(10) Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;			X			
(12)Prosthodontics (dentures, etc.) - OP OR/ASC;			X			
(14) Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;			X			
(17) Anesthesia - OP OR/ASC.			X			
Applied Behavior Analysis (autism services)--primarily in-home			X			
Applied Behavior Analysis (autism services)--primarily in-home			X			
Autism: adult life planning			X			
Autism: Family leave (retainer day)			X			
Autism: Intensive individual support services			X			
Autism: Residential habilitation (regular and intensive)			X			
Autism: Respite care			X			
Autism: Therapeutic integration (regular and intensive)			X			
CFC: home delivered meals			X			
CFC: Transition services			X			
CPAS and CFC: Personal assistance services			X			
Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS)			X			
EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician)			X			
HCBS: Assisted living			X			
HCBS: case management			X			
HCBS: family training			X			
HCBS: Nutritionist/Dietician			X			
HH: Home Health Aide			X			
HH: Occupational therapy			X			
HH: physical therapy			X			
HH: Speech therapy			X			
Home Health Services: occupational therapy			X			
Home Health Services: physical therapy			X			
Hospice: home health and aide services			X			
Hospice: Medical appliances and supplies			X			
Hospice: Medical social services			X			
Hospice: nursing services			X			
ICS: Assisted living			X			
ICS: case management			X			
ICS: Family training			X			
ICS: Nutritionist/Dietician			X			
Not Applicable		X		X		
Oxygen			X			
PACE: Day health care			X			
PACE: In-home care			X			
PACE: Meals			X			
PACE: Nursing care			X			
PACE: Personal care			X			
PACE: Recreation			X			
PACE: Social work			X			
PACE: Transportation			X			

Remote Patient Monitoring

X

	MH/SUD				
Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Alcohol and/or drug assessment			X		
Ambulatory detoxification			X		
Don't provide services for this classification	X				
Group therapy--outpatient			X		
Individual therapy--outpatient			X		
Intensive Outpatient (IOP)--ASAM 2.1			X		
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)			X		
MAT Initial Intake (Evaluation and Management, Including Rx)			X		
MAT Ongoing (Evaluation and Management, including Rx)			X		
Methadone Maintenance			X		
Mobile treatment-Assertive community treatment (ACT)		X			
Mobile treatment-non-ACT		X			
Not Applicable		X			
Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified			X		
Opioid Treatment Program (OTP) services - including med management			X		
Partial Hospitalization (PHP)--ASAM 2.5			X		
Targeted Case Management		X			