### **Concurrent Review**

Benefit	Medyddig	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Acute Care Services (Medical/Surgical)		X	·	·		
Amputationsinpatient		X				
Bariatric Surgery		X				
Bypass surgeryinpatient		X				
Cardiac Procedures (non-emergent)inpatient		X				
Chemotherapyinpatient		X				
Corrective Surgeryinpatient		X				
Cosmetic ProceduresInpatient		X				
Erectile Dysfunction Procedures		X				
Eye ProceduresInpatient		X				
Gender affirmation surgery		X				
Grafts/Implants		X				
Home Visiting Services - Parenting/Support Services			X			
Hospice: Short-term inpatient care		X				
Hospice CareInpatient		X				
Hospital Careinpatient		X				
Hysterectomy		X				
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)		Х				
Investigational Surgeries/Clinical Trialsinpatient		X				
Neurostimulators		Х				
Neurosurgical proceduresinpatient		Х				
NICU/Sick baby/Detained baby		Х				
Nursing Facility: Activities		Х				
Nursing Facility: Dental services		Х				
Nursing Facility: Dietary services		Х				
Nursing Facility: Laboratory, radiology and other diagnostic testing		Х				
Nursing Facility: Nursing services		X				
Nursing Facility: Pharmaceutical services		Х				
Nursing Facility: Physician services		X				
Nursing Facility: Social work		X				
Nursing Facility: Specialized rehabilitation		X				
		^		V		
Nutritional Counseling				X X		
Occupational Therapy		v		*		
Oncology Servicesinpatient		Х		.,		
Physical Therapy				Х		
Plastic and Restorative Surgeryinpatient		X				
Post-Stabilization Services-inpatient		X				
Rehabilitation Services (Acute)		Х				
Speech Therapyoutpatient				X		
Spinal Cord Stimulator		Х				
Sterlization servicesinpatient		Х				
Surgery (nonurgent)inpatient		Χ				
Surgery (urgent)inpatient		Х				
Transplants		X				
Transplants Pre and Post Transplant Services		Χ				
	MH/SUD					

Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Acute Care Services	Χ				
Ambulatory detoxification			Х		
Biofeedback			X		
Electroconvulsive therapy (ECT)outpatient			Х		
Evaulation and Management-Outpatient			Х		
Family Therapyoutpatient			X		
Group therapyoutpatient			X		
Group therapyoutpatient			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 therapyoutpatient			X		
Individual therapyoutpatient			X		
Inpatient ASAM 4.0	Χ				
Inpatient Detoxificationhospital	Χ				
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	Χ				
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		Х			
Multiple family group therapy			X		
Not Applicable		Х			
nursing facility: mental health services	Χ				
Nursing Facility: SUD services	Χ				
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 TreatmentASAM 3.1	Χ				
Residential SUD TreatmentASAM 3.3	Χ				
Residential SUD TreatmentASAM 3.5	Χ				
Residential SUD TreatmentASAM 3.7	Χ				
Residential SUD TreatmentASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	Х				
Residential Treatment Centers	Х				
Special Psychiatric Hospital	Χ				
Targeted Case Management		Х			
Therapeutic Behavioral Services			X		
Transcranial Magnetic Stimulation (TMS)			X		
Traumatic Brain Injury (TBI) Day Habilitation			Y		

Sources

	Jources										
	Fail first requirements/step therapy										
	Med/Surg										
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs						
1. fail first protocol or requirement to try a generic, less expensive, or lower efficacy drug for a certain trial period before receiving approval for a new drug					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. Lack of clinical efficiency of treatment or service	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				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. medical effectiveness					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. Medical necessity					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. Not Applicable					Not Applicable						
6. Safety risks					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						
	MH/SUD										
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs						
1. fail first protocol or requirement to try a generic, less expensive, or lower efficacy drug for a certain trial period before receiving approval for a new drug					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						
					State and Federal requirements						
Lack of clinical efficiency of treatment or service					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						
					State and Federal requirements						
3. medication status of preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					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						
					State and Federal requirements						
4. Safety risks					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						
					State and Federal requirements						
5. Service type					Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triagering the application of an NQTL to benefits						
					State and Federal requirements						

6. Severity or chronicity of an illness

State and Federal requirements:

Violentiary 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

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

State and Federal requirements

#### **Evidentiary Standards**

Fail first requirements/step therapy  Med/Surg									
		MH/SUD							
Factor	Inpatient Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs					
1. fail first protocol or requirement to try a generic, less expensive, or lower efficacy drug for a certain trial period before receiving approval for a new drug				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 and official compendium					
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization					
2. Lack of clinical efficiency of treatment or service				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 and official compendium					
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization					
3. medication status of preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee				A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.					

5. Service type

6. Severity or chronicity of an illness

7. Site visit requirements

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

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 and official compendium

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 and official compendium

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 and official compendium

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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 and official compendium

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

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 and official compendium

#### **Medical necessity**

Word Manufact School			Med/Surg				
Word Manufact School		Benefit		Inpatient Outpatient - Ot	her Outpatient - Office Based	Emergency Benefits	Prescription Drugs
	Acne Services				X		
					X		
Implication of production of produc							
Windstands         4							
Kontagriasmonia         Kontagrias				X			
Manual and the standard and the standa					X		
### ### ### ### ### ### ### ### ###				X			
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Machine   Mach				V	X		
جن المنافعة المن				X	V		
(عال المستحدية المست					X		
Gase protegration desiration of sentral protegration of protegration				<b>v</b>	X		
Cartisky Cartisk				^	V		
Commandersyn-Salaberts         5         4					^ _		
Chemothery				V	^		
Minamaria faramed				^	V		
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Second State					X		
State   Stat					X		
Gline Service-Wound Clinic         4           Corrective Supery					X		
Controlle Surgery-noalization					X		
Correction Squisary-outpatient         X           Commette Froncoilure/Spurgeriespatient         X           Commette Froncoilure/Spurgeriespatient         X           Commette Froncoilure/Spurgeriespatient         X           Diagnostic and Yeary services: Crinpatient         X           Diagnostic and Yeary services: Crinpatient         X           Diagnostic and Yeary services: Mile-Impatient         X           Diagnostic and Yeary services: Mile graphyupstered         X           Diagnostic and Year year Miles Services: Mile graphyupstered         X           Diagnostic and Year year Miles Services: Mile graphyupstered         X           Diagnostic and Year year Miles Services: Miles graphyupstered         X           Diagnostic and Year year Miles Services: Miles graphyupstered         X           Services: Miles graphy				.,	Х		
Commet forcedures—inpatient         \$           Commette forcedures/inguieries—inquitageiries—inqu				Х	.,		
Counter   Coun					X		
Demands and Yes yerokes. Cf-inpatient   Diagnostic and Yes yerokes. Cf-inpatient   Diagnostic and Yes yerokes. Cf-inpatient   Diagnostic and Yes yerokes. MR-outpatient   Diagnostic and Yes yerokes				X			
Diagnostic and X-ray services: Cf-lipagatient         X </td <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td></td>					X		
Diagnostic and X-ray services. Croutpatient					Х		
Diagnostic and X-ray servicess. Mill-inpatient         X<				X			
Diagnostic and X-ray services: MRI—outpatient         X           Diagnostic and X-ray services: PEI—inpatient         X           Diagnostic and X-ray services: Radiography—outpatient         X           Diagnostic and X-ray services: Radiography—outpatient         X           Diagnostic and X-ray services: Radiography—outpatient         X           Dialysis—outpatient         X           Dialysis—outpatient         X           Everettile Dyfunction Procedures         X           Everettile Dyfunction Pro					X		
Diagnostic and X-ray services. PET—inpatient Diagnostic and X-ray services. PET—inpatient Diagnostic and X-ray services. PET—inpatient Diagnostic and X-ray services. Rediography—inpatient Diagnostic and X-ray services. Parcel Diagnostic and X-ray services				X			
Diagnostic and X-ray services: PET-outpatient         X           Diagnostic and X-ray services: Radiographyinpatient         X           Diagnostic and X-ray services: Radiographyinpatient         X           Dialysisinpatient         X           Dialysisinpatient         X           Erectile Dysfunction Procedures         X           Eye ProceduresInpatient         X           FFS M/S Drug         X           FOSET Care Evaluation/Check-up for children entering State custody         X           Genetace Counseling         X           Grafts/Implants-outpatient         X           Grafts/Implants-outpatient         X           Grafts/Implants-outpatient         X           Home Visiting Services - Parenting/Support Services         X           Home Visiting Services - Parenting/Support Services         X           Hospiec Gare-Inpatient         X           Hospiec Gare-Inpatient         X           Hyperbaric Oxygen Therapy         X           Hyperbaric Oxygen Therapy         X					X		
Diagnostic and X-ray services: Radiography-inpatient         X				X			
Diagnostic and X-ray services: Radiography—outpatient         X           Cipilayis—Inpatient         X           Cipilayis—Inpatient         X           Cirectic Dysfunction Procedures         X           Ke Procedures—Inpatient         X           KFS M/S Drug         X           Foster Care Evaluation/Check-up for children entering State custody         X           Genetic Counseling         X           Genetic Counseling         X           Grafts/Implants—outpatient         X           Home Visiting Services—Parenting/Support Services         X           Home Visiting Services—Parenting/Support Services         X           Hospice Care—Inpatient care         X           Hospice Care—Inpatient run pratient care         X           Hospica Care—Inpatient run pratient care         X           Hospica Care—Inpatient run (Inpatient)         X           Hysperbaric Oxygen Therapy         X           Hysperbaric Oxygen Therapy         X					X		
Dialysis-upatient   S				X			
Dialysting-outpatient Freetlie Dyfunction Procedures Freetlie					X		
Erectile Dysfunction Procedures Eye Procedures—Inpatient Eye Procedures—Inpatient Eye Procedures—Inpatient FSM/S Drug FSM				X			
Fige Michaer — Inpatient Fig Michaer					X		
FS M/S Drug FS M/S				X			
Foster Care Evaluation/Check-up for children entering State custody  Gender affirmation surgery  Genetic Counseling  Grafts/Implants  Grafts/Implants—outpatient  Hospices Parenting/Support Services  Hospices Short-term inpatient care  Hospices Short-term inpatient care  Hospital Care-inpatient  Hospital Care-inpatient  Hospital Care-inpatient  Hospital Parenting  Hospital Care-inpatient  Hospi				X			
Genetic Counseling Genetic Counseling Grafts/Implants Grafts/Implants Grafts/Implants Home Visiting Services - Parenting/Support Services Hospice: Short-term inpatient care Hospice Care—Inpatient Hospice Care—Inpatient Hospice Are—inpatient Hospice Care—inpatient Hospice Car							X
Genetic Counseling Grafts/Implants Grafts/Implantsoutpatient Grafts/Implantsoutpatient Home Visiting Services - Parenting/Support Services Hospice: Short-term inpatient care Hospice Careinpatient Hospice Careinpatient Hospica Careinpati					X		
Grafts/Implants — Grafts/Implants —outpatient  Home Visiting Services - Parenting/Support Services  Hospice: Short-term inpatient care  Hospice Care—Inpatient  Hospida Care—inpatient  Hyperbaric Oxygen Therapy  Hysterectomy  Infusion/Maintenance Drug Infusion				X			
Grafts/Implantsoutpatient Home Visiting Services - Parenting/Support Services Hospice: Short-term inpatient care Hospice CareInpatient Hospice CareInpatient Hospice CareInpatient Hospital Careinpatient Hospital Careinpatient Hyperbaric Oxygen Therapy Hysterectomy Infusion/Maintenance Drug Infusion  X  X  X  X  X  X  X  X  X  X  X  X  X					X		
Home Visiting Services - Parenting/Support Services Hospice: Short-term inpatient care Hospice CareInpatient Hospical CareInpatient Hospital C				X			
Hospice: Short-term inpatient care  Hospice Care—Inpatient  Hospital Care—inpatient  Hospital Care—inpatient  Hyperbaric Oxygen Therapy  Hysterectomy  Infusion/Maintenance Drug Infusion					X		
Hospice CareInpatient Hospital Careinpatient Hospital Careinpatient K Hyperbaric Oxygen Therapy K Hysterectomy Infusion/Maintenance Drug Infusion X X				•			
Hospital Careinpatient  Hyperbaric Oxygen Therapy  X  Hysterectomy  X  Infusion/Maintenance Drug Infusion							
Hyperbaric Oxygen Therapy Hysterectomy X Infusion/Maintenance Drug Infusion X				X			
Hysterectomy  Infusion/Maintenance Drug Infusion  X				X			
Infusion/Maintenance Drug Infusion	-dyperbaric Oxygen Therapy				X		
				X			
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)					X		
	Institutional Long Term Care/Skilled Nursing Facility (first 90 days)			X			

Investigational Surgeries/Clinical Trialsinpatient	х	
Investigational Surgeries/Clinical Trialsoutpatient		X
MCO Administered Drug		X
National Diabetes Prevention Program Services		X
Nerve Stimulatoroutpatient		X
Neuro-Psychological Testing/Developmental Delay Programs		X
Neurostimulators	X	
Neurosurgical proceduresinpatient	X	
Neurosurgical proceduresoutpatient		X
Newborn Office Services	v	Х
NICU/Sick baby/Detained baby	X	
Nursing Facility: Activities	X	
Nursing Facility: Dental services	X V	
Nursing Facility: Dietary services  Nursing Facility: Laboratory, radiology and other diagnostic testing	^ v	
Nursing Facility: Nursing services	^ Y	
Nursing Facility: Pharmaceutical services	x	
Nursing Facility: Physician services	x	
Nursing Facility: Social work	X	
Nursing Facility: Specialized rehabilitation	X	
Nutritional Counseling		x
OB Ultrasound		x
Occupational Therapy		X
Occupational Therapyinpatient	x	
Oncology Servicesinpatient	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
Pain Management Procedures		X
Pain Management Visits		X
Physical Therapy		х
Physical Therapyinpatient	X	
Plastic and Restorative Surgeryinpatient	Х	v
Plastic and Restorative Surgeryoutpatient Podiatry Services		x x
Post-Stabilization Services		x v
Post-Stabilization Services  Post-Stabilization Services-inpatient	x	X
Pregnancy-related Services (OB Care)		x
Primary Care		X
Proton Therapy Treatment		X
Pulmonary Rehab		X
Rehabilitation Services (Acute)	X	
Room and Board	X	
Sleep Studies /Sleep Apnea Studies		X
Somatic services related to gender dysphoria		X
Specialty Care		X
Speech Therapyinpatient	X	
Speech Therapyoutpatient		X
Spinal Cord Stimulator	X	
Sterlization servicesinpatient	X	
Sterlization Servicesoutpatient		X
Surgery (nonurgent)inpatient	X	
Surgery (urgent)inpatient	X	
Transplants	X	
Transplants Pre and Post Transplant Services	X	
Transplants Pre and Post Transplant Servicesoutpatient		X
Transportation between hospitals	X	
Urgent Care		X

X X

MH/SUD					
Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
cute Care Services	X				
alcohol and/or drug assessment			X		
ambulatory detoxification			X		
Ancillary Services	X				
AnesthesiaInpatient	X				
Biofeedback			X		
Buprenorphine guest dosing			X		
discharge day	X				
Drug Testing		X			
Educational Therapy			X		
Electroconvulsive therapy (ECT)inpatient	Х				
Electroconvulsive therapy (ECT)outpatient			X		
Evaulation and Management-Outpatient			X		
Family Psycho-Educational Therapy			x		
Family therapyinpatient	X				
Family Therapyoutpatient			X		
amily therapy - SUD inpatient	X				
FFS MH Drug	,				Х
FFS SUD drug					X
Group therapyinpatient	X				
Group therapyoutpatient			X		
Group therapyoutpatient			×		
group therapy SUD inpatient	x		^		
Health Behavior Assessment	^		¥		
Health Behavior Reassessment			×		
nealth home services for MH reasons (serious and persistent mental illness (SPMI) - services by mobile treatment services (MTS) or psychological rehabilitation programs			×		
nealth home services for SUD (opioid addiction) - opioid treatment program			×		
ndividual Psycho-Educational Therapy			× ×		
ndividual therapyinpatient	X		^		
ndividual therapyoutpatient	^		<b>v</b>		
			X		
ndividual therapyoutpatient	V		^		
ndividual therapy—SUD inpatient npatient ASAM 4.0	^ _				
npatient ASAM 4.0  npatient Detoxificationhospital	^ _				
	^				
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	X		V		
Intensive outpatient (IOP)			X V		
ntensive Outpatient (IOP)ASAM 2.1		V	X		
aboratory Services		X			
aboratory Services		Х	V		
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)		Х			
Mobile treatment-non-ACT		X			
Aultiple family group therapy			X		
ursing facility: mental health services	Х				
Jursing Facility: SUD services	X				
Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified			X		
pioid Treatment Program (OTP) services - including med management			X		
artial hospitalization (PHP)			X		
artial Hospitalization (PHP)ASAM 2.5			X		
Patient Consultation	X				

Psychiatric Rehabilitation Services			X
Psychological or neuropsychological testing and evaluation			X
Psychological or neuropsychological testing and evaluationinpatient	X		
Residential SUD TreatmentASAM 3.1	X		
Residential SUD TreatmentASAM 3.3	X		
Residential SUD TreatmentASAM 3.5	X		
Residential SUD TreatmentASAM 3.7	X		
Residential SUD TreatmentASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	X		
Residential Treatment Centers	X		
Special Psychiatric Hospital	X		
Targeted Case Management		X	
Therapeutic Behavioral Services			Χ
Transcranial Magnetic Stimulation (TMS)			Х
Traumatic Brain Injury (TBI) Day Habilitation			Х

Sources Medical necessity

		Medical necessity		
		Med/Surg		
Factor	Inpatient	Outpatient - Other	Outpatient - Office Rased	Emergency Renefits Prescription Drugs
1. Claim types with high percentage of fraud		Internal claims analysis	Internal claims analysis	Internal claims analysis
		State and Federal requirements	State and Federal requirements	State and Federal requirements
2. Current and projected demand for services		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	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	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 NOTs to benefits
		Internal claims analysis	Internal claims analysis	Internal chims analysis
		Internal market and competitive analysis	Medical expert reviews	Medical expert reviews
3. Elasticity of demand		Istormal claims analysis Istormal ranket and commetitive analysis	Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggening the application of an NGFL to benefits	Diddentiary 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
		instruit market and competitive analysis. Medical report neilies.	Medical expert reviews	Medical expert reviews
4. Excessive utilization	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 superi reviews. Videntiary 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.	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	Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to deline the factors triggering the application of an NQTL to benefits
4. Excepte constant	structurally statisticated, including only potential contrasticated as well as internal point or injurie statisticated, review upon or internal claims arranged on approximate or an injurie or an inj	eventurancy is uniformly uniformly supported to the support of the	ancestrately assuments, increasing any passioners national and were an extension point on reason statement, review upon to sense that the statement are national to organize their passions of an extension and review of the statement and the statement are national to organize their passions of an extension and review of the statement and the statement are national to organize their passions of the statement and the statement are national to organize the statement and the statement are national to organize the statement and the statement and the statement are national to organize the statement and the statement and the statement are national to organize the statement and t	INTERPRETATION AND ADMINISTRATION OF THE PROPERTY OF THE PROPE
	internal custom studyes Internal transfert and competitive analysis	ENGINEER LABORS AND SECTION OF THE S	meet tata kalimin ahanyuks Medicila sapert nerienas	nersonal reports a reverses
	Medical expert reviews			
5. High levels of variation in length of stay	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. internally developed guidelines		Internal claims analysis	Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggening the application of an NQTL to benefits	
		Internal market and competitive analysis.		
7. Lack of adherence to quality standards		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		
		National accreditation standards		
		State and Federal requirements		
Provider discretion in determining diagnosis		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 market and competitive analysis		
		Medical expert reviews		
9. Provider discretion in determining type or length of treatment		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	Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggening the application of an NQTL to benefits	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 market and competitive analysis	Medical expert reviews	Medical expert reviews
		Medical expert reviews		
10. Safety risks				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 NOTL to benefits
				Medical expert reviews
11. Service type		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	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	
		Internal market and competitive analysis		
		Medical expert reviews		
12. Severity or chronicity of an illness		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	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 NGTL to benefits	
		Medical expert reviews	Medical expert enviews	
13. waste of Medicald funds				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
		MH/SUC		
Factor	Inpatient	Outpatient - Other	Outpatient - Office Rased	Emergency Renefits Prescription Drugs
1. clinical appropriateness/medical necessity				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
				State and Federal requirements
2. Excessive utilization				Internal claims analysis
3. fiscal responsibility/cost effectiveness				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 NOTs to benefits
				Internal claims analysis
				State and Federal requirements
4. High levels of variation in length of stay	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	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 NCDL to benefits	Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggening the application of an NGFL to benefits	
5. Lack of clinical efficiency of treatment or service				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 NOTs to benefits
				Internal chims analysis
6. Least restrictive appropriate level of care	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	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	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. Least restrictive appropriate level of care		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 NCDL to benefits		
<ol><li>medication status of preferred drug list (PGL) as determined by the preferred drug program via recommendations by the P&amp;T committee</li></ol>				Diddentiary 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
				State and Federal requirements
9. Not Applicable		Not Applicable		Sidentiary 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
10. Saflety risks				suspendary standards, including any potentied standards as were as internal plan or issuer standards, resed upon to define the Ecclost staggering the application of an inclusive confidence of the State and Federal Residence research.
11. Senice type	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	Evidentiany 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	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	ALAN DIA PROBINI PERCENTIAN
11. service type 12. Severity or chronicity of an illness	avoiencing translated, including any policities and as a view as internal point or issuer translated, reside upon to define the factors staggering the applications of an NULL to Desertist Evidentizary standard still, including any published standards a view as internal point or insuer standards, relied upon to define the factors staggering the applications of an NULL to Desertist Evidentizary standards still, including any published standards as view as internal point or insuer standards, relied upon to define the factors staggering the applications of an NULL to Desertist  Evidentizary standards still cluding any published standards as view as internal point or insuer standards, relied upon to define the factors staggering the applications of an NULL to Desertist  Evidentizary standards still cluding any published standards as view as internal point or insuer standards, relied upon to define the application of an NULL to Desertist  Evidentizary standards still a standard standards as view as internal point or insuer standards, relied upon to define the application of an NULL to Desertist  Evidentizary standards standards as view as internal point or insuer standards, relied upon to define the application of a NULL to Desertist  Evidentizary standards standards as view as internal point or insuer standards, relied upon to define the application of a NULL to Desertist  Evidentizary standards standards as view as internal point or insuer standards.	evidentiary standards, including any published standards as well as internal plan or insure standards, resided upon to define the faction straggering the applications of an INLTO to benefits. Violentiary standards, funding any published standards as well as internal plan or insure standards, resided upon to define the faction straggering the application of an INLTO to benefits.	sweemany attractors, including any published standards as well as internal pain or sister to indust, execution to senior the factor triggering the approximation or an inquirity attractors, including any published standards are as internal pain or inster to industry, execution to senior the factors triggering the application of an MOST to benefits	Sidentiary 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
As develop as accumung to accument	avosernary transars, including any published standards at well as internal plan or issuer transards, resed upon to denie the factors origining the application or an NULL to benefits.  Medical expert multivales.	severmonery summerces, manuscring and polarization summerces are wren as memorial point on money summerces, resources to the SECOND ENGINEERS THE Applications of a In RQUE TO DRIVETS.	EXECUTIVELY SERVICES, IN. AMONG MAY PARAMETER SERVICES AND THE PROPERTY OF THE	suspensive y annual properties of transport and the second part of the properties of
12. Variability in quality	nerous.ancepurs reviews Evidentiary standards of, 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	Evidentiany 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	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	- conformer demonstration of the conformer demonstration of th
an versioning in quarty	EVENTAGE OF THE SECOND OF THE	evidencery scenarios, recovering any passessive scenarios as were as internet point or nature scenarios, review upon to united the 1920ot (Figgering the application of an AULE to Detects	RESIDENCE OF STREET, RE-LANCE MAY PARTITION OF WHICH AN INDICATION OF THE PROPERTY OF THE PROP	

Evidentiary Standards Medical necessity

	Medical necessity									
Factor	Inputient	Outpatient - Other Med/Surg	Outpatient - Office Based	Emergency Benefits Prescription Drugs						
		MN/SUD								
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits Prescription Drugs						
1. clinical appropriateness/medical necessity				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. EPA Prescribe information and efficial commendium						
				FDA Prescribing information and official compensions process reviewly for auditor claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization						
2. Excessive utilization				process revisually not autoring course axes to ensure companies or a participant is treatment and environ participant in requirement and environ participant in requirement and environ participant in requirement autorization.  A certain numberlying of recognished medical liberature are of provisional standardizing comparable where discharations and collectal final, due published research studies.						
2. MARSHAY MANAGAMA				Compliance with prefer to readjusted intensis an intensity and potential intensity property and potential intensity property and potential intensity property and potential intensity appropriate treatment glindlines used to define circlesly appropriate treatment glindlines.  Compliance with prefer intensity prefer intensity appropriate treatment glindlines.						
				FOR Prescribe information and official compensation of the control						
				process reviewed for auditine claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization						
3. fiscal responsibility/cost effectiveness				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 and official compendium						
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization						
4. High levels of variation in length of stay	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.							
5. Lack of clinical efficiency of treatment or service				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 necognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.						
				FDA Prescribing information and official compendium						
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization						
6. Least restrictive appropriate level of care	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.		Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.							
7. Least restrictive appropriate level of care		Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.								
E. medication status of preferred drug list (PDK) as determined by the preferred drug program via recommendations by the P&T committee				A certain number/type of recognized medical literature and professional standards (Including comparative effectiveness studies and clinical trish), 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. EPA Prescribe information and efficial commendium						
9. Safety risks				NUM VINICIPATING PROTESTANCE AND OFFICE COMPRESSIONS AND ACCORDANCE OF THE ACCORDANC						
n. army roos				Compliance with prefer to readjusted intensis an intensity and potential intensity property and potential intensity property and potential intensity property and potential intensity appropriate treatment glindlines used to define circlesly appropriate treatment glindlines.  Compliance with prefer intensity prefer intensity appropriate treatment glindlines.						
				Exceptions with processionary recognised resistance guarantees used to be minimize appropriate transaction of the source and controlled to the source procession and the sourc						
10. Service type	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or AFA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	PAPETERS INTO EXPLANATION AND VIRGINIA CONTRACTOR AND						
11. Sewetty or chronicity of an illness	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	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.						
				FGA Frenching Information and official compendum						
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization						
12. Variability in quality	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or AFA treatment guidelines.							

## **Outlier Management**

		ieu/ Juig				
	Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	<b>Emergency Benefits</b>	Prescription Drugs
Acupunture				X		
Acute Care Services (Medical/Surgical)		X				
Amputationsinpatient		Х				
Audiology Services (hearing loss assessment and treatment)				X		
Bariatric Surgery		X				
Bypass surgeryinpatient		X				
Cardiac Procedures (non-emergent)inpatient		X				
Cardiac Procedures (non-emergent)outpatient				X		
Cardiac Rehabilitation				X		
Chemotherapyinpatient		X				
Chiropractic Services				X		
Clinic ServicesCoumadin Clinic				X		
Clinic ServicesHeart Failure Clinic				X		
Corrective Surgeryinpatient		X				
Cosmetic ProceduresInpatient		X				
Cosmetic Procedures/Surgeriesoutpatient				X		
DialysisInpatient		X				
Emergency RoomBeyond EMTALA Screening					X	
Emergency RoomStabilization Services					X	
mergency Room- All inclusive ancillary services					X	
Emergency Room-Clinical Laboratory					X	
mergency Room- Dental Services					X	
mergency Room-General Services					X	
mergency Room- Medications					X	
Emergency Room-Post-Stabilization Services					X	
Emergency Room-Radiology					X	
rectile Dysfunction Procedures		Χ				
ye ProceduresInpatient		Χ				
FS M/S Drug						Х
Gender affirmation surgery		X				
Genetic Counseling				X		
Grafts/Implants		Χ				
Home Visiting Services - Parenting/Support Services			Χ			
Hospice: Short-term inpatient care		Х				
lospice CareInpatient		X				
Hospital Careinpatient		X				
Hyperbaric Oxygen Therapy		^		Χ		
Hysterectomy		Х		^		
nstitutional Long Term Care/Skilled Nursing Facility (first 90 days)		Λ V				
nvestigational Surgeries/Clinical Trialsinpatient		X				
		۸		V		
nvestigational Surgeries/Clinical Trialsoutpatient				X		V
MCO Administered Drug				v		X
National Diabetes Prevention Program Services				X		

Benefit Acute Care Services	Inpatient X	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
MH/SUD					
			^		
Vision Services	^		X		
Transplants Transplants Pre and Post Transplant Services	X				
Surgery (urgent)inpatient Transplants	X X				
Surgery (nonurgent) inpatient	X				
Sterlization servicesinpatient	X				
Spinal Cord Stimulator Starlization convices innations	X				
Speech Therapyoutpatient	V		X		
Specialty Care			X		
Sleep Studies /Sleep Apnea Studies			X		
Rehabilitation Services (Acute)	Х		V		
Pulmonary Rehab  Rehabilitation Services (Acuta)	V		X		
Proton Therapy Treatment			X		
Primary Care  Proton Thorapy Treatment			X		
Post-Stabilization Services-inpatient	Х		V		
Plastic and Restorative Surgeryoutpatient	V		X		
Plastic and Restorative Surgery - inpatient	Х		V		
Physical Therapy  Plastic and Postcrative Surgery, innations	V		X		
Pain Management Visits			X		
Pain Management Procedures			X		
Outpatient Rehabilitative services			X		
Oral Surgery Child			X		
Oral Surgery Adult			X		
Oncology Servicesinpatient	Х		V		
Occupational Therapy	.,		Χ		
Observation Stay up to 24 h			V	Х	
Nursing Facility: Specialized rehabilitation	Х			V	
Nursing Facility: Social work	X				
Nursing Facility: Physician services	X				
Nursing Facility: Pharmaceutical services	X				
Nursing Facility: Nursing services	X				
Nursing Facility: Laboratory, radiology and other diagnostic testing	X				
Nursing Facility: Dietary services	X				
Nursing Facility: Dental services	X				
Nursing Facility: Activities	X				
NICU/Sick baby/Detained baby	X				
Neurosurgical proceduresinpatient	X				
Neurostimulators	X				
Neuro-Psychological Testing/Developmental Delay Programs	.,				
Neuro-Psychological Jesting/Develonmental Delay Programs			X		

Χ

Χ

Χ

Alcohol and/or drug assessment

Ambulatory detoxification

Biofeedback

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

#### **Factors**

#### **Outlier Management**

Med/Surg					
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	<b>Emergency Benefits</b>	Prescription Drugs
Claim types with high percentage of fraud	R	R	R		R
clinical appropriateness/medical necessity					R
Current and projected demand for services					R
Elasticity of demand					R
Excessive utilization	R	R	R	R	R
fail first protocol or requirement to try a generic, less expensive, or lower efficacy drug for a certain trial period before receiving approval for a new drug					R
High variability in cost per episode of care		R	R	R	
Lack of adherence to quality standards					R
Lack of clinical efficiency of treatment or service	R				R
medical effectiveness					R
Medical necessity					R
medication status of 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	R
Provider discretion in determining diagnosis	R	R	R		R
Provider discretion in determining type or length of treatment	R	R	R	_	
Prudent Layperson Guidelines				R	
Quality and performance measures (including customer feedback)					R
Recent medical cost escalation	R	R	R		R
Relative reimbursement rates			R		
Safety risks	R				R
Service type	R	R	R		
Severity or chronicity of an illness	R	R	R	R	R
Variability in quality		R			
MH/SUD					
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	<b>Emergency Benefits</b>	Prescription Drugs
Excessive utilization	R	R	R		
High levels of variation in length of stay	R	R	R		
Lack of clinical efficiency of treatment or service				R	
Least restrictive appropriate level of care	R	R	R		
Not Applicable	R			R	R
Provider discretion in determining diagnosis				R	
Provider discretion in determining type or length of treatment				R	
Service type	R	R	R		
Severity or chronicity of an illness	R	R	R		
Variability in quality	R	R	R		

			Sources		
			Outlier Management		
			Durante de la companya del companya del companya de la companya de		
Tactor	tryations	Outpidewid - Other		Europeacy Benefit	Prescription Drugs
Claim types with high percentage of food	Involvedany romandanii, including amy published standands as welfas internal plan or rower standands, neted upon to define the flattors triggering the application of an NOSTs to benefits internal colorest according to the colorest analysis.	Internal claims analysis	Internal claims analysis		Evidentiany standards, including any published standards as well as internal plan or insure standards, relead upon to define the factors triggering the application of an NETS. So benefits
	Informati clasmic analyzis				INSPIRED COMPANY COMPA
2. climical appropriateses of medical security					ment na manten anno sumpressor man pas. Entiretrany standarding sing published dandardi an well as internal plan or maser standardis, relead upon to define the factors triggering the application of an NESTS to benefits
5. Current and proposited demand for servoirs					Evolutions standards, including any published standards as well as interest plan or issuer standards, relead upon to define the factors triggering the application of an NECT. to benefit
					Internal claims analysis
					Medial eget revews
4. Electrity of demand					Evidentiary standards, including any published standards as well as internal plan or issuer standards, reled upon to define the factors triggering the application of an NETS to benefits
					Internal claims analysis Medial regient cereios
5. Exceptive utilisation	bridentiary conducted, including any published standards as well as interval plan or rouser conducts, relied upon to define the factors triggering the application of an INSUS. In benefits	Indeenal clarece analysis	Reference College or a sealing or	Indexnal claims, analysis.	normalis regime inverses. Entitle Contains, localising any published identifieds as well as internal plan or issuer clanisatios, relead upon to define the factors triggering the application of an NESTS to benefits
1. SEPON SIGNAL	Intermedicular parameter, unatalizat as were as internal pain or novel unatalizat received upon solutions on taxanis suggesting and approximation of attractions.  Informatic dates analysis.	memory states analysis	mena-namanaps.	mental cuma suspec	Externally demands, incompany and parameter sameness as never as received point or some separate substitution of supplication or an expension of substitution
	Medical expert reviews				Medial repril review
<ol> <li>fall first protocution requirement to try a general, less expensive, or lawer efficacy drug for a certain trial period before receiving approxisfior a new drug</li> </ol>					Enderstary standards, including any published standards as well as internal plan or issuer standards, refeel upon to define the factors triggering the application of an NESTs to benefits
					Medial eget revews
7. Mgf-variability in cost per episode of care		Internal claims analysis	Evidentiary standards, including any published standards as well as internal plan or recent clandards, reflect upon to define the factors triggering the application of an NCPS. In benefits	Internal claims, analysis.	
			trideman/dates austyres		
8. Lack of adherence to quality standards					Evidentiarly standards, including any published standards or well as internal plan or issuer standards, neted upon to define the Socious Engagement the application of an NZTS. So benefits
9. Link of clinical efficiency of treatment or centure	Inodentiary-conclude, including any published standards as well as oteracily fan or source standards, velled upon to define the factors (aggreing the applications of an NOCT, to benefits. Medical engine reviews.				Enderstany standards, including any published standards or well as internal plan or issuer standards, reflect upon to define the factors triggering the application of an NZSL to benefits
33. medical effectiveness	secura representation				Enterettary standards, including any published identered as well as internal plan or issuer standards, reled upon to define the factors triggering the application of an NESS. to benefits
					Medical region (notines)
11. Medical monetally					Evidentially standards, including any published standards as well as internal plan or issuer standards, refed upon to define the factors triggering the application of an 102% to benefits
					Medical expert reviews
12. medication status of preferred drug list (PCK) as determined by the preferred drug program via recommendations by the PET committee					Endertiary Standards, including any published standards as well as internal plan or issuer standards, refed upon to define the factors triggering the application of an NESTs to benefits
					Medial eget revews
11 Not Applicable	Not applicable	tou applicable	Tota Applicable	Not Applicable	No. Applicable
16. Provider discretion in determining diagnosis.	Inodentiary-conclude, including any published standards as well as oteracily fan or source standards, velled upon to define the factors (aggreing the applications of an NOCT, to benefits. Medical engine reviews.	Evolutionary standards, including any published standards as well as interestal plan or insurer standards, withed upon its define the factors triggering the applications of an NCPL to benefits.  Medicine report reviews.	Productionsy standards, including any published standards as well as interval plan or resurer standards, reflect upon to define the factors traggering the application of an NCTS. In terestics, Medical expect reviews.		Traditionally standing any published Standards as well as intensifying any qualification of an SECS, to be entire the Satistic Singgroup the application of an SECS, to benefits Medical experimentary representations.
13. Provider discretion is determining type or length of Sestiment	minutal region increase. Estimating translating story published standards as well as interval plan or rouser standards, relied upon to define the factors traggering the application of an INSUS. So benefits	mensurangem reviews. Evidentizery standards, including any published standards as well as interval plan or rower standards, when upon to define the factors triggering the application of an MSPS. In Levelitic	normal regime retrieve. Bridericary standards, soluting any published standards as well as interval plan or issuer standards, refer upon to define the factors triggering the application of an NCTS, to benefits		some and region involves.
As reason accessors in anteriorising open or images at amounted	International variables, variables are serious surrounded as were as command pain or notest surrounded, review upon so common over 1 access singlying our approximation or accessive.	Evaluation of contacts, make the process contacts as were as internal plan or recent space of makes or games or or	тельности и польтору по польтору по польтору по		
18. Prudent Lapperion Qualifores				State and Federal recurrencess	
17. Quality and performance measures (including ourbaner feedback)					Evidentiany standards, including any published dandards as well as internal plan or issuer standards, reled upon to define the factors triggering the application of an NZTs. to benefits
18. Recent medical and escalation	Endentary clanifants, including any published standards as well as internal plan or issuer clanifants, retird upon to define the factors organized the application of an INCES to benefits.	tribernal claims analysis	Evidentiary standards, including any published standards as well as interval plan or resure standards, reted upon to define the factors triggering the application of an MOTS, to benefits		Evidentiary standards, including any published standards as well as internal plan or issuer standards, refed upon to define the factors triggering the application of an NZTs to benefits
	tribercal clarins analysis				Inflormal channe analogos
18. Relative remisurament other			Evidentiary standards, including any published standards as well as internal plan or issuer standards, reflect upon to define the factors triggering the application of an NOTS, to benefits		
			Milenal dans avalysis		
			Internationalists and competitive analysis		
25. Safety exist.	Institution y considerally, including any published standards as well as internal plan or rower standards, refed upon to define the factors toggering the application of an NOZE, to benefits.  Medical expect inviews.				Enderstany standards, including any published standards or well as internal plan or issuer standards, reflect upon to define the factors triggering the application of an NZSL to benefits
21. Service Type	Enderstary Strukturks, including any published standards as well as internal plan or rower standards, reflect upon to define the factors taggering the application of an NOTE, to benefits	Enderdany standards, including any published standards as well as internal plan or rower standards, wheel upon to define the factors triggering the application of an NCPS. In benefits	tridentiary standards, including any published standards as well as internal plan or rower standards, reflect upon to define the factors triggering the application of an MSYS. In benefits		
		Medicinepel everes	The state of the s		
22. Severity or chronicity of an times.	Endentary clanifants, including any published standards as well as internal plan or issuer clanifants, retird upon to define the factors organized the application of an INCES to benefits.	Endendary standards, including any published standards as well as reternal plan or source standards, retend upon to define the factors triggering the application of an MCEs to benefits	Evidentiary standards, including any published standards as well as interval plan or resure standards, reted upon to define the factors triggering the application of an MOTS, to benefits	Endentary Clandards, including any published Clandards as well as internal plan or issuer Clandards, including plan to define the factors triggering the application of an NZTs to benefits	Evidentiany standards, including any published dandards as well as internal plan or issuer standards, reled upon to define the factors triggering the application of an NZTs. to benefits
	Medical expert reviews.	Medical report inviteus.	Medical expert reviews.		Medical expert reviews
25. Variability is quality		Enderdary standards, including any published standards as well as internal plan or rosser standards, relied upon to define the factors triggeting the application of an NOTS to benefits			
-	Name	Dataties - Oter	MA/MUD Outsider - Office Boord	Emergency Benefits	Prescription Single
Racial  1. Exception without team	Soptimes.  Southernies y Concluded any published Gendards as well as nervicel plan or source concluded, relied upon to define the factors (riggering the application of an MQTs, to benefits.	Outpatient - Other Purietting y candidatel, including any published standards as well as interval plan or vision standards, when upon to define the factors triggering the application of an NOTE is benefits	Outpulsed - CHILL Missed  Notificative Standard and published dandards are well as interval plan or resum standards, reted upon to define the factors triggering the application of an NCPS. Its Severitics	amengancy services	Propagation angle
a manager annual contract	intermental contents of the co	and the second second and the second	to control to control and become an extra control but to control control and the control and delivers in the self-or in extract.		
2. High levels of variation is length of day	Enderstary Strukturis, including any published standards as well as internal plan or rower standards, reflect upon to define the factors taggering the application of an NOTE, to benefits	Enderdany standards, including any published standards as well as internal plan or rower standards, wheel upon to define the factors triggering the application of an NCPS. In benefits	tridentiary standards, including any published standards as well as internal plan or rower standards, reflect upon to define the factors triggering the application of an MSYS. In benefits		
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6. Not Applicable	Not applicable				No. Applicable
1. Service type	bridentiary standards, including any published standards as well as internal plan or rower standards, reted upon to define the factors triggering the application of an NZSS. to benefits	Enderdary standards, including any published standards as well as internal plan or rosser standards, relied upon to define the factors triggeting the application of an NOTS to benefits	tredentary standards, including any published standards as well as internal plan or resure standards, reted upon to define the factors triggering the application of an NOTS. In benefits		
6. Severity or chronostry of an illness	bridentary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NOSTs. to benefits	bidentary standards, including any published standards as well as internal plan or rouser standards, eried upon to define the factors triggering the application of an MCPS to benefits	Evidentiary standards, including any published standards as well as internal plan or recent clandards, reflect upon to define the factors triggering the application of an NCPS. In benefits		

Evidentiary Standards Outlier Management

		Med/Surg Med/Surg		
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits Prescription Drugs
		MH/SUD		
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits Prescription Drugs
Excessive utilization	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	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.	Utilization is two standard deviations above average utilization per episode of care.	Utilization is two standard deviations above average utilization per episode of care.	
2. High levels of variation in length of stay	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	
3. Least restrictive appropriate level of care	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	
4. Not Applicable	Not Applicable			Not Applicable
5. Service type	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	
6. Severity or chronicity of an illness	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	
7. Variability in quality	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	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.	Utilization is two standard deviations above average utilization per episode of care.	Utilization is two standard deviations above average utilization per episode of care.	

#### **Prior Authorization/Pre-Authorization**

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Nursing Facility: Dietary services  Nursing Facility: Laboratory, radiology and other diagnostic testing  Nursing Facility: Nursing services  X  Nursing Facility: Nursing services  X  Nursing Facility: Physician services  X  Nursing Facility: Physician services  X  Nursing Facility: Physician services  X  Nursing Facility: Specialized rehabilitation  X  Nursing Facility: Physician services  X  Nursing			Х				
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Outpatient hospital care (non-emergent)		Х
Outpatient Rehabilitative services		Х
Outpatient Surgery (Ambulatory Surgery Center)		Х
Pain Management Procedures		Х
Physical Therapy		Х
Plastic and Restorative Surgeryinpatient	X	
Plastic and Restorative Surgeryoutpatient		Χ
Post-Stabilization Services-inpatient	X	
Proton Therapy Treatment		Χ
Pulmonary Rehab		Χ
Rehabilitation Services (Acute)	X	
Somatic services related to gender dysphoria		Х
Speech Therapyoutpatient		Χ
Spinal Cord Stimulator	X	
Sterlization servicesinpatient	X	
Surgery (nonurgent)inpatient	X	
Transplants	X	
Transplants Pre and Post Transplant Services	X	
Transplants Pre and Post Transplant Servicesoutpatient		Х

MH/SUD				
Benefit	Inpatient Outpatient - O	her Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Acute Care Services	X			
Ambulatory detoxification		X		
Biofeedback		X		
Electroconvulsive therapy (ECT)outpatient		X		
Evaulation and Management-Outpatient		X		
Family Therapyoutpatient		X		
FFS MH Drug				X
FFS SUD drug				X
Group therapyoutpatient		X		
Group therapyoutpatient		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 therapyoutpatient		X		
Individual therapyoutpatient		X		
Inpatient ASAM 4.0	X			
Inpatient Detoxificationhospital	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			
nursing facility: mental health services	X			
Nursing Facility: SUD 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		
Psychiatric Rehabilitation Services		X		
Psychological or neuropsychological testing and evaluation		X		
Residential SUD TreatmentASAM 3.1	X			
Residential SUD TreatmentASAM 3.3	X			
Residential SUD TreatmentASAM 3.5	X			
Residential SUD TreatmentASAM 3.7	X			
Residential SUD TreatmentASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	^ Y			
Residential Treatment Centers	^ V			

:	Special Psychiatric Hospital	X		
	Fargeted Case Management		X	
•	Therapeutic Behavioral Services			Χ
	Transcranial Magnetic Stimulation (TMS)			Χ
-	Traumatic Brain Injury (TBI) Day Habilitation			Χ

## Factors Prior Authorization/Pre-Authorization

Med/Surg					
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	<b>Emergency Benefits</b>	Prescription Drug
Claim types with high percentage of fraud		R	R		R
clinical appropriateness/medical necessity					R
Current and projected demand for services		R	R		R
Elasticity of demand		R	R		R
Excessive utilization		R	R		R
fail first protocol or requirement to try a generic, less expensive, or lower efficacy drug for a certain trial period before receiving approval for a new drug					R
High variability in cost per episode of care		R	R		
Lack of adherence to quality standards					R
Lack of clinical efficiency of treatment or service		R	R		R
medication status of preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					R
nationally recognized guidelines	R	R	R		
Not Applicable		R			R
Provider discretion in determining type or length of treatment					R
Recent medical cost escalation		R			R
Safety risks					R
Service type		R	R		
Severity or chronicity of an illness		R	R		R
MH/SUD					
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	<b>Emergency Benefits</b>	Prescription Drug
clinical appropriateness/medical necessity					R
fail first protocol or requirement to try a generic, less expensive, or lower efficacy drug for a certain trial period before receiving approval for a new drug					R
iscal responsibility/cost effectiveness					С
High levels of variation in length of stay			R		
Lack of clinical efficiency of treatment or service					С
Least restrictive appropriate level of care	R				
Least restrictive appropriate level of care			R		
Licensure, certification, accreditation and/or experience requirements for providers to join provider network					С
nedication status of preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					C
Not Applicable		R	R		C
Safety risks		IV.	11		r
Service type		D	D		C
···	R	U.	r.		6
Severity or chronicity of an illness	К	К	ĸ		C
Variability in quality			R		

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18 Outpatient - Office Rased Internal claims analysis State and Federal requirements Evidentiary standards, including an internal claims analysis. Medical expent reviews Evidentiary standards, including an Medical separt neviews Evidentiary standards, including an internal claims analysis. Medical separt reviews Matica open Trokes

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T Evidentiary Standards
Prior Authorization/Pre-Authorization

		The Additional Texade in the Control of the Control			
		Med/Surg			
Factor	Inpatient	Outpatient - Other	Outpatient - Office Rased	Emergency Benefits Prescription Drugs	
		MH/SUD			
Factor	Inpatient	Outpatient - Other	Outpatient - Office Rased	Ernergency Benefits Prescription Drugs	
1. clinical appropriateness/medical necessity				A certain number livor of recomized 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 Prescribins information and official compendium	
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization	
2. fall first protocol or requirement to try a generic, less expensive, or lower efficacy drug for a certain trial period before receiving approval for a new drug				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 Prescribins information and official compendium	
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization	
3. fiscal responsibility/cost effectiveness				A certain number/hope of recomined medical liberature 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 and official compendium	
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization	
4. Nigh levels of variation in length of stay			Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	hand the state of	
5. Lack of clinical efficiency of treatment or service			7	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 AGAM criteria or APA treatment guidelines.	
				Comparate in processors of processors of the comparation and the comparation of the compa	
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization	
G. Least restrictive appropriate level of care	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.			h or sea standarful or second from a maintain resident or a barrebour a management and active a barrebour and a barrebour a barrebour and a barrebour and a barrebour a barrebour and a barrebour a barrebour and a barrebour and a barrebour	
To be desired appropriate free of large   7. Least certificity appropriate free of care	Companies with processorally recignate determine governments and as determined appropriate statistics of care such as Asian Criteria or Aria research, gardenine.		Compliance with professionally recognised treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.		
Lorenzus, certification, accretification and/or experience requirements for providers to join provider network			Companies was processoriany recognised treatment generates used to better commany appropriate commands to care south as Admit Control to Admit	A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.	
a. Literature, Let Literature, accretionation and or experience requirements on provinces and provinces recommended				A constant naturally part or recognizer to recognize to recognize to recognize to the constant and processored to constant processor and to constant processored to constant processor and to constant processor	
<ol><li>medication status of preferred drug list (PCL) as determined by the preferred drug program via recommendations by the P&amp;T committee</li></ol>				A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.	
				Compliance with professionally recognised treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines. FDA Prescribin in identation and official composition.	
				FDA Prescribing information and official compendium	
10. Not Applicable			Not Applicable		
11. Safety risks				A certain number/hype 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 AGAM criteria or APA treatment guidelines.	
				FDA Prescribing information and official compendium	
12. Service type		Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to deline clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.		
13. Severity or chronicity of an illness	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to deline clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	A certain number/hype 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 and official compendium	
				process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization	
14. Variability in quality			Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.		

#### **Operation Measures**

#### Prior Authorization/Pre-Authorization

Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Addressing workforce shortage issues	X				
Average denial rates for medical necessity for mental health and substance use disorder benefits, and medical/surgical benefits.	X	X	X		Х
Complaint tracking (enrollees and providers)		X			X
Degree of discretion exercised by utilization review staff	X				
Dollar spend trends		Х			X
evaluation of annual concurrent reviews and prior authorization reviews completed on a quarterly basis		Х			
Exception processes available for each NQTL requirement and when they may be applied.		Х	X		
Frequency potential treatments are reviewed to determined whether they are experimental and investigational					X
Frequency that authorization requirements are waived	X	Х	X		
Frequency with which reviews are conducted	X	Х			
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	Х	X		
Number of days or visits authorized per review	X				
Requirements for the qualifications of provider staff involved in reviews	X	Х	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	Х	X		
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews	X	Х	X		X
Utilization trends		Х	X		X
Whether and how discretion is allowed in applying each NQTL	х	Х	X		Х
MH/SUD					
Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	<b>Emergency Benefits</b>	Prescription Drugs
Authorization Denial Rates for MH/SUD	X	Х	X		
Authorization Denial Rates for MH/SUD			X		
clinical criteria applied based on FDA labeling and requirements and official compendium					Х
clinical criteria applied based on FDA labeling and requirements and official compendium					Х
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	X	Χ	X		
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	Х	Χ	X		
internal auditing 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					Х
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews					Х
Utilization trends					Х

# Service limitations Med/Surg

	Med/Surg					
Benefit		Inpatient	Outpatient - Other	Outpatient - Office Based	<b>Emergency Benefits</b>	Prescription Drugs
Home Visiting Services - Parenting/Support Services			Χ			
Not Applicable		X				
Pregnancy-related Services (OB Care)				X		
Primary Care				X		
	MH/SUD					
Benefit		Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Alcohol and/or drug assessment				X		
Ambulatory detoxification				X		
Biofeedback				X		
Evaulation and Management-Outpatient				X		
Family Psycho-Educational Therapy				X		
Family Therapyoutpatient				X		
Group therapyoutpatient				X		
Group therapyoutpatient				X		
Health Behavior Assessment				X		
Health Behavior Reassessment				X		
Individual therapyoutpatient				X		
Individual therapyoutpatient				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		
Mental health assessment				Х		
Mental health reassessment				X		
Methadone Maintenance				X		
Mobile treatment-Assertive community treatment (ACT)			Х			
Mobile treatment-non-ACT			Х			
Multiple family group therapy				X		
Not Applicable		Х	Х			
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)				×		
Partial Hospitalization (PHP)ASAM 2.5				X		
Psychiatric Rehabilitation Services				×		
Psychological or neuropsychological testing and evaluation				X		
Targeted Case Management			V	^		
			X	V		
Therapeutic Behavioral Services				X		

#### Sources

#### tiered drug formulary Med/Surg

Factor	Inpatient	t Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
1. absence of formulary alternative or failure to respond to formulary medication					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. clinical appropriateness/medical necessity					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. fiscal responsibility/cost effectiveness					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. Lack of clinical efficiency of treatment or service					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. medication status of preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					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. Safety risks					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
				MH/SUD	
Factor	Inpatient	t Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
1. clinical appropriateness/medical necessity					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
					State and Federal requirements
2. Excessive utilization					Internal claims analysis
3. fiscal responsibility/cost effectiveness					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
					State and Federal requirements
4. Lack of clinical efficiency of treatment or service					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
					State and Federal requirements
5. medication status of preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					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
					State and Federal requirements
6. Safety risks					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
					State and Federal requirements
7. Service type					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
					State and Federal requirements

#### **Evidentiary Standards**

#### tiered drug formulary

tiered drug formularly									
				Med/Surg					
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs				
				MH/SUD					
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs				
1. clinical appropriateness/medical necessity					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 and official compendium				
					process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization				
2. Excessive utilization					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 and official compendium				
					process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization				
3. fiscal responsibility/cost effectiveness					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 and official compendium				
					process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization				
4. Lack of clinical efficiency of treatment or service					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 and official compendium				
					process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization				
5. medication status of preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					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 and official compendium				
6. Safety risks					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 and official compendium				
					process review(s) for auditing claims data to ensure compliance of a participant's treatment and service plan in conjunction with their prior authorization				
7. Service type					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 and official compendium				