Conc	urrent Review Med/Surg				
Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Dru
1915c: nursing (private duty) (21+ years of age)		Х			
Acupunture			Х		
Acute Care Services (Births/Deliveries)	Х				
Acute Care Services (Medical/Surgical)	Х				
Applied Behavior Analysis (autism services)primarily in-home		Х			
Audiology Services (hearing loss assessment and treatment)			Х		
Autism: adult life planning		Х			
Autism: Environmental accessibility adaption		Х			
Autism: Family leave (retainer day)		Х			
Autism: family training		Х			
Autism: Intensive individual support services		Х			
Autism: Residential habilitation (regular and intensive)		Х			
Autism: Respite care		Х			
Autism: Therapeutic integration (regular and intensive)		Х			
Bariatric Surgery	х				
Brain Injury: Day habilitation		х			
Brain injury: Individual support services		X			
Brain injury: medical Day Care		X			
Brain Injury: Residential habilitation		x			
Brain injury: Supported employment		X			
Cardiac Rehabilitation		A	Х		
CFC: Accessibility adaptations		Y	~		
CFC: assistive technology		×			
		×			
CFC: Consumer training CFC: environmental assessments		X			
CFC: home delivered meals		×			
		X			
CFC: Personal emergency response system		X			
CFC: Transition services		X	X		
Chemotherapyoutpatient		N/	Х		
Community Pathways and Community Supports waivers: Assistive technology and services		X			
Community Pathways and Community Supports waivers: Behavioral support services		X			
Community Pathways and Community Supports waivers: Career exploration		X			
Community Pathways and Community Supports waivers: Community development		X			
Community Pathways and Community Supports waivers: Day habilitation		X			
Community Pathways and Community Supports waivers: Employment discovery and customization		X			
Community Pathways and Community Supports waivers: Employment services		X			
Community Pathways and Community Supports waivers: Environmental assessment		Х			
Community Pathways and Community Supports waivers: Environmental modification		Х			
Community Pathways and Community Supports waivers: Family and peer mentoring supports		Х			
Community Pathways and Community Supports waivers: Family caregiver training and empowerment		Х			
Community Pathways and Community Supports waivers: Housing support services		Х			
Community Pathways and Community Supports waivers: Individual and family directed goods and services		Х			
Community Pathways and Community Supports waivers: Medical Day Care		Х			
Community Pathways and Community Supports waivers: Nurse case management and delegation		Х			
Community Pathways and Community Supports waivers: Nurse consultation		Х			
Community Pathways and Community Supports waivers: Nurse health case management		Х			
Community Pathways and Community Supports waivers: Participant education, training and advocacy		Х			
Community Pathways and Community Supports waivers: Personal supports		Х			
Community Pathways and Community Supports waivers: Respite care services		Х			
Community Pathways and Community Supports waivers: Support broker services		Х			
Community Pathways and Community Supports waivers: Supported employment		Х			
Community Pathways and Community Supports waivers: Transportation		Х			
Community Pathways and Community Supports waivers: Vehicle modification		Х			

Benefits

Community Pathways only: community living		Х
Community Pathways only: live-in caregiver supports		Х
Community Pathways only: Remote support services		Х
Community Pathways only: Shared living		Х
Community Pathways only: Support living		Х
Community Pathways only: transition services		Х
CPAS and CFC: Nurse monitoring		Х
CPAS and CFC: Personal assistance services		Х
Disposable Medical Equipment (w/o HCPCS)		Х
Disposable Medical Supplies (> \$500.00)		Х
Durable Medical Equipment (> \$1,000.00)		Х
Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS)		Х
Durable Medical Equipment (w/o HCPCS)		Х
Durable Medical Equipment rental (≤ 3 months)		х
EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician)		Х
Family Supports: Assistive technology and services		х
Family Supports: Behavioral support services		Х
Family Supports: Environmental assessment		Х
Family Supports: Environmental modification		х
Family Supports: Family and peer mentoring supports		х
Family Supports: Family caregiver training and empowerment		х
Family Supports: Housing support services		х
Family Supports: Individual and family directed goods and services		х
Family Supports: Nurse case management and delegation		х
Family Supports: Nurse consultation		X
Family Supports: Participant education, training and advocacy		X
Family Supports: Personal supports		х
Family Supports: Respite care services		X
Family Supports: Support broker services		X
Family Supports: Transportation		X
Family Supports: Vehicle modification		X
Gender affirmation surgery	х	
HCBS: Assisted living		х
HCBS: Behavioral consultation		X
HCBS: case management		х
HCBS: family training		х
HCBS: Medical Day Care		х
HCBS: Nutritionist/Dietician		X
HCBS: senior Center Plus		х
HH: Home Health Aide		х
HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing)		х
HH: Home Health Aide (< 1 visit per day; < 4 hours of service per day; visit w/ skilled nursing; services rendered during a 30-day period that do not exceed the Medicaid NF rate)		х
HH: Occupational therapy		x
HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate))		x
HH: Occupational therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)		x
HH: physical therapy		x
HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate)		x
HH: Physical therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)		X
HH: Registered Nurse HH: registered Nurse		X X
HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)		X
HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)		X
HH: Speech therapy		X
HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)		X
HH: Speech therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)		X
Home Health Services: occupational therapy Home Health Services: physical therapy		X
		Х

N (*)	10117300	lanal test of	Autoritant Other	0
	MH/SUD			
Transplants Pre and Post Transplant Services		Х		
Transplants		X		
Speech Therapyoutpatient				
Remote Patient Monitoring			Х	
Rehabilitation Services (Acute)		Х		
Pulmonary Rehab				
Plastic and Restorative Surgeryinpatient		Х		
Physical Therapy				
Pain Management Procedures				
PACE: Transportation			Х	
PACE: Social work			Х	
PACE: Recreation			Х	
PACE: Personal care			Х	
PACE: Nursing care			Х	
PACE: Meals			Х	
PACE: In-home care			Х	
PACE: Day health care			Х	
Oxygen (w/o HCPCS)			Х	
Outpatient Rehabilitative services				
Occupational Therapy				
Nursing Facility: Specialized rehabilitation		Х		
Nursing Facility: Social work		Х		
Nursing Facility: Physician services		Х		
Nursing Facility: Pharmaceutical services		Х		
Nursing Facility: Nursing services		Х		
Nursing Facility: Laboratory, radiology and other diagnostic testing		Х		
Nursing Facility: Dietary services		Х		
Nursing Facility: Dental services		Х		
Nursing Facility: Activities		Х		
Medical Day Care waiver with associated services(16+ years of age):			Х	
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)		Х		
ICS: senior Center Plus			Х	
ICS: Nutritionist/Dietician			Х	
ICS: Medical Day Care			Х	
ICS: Family training			Х	
ICS: case management			Х	
ICS: behavioral consultation			Х	
ICS: Assisted living			Х	
Hysterectomy		Х		
Hospital Careinpatient		х		
Hospice CareInpatient		х		
Hospice: Short-term inpatient care		х		
Hospice: nursing services			Х	
Hospice: Medical social services			Λ	
			Х	
Hospice: Medical appliances and supplies			X	

Acute Care Services Ambulatory detoxification Biofeedback Electroconvulsive therapy (ECT)--outpatient Evaulation and Management-Outpatient Family Therapy--outpatient Group therapy--outpatient Group therapy--outpatient Individual therapy--outpatient Benefit

Inpatient Outpatient - Other X

outpatient

X X

Х

Х

Outpatient - Office Based

Emergency Benefits

Prescription Drugs

X X

Х

Х

Х

Х

Х

х

х

Individual therapyoutpatient Inpatient ASAM 4.0 Inpatient Detoxificationhospital Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	x x x	
Intensive outpatient (IOP)		
Intensive Outpatient (IOP)ASAM 2.1		
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)		
MAT Initial Intake (Evaluation and Management, Including Rx)		
MAT Ongoing (Evaluation and Management, including Rx)		
Methadone Maintenance		
Mobile treatment-Assertive community treatment (ACT)		Х
Mobile treatment-non-ACT		Х
Multiple family group therapy		
Not Applicable		Х
Nursing Facility: MH Services	Х	
Nursing Facility: SUD services	Х	
Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified		
Partial hospitalization (PHP)		
Psychiatric Rehabilitation Services		
Psychological or neuropsychological testing and evaluation		
Residential SUD TreatmentASAM 3.1	Х	
Residential SUD TreatmentASAM 3.3	Х	
Residential SUD TreatmentASAM 3.5	Х	
Residential SUD TreatmentASAM 3.7	Х	
Residential SUD TreatmentASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	Х	
Residential Treatment Centers	Х	
Special Psychiatric Hospital	Х	
Targeted Case Management		Х
Therapeutic Behavioral Services		
Transcranial Magnetic Stimulation (TMS)		
Traumatic Brain Injury (TBI) Day Habilitation		

x

Х

- x
- x x
- x x
- X
- X X
- x x

- X X X

		Evidentiary Standards Concurrent Review Medizang	
Factor 1. Excessive utilization	Inpatient Compliance with professionally recomband treatment exidelines used to define clinically appropriate standards of care such as ASAM oriteria or APA treatment exidelines.	Outpatient - Other Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	Outpatient - Office Based
2. Health plan accreditation standards for quality assurance	compliance with protessionary recognized orealment guidelines used to deline clinicary appropriate scandards or care social as ASAW criteria or ASA recomment guidelines.	Compliance with protessionally recognized instantine government such of the clinically appropriate standards of care such as ASM riteria or APK treatment governmes. Compliance with protessionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASM riteria or APK treatment guidelines.	
3. Medicare/Medicaid program participation eligibility		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	
5. Quality and performance measures (including customer feedback)		Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	
 Safety risks Separate payments for managing a patient's care outside of face-to-face contact (e.g., care management) 		Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAMI criteria or APA treatment guidelines.	
 Separate payments for managing a patient's care outside of face-to-face contact (e.g., care management) 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 audelines used to define clinically accordiate standards of or are such as ASAM criteria or APA treatment guidelines.	
8. Service type	A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.	Lompliance with protessionally recognized treatment guidelines used to define clinically appropriate standards or care such as ASAM criteria or APA treatment guidelines.	
		MH/SUD	
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based
1. clinical indications or evidence		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
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
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
4. Not Applicable	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
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 t
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. Utilization is two standard deviations above average utilization per replacedo of care.	Compliance with professionally recognized treatment guidelines used t
		Construction of two summands deviations above average dentations per episode of care.	

ner and to define driving appropriate standards of ore and a NAMI officiar of AMI mathemet gladinase is easien to define driving appropriate standards of ore such a NAMI officiar of AMI mathemet gladinase, the search of define driving appropriate standards of ore such a NAMI officiar of AMI mathemet gladinase, end are define driving appropriate standards of ore such a NAMI officiar of AMI mathemet gladinase end are define driving appropriate standards of ore such a NAMI officiar of AMI mathemet gladinase end are define driving appropriate standards of ore such a NAMI officiar of AMI mathemet gladinase end are define driving appropriate standards of ore such a NAMI officiar of AMI mathemet gladinase end are defined driving appropriate standards of ore such a NAMI officiar of AMI mathemet gladinase. Emergency Benefits Prescription Drugs

Emergency Benefits Prescription Drugs

		Sources			
	Fa	first requirements/step therapy			
		Med/Surg			
Factor 1. Claim types with high percentage of fraud	Inpatient Outpatient - Other		Outpatient - Office Based	Emergency Benefits	Prescription Drugs 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 Internal market and competitive analysis
					Internal market and competitive analysis Medical expert reviews
					National accreditation standards State and Federal requirements
2. Current and projected demand for services					state and repertal requirements 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 Internal market and competitive analysis
					Medical expert reviews
					National accreditation standards State and Federal requirements
3. Elasticity of demand					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 Internal market and competitive analysis
					Medical expert reviews
					National accreditation standards State and Federal requirements
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
					Internal claims analysis Internal market and competitive analysis
					Medical expert reviews National accreditation standards
					State and Federal requirements
5. fail first protocol					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
					Internal market and competitive analysis
					Medical expert reviews National accorditation standards
					State and Federal requirements
6. High variability in cost per episode 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 Internal claims analysis
					Internal market and competitive analysis
					Medical expert reviews National accreditation standards
					State and Federal requirements
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 Internal claims analysis
					Internal market and competitive analysis
					Medical expert reviews National accreditation standards
8. Lack of clinical efficiency of treatment or service					State and Federal requirements 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
a. Latk of clinical endering of deautient of service					Internal claims analysis
					Internal market and competitive analysis Medical expert reviews
					National accreditation standards
9. Not Applicable	Not Applicable				State and Federal requirements Not Applicable
1.0. Provider discretion in determining diagnosis	to gradue				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 Internal market and consettive analysis
					Medical expert reviews
					National accreditation standards State and Federal requirements
11. Recent medical cost escalation					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 Internal market and competitive analysis
					Medical expert reviews National accreditation standards
					State and Federal requirements
12. Recognition of accreditation by certain accrediting bodies					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
					Internal market and competitive analysis
					Medical expert reviews National accreditation standards
					State and Federal requirements
13. 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 Internal claims analysis
					Internal market and competitive analysis
					Medical expert reviews National accerditation standards
14. Severity or chronicity of an illness					State and Federal requirements
14. Severity or chronicity of an inness					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
					Internal market and competitive analysis
					Medical expert reviews National accreditation standards
					State and Federal requirements
		MH/SUD			
Factor 1. fail first protocol	Inpatient Outpatient - Other		Outpatient - Office Based	Emergency Benefits	Prescription Drugs 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
2. Internal auditing for treatment compliance via concurrent review of treatment plans and medical documentation					State and Federal requirements Internal claims analysis
3. 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
4. medication status on 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

5. Not Applicable

6. Safety risks 7. Service type

8. Severity or chronicity of an illness

9. Site visit requirements

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

State and Federal requirements

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, 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, 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

			Fail first r	requirements/step t	cherapy
				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. fail first protocol					A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies a
					Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as A FDA prescribing information and official compendium
					process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with the
2. internal auditing for treatment compliance via concurrent review of treatment plans and medical documentation					A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies
					Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as AS
					FDA prescribing information and official compendium
					process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with th
3. Lack of clinical efficiency of treatment or service					A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies a Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as A
					FDA prescribing information and official compendium
					process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with the
4. medication status on 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 a
					Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as A
					FDA prescribing information and official compendium
5. Not Applicable			Not Applicable		
6. Safety risks					A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies a
					Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as AS FDA prescribing information and official compendium
7. Service type					A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies a
					Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as A
					FDA prescribing information and official compendium
8. Severity or chronicity of an illness					A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies
					Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as A
					FDA prescribing information and official compendium
					process review(s) for auditing claims data to ensure compliance of participant's treatment and service plan in conjunction with th
9. Site visit requirements					A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies a Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as AS
					FDA prescribing information and official compendium
					To the contraction of the other compensation

idies and clinical trials), and published research studies. as ASAM criteria or APA treatment guidelines.

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Operation Measures

Fail first requirements/step therapy

Med/Surg		
Measure	Inpatient Outpatient - Other Outpatient - Office Based Emergency Benefits Prescrip	ription Drug
Addressing workforce shortage issues		Х
Average denial rates for medical necessity for mental health and substance use disorder benefits, and medical/surgical benefits.		Х
clinical criteria applied based on FDA labeling and requirements and official compendium		Х
Complaint tracking (enrollees and providers)		Х
Degree of discretion exercised by utilization review staff	Х	Х
How the health plan verifies credentials of its staff conducting medical management/utilization review		Х
nter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers		Х
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria		Х
internal monitoring of prior authorizations to determine compliance of treatement/service plans for drug efficacy based on concurrent review of treatment plans, service usage and drug utilization		Х
Length of time afforded for each review		Х
NQTL does not apply to any services in this classification	х	
NQTL does not apply to any services in this classification	х	
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.		Х
Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews		Х
Jtilization trends		х
MH/SUD		
Measure	Inpatient Outpatient - Other Outpatient - Office Based Emergency Benefits Prescrip	ription Drug
Authorization Denial Rates for MH/SUD	x	
linical criteria applied based on FDA labeling and requirements and official compendium		Х
nter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	x	
nternal audit findings related to coverage determination consistency with the plan's medical necessity criteria	x	
nternal monitoring of prior authorizations to determine compliance of treatement/service plans for drug efficacy based on concurrent review of treatment plans, service usage and drug utilization		Х
NQTL does not apply to any services in this classification	x	
NQTL does not apply to any services in this classification	x	
NQTL does not apply to any services in this classification	x	
NQTL does not apply to any services in this classification	X	
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

X X

Benefits					
Medical necessity Med/Surg					
Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
reventive services (cleanings, fluoride, etc.) - Clinic; reventive services (semiannual cleanings, fluoride, etc.) - Clinic;			X X		
iagnostic services (services (services (services called and services (services (servic			×		
reventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;		х	~		
iagnostic services (coral exams, x-rays, sealants, etc.) - Clinic;		X	х		
estorative services (filings, crowns, etc) - Clinic;			x		
iagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;		х			
ndodontic services (root canals, etc.) - Clinic;			х		
eriodontal services (scaling, full mouth debridement, etc.) - Clinic;			х		
estorative services (filings, crowns, etc) - Clinic;			Х		
rosthodontics (adjustment of dentures, etc.) - Clinic;			Х		
estorative services (filings, crowns, etc) - OP OR/ASC;		х			
ndodontic services (root canals, etc.) - Clinic;			Х		
ral and Maxillofacial surgery services (extractions, etc.) - Clinic; and			Х		
nesthesia - Clinic.			Х		
ndodontic services (root canals, etc.) - OP OR/ASC;		Х			
eriodontal services (scaling, full mouth debridement, etc.) - Clinic;			X		
Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;		Х			
Prosthodontics (dentures, etc.) - Clinic;		X	X		
Prosthodontics (dentures, etc.) - OP OR/ASC; Oral and Maxillefacial surgery consists (extractions, etc.) - Clinic:		Х	v		
Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;		v	X		
Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC; Orthodontic services - Clinic;		^	×		
Anesthesia - Clinic; and			×		
Anesthesia - OP OR/ASC.		Y	*		
ic: case management		x			
ic: certified Nursing Assistant/Home Health Aide		x			
ic: medical Day Care		x			
ic: nursing (private duty) (21+ years of age)		x			
ic: physician participation in plan of care meeting			х		
ic: Physician participation in plan of care meeting			х		
Services			х		
bunture			х		
e Care Services (Births/Deliveries)	х				
e Care Services (Medical/Surgical)	Х				
utationsinpatient	Х				
utationsoutpatient			Х		
lary Services	Х				
thesiaInpatient	X				
ied Behavior Analysis (autism services)primarily in-home		X			
ied Behavior Analysis (autism services)primarily in-home		Х			
ology Services (hearing loss assessment and treatment)		X	Х		
nentive communication devices		X			
sm: adult life planning sm: Environmental accessibility adaption		X			
sm: Family leave (retainer day)		×			
sm: family training		x			
im: Intensive individual support services		x			
sm: Residential habilitation (regular and intensive)		x			
im: Respite care		х			
m: Therapeutic integration (regular and intensive)		х			
atric Surgery	х				
d/Blood Products			Х		
n Injury: Day habilitation		Х			
n injury: Individual support services		Х			
injury: medical Day Care		х			
Injury: Residential habilitation		Х			
injury: Supported employment		Х			
ss surgeryinpatient	Х				
ss surgeryoutpatient			X		
ule Endoscopy			Х		
ac Procedures (non-emergent)inpatient	Х				
iac Procedures (non-emergent)outpatient			X		
iac Rehabilitation		~	Х		
Management A second billing a daratation of		X			
Accessibility adaptations		X			
assistive technology		x			
		Х			
		V.			
Consumer training environmental assessments		x			
		x x			

CFC: Transition services Chemotherapy--inpatient Chemotherapy--outpatient Chiropractic Services Circumcision Clinic Services--Coumadin Clinic Clinic Services--FQHC Clinic Services--Heart Failure Clinic Clinic Services--Other Clinic Services--SBHC Clinic Services--Wound Clinic Community Pathways and Community Supports waivers: Assistive technology and services Community Pathways and Community Supports waivers: Behavioral support services Community Pathways and Community Supports waivers: Career exploration Community Pathways and Community Supports waivers: Community development Community Pathways and Community Supports waivers: Day habilitation Community Pathways and Community Supports waivers: Employment discovery and customization Community Pathways and Community Supports waivers: Employment services Community Pathways and Community Supports waivers: Environmental assessment Community Pathways and Community Supports waivers: Environmental modification Community Pathways and Community Supports waivers: Family and peer mentoring supports Community Pathways and Community Supports waivers: Family caregiver training and empowerment Community Pathways and Community Supports waivers: Housing support services Community Pathways and Community Supports waivers: Individual and family directed goods and services Community Pathways and Community Supports waivers: Medical Day Care Community Pathways and Community Supports waivers: Nurse case management and delegation Community Pathways and Community Supports waivers: Nurse consultation Community Pathways and Community Supports waivers: Nurse health case management Community Pathways and Community Supports waivers: Participant education, training and advocacy Community Pathways and Community Supports waivers: Personal supports Community Pathways and Community Supports waivers: Respite care services Community Pathways and Community Supports waivers: Support broker services Community Pathways and Community Supports waivers: Supported employment Community Pathways and Community Supports waivers: Transportation Community Pathways and Community Supports waivers: Vehicle modification Community Pathways only: community living Community Pathways only: live-in caregiver supports Community Pathways only: Remote support services Community Pathways only: Shared living Community Pathways only: Support living Community Pathways only: transition services Corrective Surgery--inpatient Corrective Surgery--outpatient Cosmetic Procedures--Inpatient Cosmetic Procedures/Surgeries--outpatient CPAS and CFC: Nurse monitoring CPAS and CFC: Personal assistance services Dermatology Procedures **Diabetic Education** Diagnostic and X-ray services: CT--inpatient Diagnostic and X-ray services: CT--outpatient Diagnostic and X-ray services: MRI--inpatient Diagnostic and X-ray services: MRI--outpatient Diagnostic and X-ray services: PET--inpatient Diagnostic and X-ray services: PET--outpatient Diagnostic and X-ray services: Radiography--inpatient Diagnostic and X-ray services: Radiography--outpatient Dialysis--Inpatient Dialysis--outpatient Disposable Medical Equipment (w/o HCPCS) Disposable Medical Supplies (> \$500.00) Disposable Medical Supplies (\leq \$500.00) DME/DMS Alternative Approach--Full category; need to identify any NQTLs that apply to any DME/DMS under the broad category. Description of NQTL factors should be more detailed. Durable Medical Equipment (> \$1,000.00) Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS) Durable Medical Equipment (w/o HCPCS) Durable Medical Equipment (≤ \$1,000.00) Durable Medical Equipment rental (> 3 months) Durable Medical Equipment rental (≤ 3 months) EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician) Erectile Dysfunction Procedures Eye Procedures--Inpatient Family Supports: Assistive technology and services Family Supports: Behavioral support services Family Supports: Environmental assessment Family Supports: Environmental modification

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Family Supports: Family and peer mentoring supports	
Family Supports: Family caregiver training and empowerment	
Family Supports: Housing support services	
Family Supports: Individual and family directed goods and services	
Family Supports: Nurse case management and delegation	
Family Supports: Nurse consultation	
Family Supports: Participant education, training and advocacy	
Family Supports: Personal supports	
Family Supports: Respite care services Family Supports: Support broker services	
Family Supports: Transportation	
Family Supports: Vehicle modification	
FFS M/S Drug	
Foster Care Evaluation/Check-up for children entering State custody	
Gender affirmation surgery	х
Genetic Counseling	
Genetic Testing	X
Grafts/Implants	х
Grafts/Implantsoutpatient HCBS: Assisted living	
HCBS: Behavioral consultation	
HCBS: behavioral consultation	
HCBS: case management	
HCBS: family training	
HCBS: Medical Day Care	
HCBS: Nutritionist/Dietician	
HCBS: nutritionist/Dietician	
HCBS: senior Center Plus	
Health-related services and targeted case management services provided to children when the services are specified in the child's Individualized Education Plan or Individualized Family Service Plan Hepatitis C Virus Genotyping	
HE: Home Health Aide	
HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing)	
HH: Home Health Aide (≤ 1 visit per day; ≤ 4 hours of service per day; visit w/ skilled nursing; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	
HH: Occupational therapy	
HH: Occupational therapy	
HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate))	
HH: Occupational therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	
HH: physical therapy	
HH: physical therapy	
HH: Physical therapy	
HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate)	
HH: Physical therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate) HH: Registered Nurse	
HH: registered Nurse	
HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)	
HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	
HH: Speech therapy	
HH: Speech therapy	
HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)	
HH: Speech therapy (<1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	
HIV/AIDS laboratory services	
Home and Community Based Options waiver:	
Home Health Services: medical supplies used for home heath visit Home Health Services: occupational therapy	
Home Health Services: physical therapy	
Home Health Services: skilled nursing services	
Home Health Services: speech pathology services	
Hospice: Counseling services (including dietary, spiritual and bereavement)	
Hospice: home health and aide services	
Hospice: Medical appliances and supplies	
Hospice: Medical social services Hospice: nursing services	
Hospice: Occupational therapy	
Hospice: Decepational analysis	
Hospice: Physician services	
Hospice: Short-term inpatient care	х
Hospice: Speech therapy	
Hospice CareInpatient	х
Hospice CareOutpatient	X
Hospital Careinpatient	х
Hyperbaric Oxygen Therapy Hysterectomy	х
Hysterectomy ICS: Assisted living	^
ICS: behavioral consultation	
ICS: Behavioral consultation	
ICS: case management	

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ICS: Family training Х ICS: Medical Day Care Х ICS: Nutritionist/Dietician Х ICS: Nutritionist/Dietician ICS: senior Center Plus Х Infusion/Maintenance Drug Infusion Institutional Long Term Care/Skilled Nursing Facility (first 90 days) Х Investigational Surgeries/Clinical Trials--inpatient Х Investigational Surgeries/Clinical Trials--outpatient Laboratory Services Х MCO administered prescription drug Medical Day Care Waiver with associated services Х Medical Day Care waiver with associated services(16+ years of age): х Molecular Pathology Labs х National Diabetes Prevention Program Х National Diabetes Prevention Program Services Nerve Stimulator--outpatient Neuro-Psychological Testing/Developmental Delay Programs х Neuro-Psychological Testing/Developmental Delay Programs Neurostimulators Х Neurosurgical procedures--inpatient Х Neurosurgical procedures--outpatient Newborn Office Services NICU/Sick baby/Detained baby Х Not Applicable 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 Х Nursing Facility: Pharmaceutical services Х Nursing Facility: Physician services х Nursing Facility: Social work Х Nursing Facility: Specialized rehabilitation Х Nutritional Counseling OB Ultrasound Occupational Therapy Occupational Therapy--inpatient х Oncology Services--inpatient х Oncology Treatment Oral Surgery Adult Oral Surgery Child Outpatient hospital care (emergent) Outpatient hospital care (non-emergent) Outpatient Rehabilitative services Outpatient Surgery (Ambulatory Surgery Center) Oxygen Х Oxygen (w/o HCPCS) х PACE: Day health care Х PACE: In-home care Х PACE: Meals Х PACE: Medical specialty services (podiatry, psychiatry, dentistry, optometry and audiology) PACE: Nursing care х PACE: Personal care PACE: Recreation х PACE: Rehabilitation PACE: Social work Х PACE: Transportation х Pain Management Procedures Pain Management Visits Personal Care Services х Physical Therapy Physical Therapy--inpatient х Plastic and Restorative Surgery--inpatient х Plastic and Restorative Surgery--outpatient Podiatry Services Post-Stabilization Services Post-Stabilization Services-inpatient Х Post-Stabilization Services-outpatient Pregnancy-related Services (OB Care) Primary Care Private Duty Nursing Х Proton Therapy Treatment Pulmonary Rehab Rehabilitation Services (Acute) Х Remote Patient Monitoring х

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Room and Board	Х	
Sleep Studies /Sleep Apnea Studies		
Somatic services related to gender dysphoria		
Specialty Care		
Speech Therapyinpatient	Х	
Speech Therapyoutpatient		
Spinal Cord Stimulator	Х	
Sterlization servicesinpatient	Х	
Sterlization Servicesoutpatient		
Surgery (nonurgent)inpatient	Х	
Surgery (urgent)inpatient	Х	
Targeted Case Management		х
Transplants	Х	
Transplants Pre and Post Transplant Services	Х	
Transplants Pre and Post Transplant Servicesoutpatient		
Transportation between hospitals	Х	
Urgent Care		
Vision Services		

Room and Board Sleep Studies /Sleep Apnea Studies		х	х		
Somatic services related to gender dysphoria			X		
Specialty Care			Х		
Speech Therapyinpatient		х	х		
Speech Therapyoutpatient Spinal Cord Stimulator		х	Λ		
Sterlization servicesinpatient		х			
Sterlization Services-outpatient			Х		
Surgery (nonurgent)inpatient Surgery (urgent)inpatient		X X			
Targeted Case Management		X			
Transplants		х			
Transplants Pre and Post Transplant Services Transplants Pre and Post Transplant Servicesoutpatient		х	х		
Transportation between hospitals		х	Λ		
Urgent Care			х		
Vision Services			X		
Wound Vacuum-assisted closure (VAC)			Х		
	MH/SUD				
Acute Care Services	Inpat		Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Acute Care Services Alcohol and/or drug assessment		х	х		
Anonomia and/or or dg assessment			x		
Ancillary Services		х			
Ancillary Services-SUD		x x			
AnesthesiaInpatient Anesthesia - Outpatient		X	х		
Biofeedback			X		
Buprenorphine guest dosing			Х		
Discharge Day Drug Testing		x			
Educational Therapy		^	Х		
Electroconvulsive therapy (ECT)inpatient		х			
Electroconvulsive therapy (ECT)outpatient			X		
Evaulation and Management-Outpatient Family Psycho-Educational Therapy			x x		
Family therapyinpatient		х	K		
Family Therapyoutpatient			Х		
Family therapy—SUD inpatient		х			×
FFS MH Drug FFS SUD Drug					x x
Group therapyinpatient		х			
Group therapyoutpatient			Х		
Group therapy—outpatient Group therapy—SUD inpatient		x	Х		
Health Behavior Assessment		~	Х		
Health Behavior Reassessment			Х		
health home services for MH reasons (serious and persistent mental illness (SPMI) - services by mobile treatment services (MTS) or psychological rehabilitation programs			X X		
health home services for SUD (opioid addiction) - opioid treatment program Individual Psycho-Educational Therapy			X		
Individual therapyinpatient		х			
Individual therapy-outpatient			X		
Individual therapyoutpatient Individual therapy—SUD inpatient		x	х		
Inpatient ASAM 4.0		X			
Inpatient Detoxificationhospital		x			
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland) Intensive outpatient (IOP)		Х	х		
Intensive Outpatient (IOP)ASAM 2.1			X		
Laboratory Services		х			
Laboratory Services		Х	, v		
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting) MAT Initial Intake (Evaluation and Management, Including Rx)			X X		
MAT Ongoing (Evaluation and Management, including Rx)			x		
Mental health assessment			х		
Mental health reassessment			X X		
Methadone guest dosing Methadone Maintenance			x X		
Mobile treatment-Assertive community treatment (ACT)		Х			
Mobile treatment-non-ACT		Х			
Multiple family group therapy Not Applicable			Х	x	
Nursing Facility: MH Services		х		^	
Nursing Facility: SUD services		х			

Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified	
Opioid Treatment Program (OTP) services - including med management	
Partial hospitalization (PHP)	
Partial Hospitalization (PHP)ASAM 2.5	
Patient Consultation	Х
Peer Support Services	
primary mental health services (assessment, clinical evaluation, referral to ASO)	
primary SUD Services (assessment, clinical evaluation, referral to ASO)	
Psychiatric Rehabilitation Services	
Psychological or neuropsychological testing and evaluation	
Psychological or neuropsychological testing and evaluationinpatient	Х
Residential SUD TreatmentASAM 3.1	Х
Residential SUD TreatmentASAM 3.3	Х
Residential SUD TreatmentASAM 3.5	Х
Residential SUD TreatmentASAM 3.7	Х
Residential SUD TreatmentASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	Х
Residential Treatment Centers	Х
SBIRT	
Special Psychiatric Hospital	Х
Targeted Case Management	
Therapeutic Behavioral Services	
The assessed at the second s	

Transcranial Magnetic Stimulation (TMS) Traumatic Brain Injury (TBI) Day Habilitation

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Factors

Med/Surg	-				
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
Claim types with high percentage of fraud					R
clinical appropriateness/medical necessity					R
Current and projected demand for services		R	R		
Elasticity of demand					R
Excessive utilization	R	R	R		R
fiscal responsibility/cost effectiveness					R
High variability in cost per episode of care		R	R		R
Lack of adherence to quality standards		R	R		R
Lack of clinical efficiency of treatment or service		R	R		R
Medicare/Medicaid program participation eligibility		R	R		
medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					R
Not Applicable		R		R	
Provider discretion in determining diagnosis					R
Provider discretion in determining type or length of treatment					R
Recent medical cost escalation					R
Recognition of accreditation by certain accrediting bodies					R
Relative reimbursement rates		R	R		
Safety risks					R
Service type	R	R	R		
Severity or chronicity of an illness		R	R		R
MH/SUD					
Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
clinical appropriateness/medical necessity					R
fiscal responsibility/cost effectiveness					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		
Least restrictive appropriate level of care		R			
medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					R
Not Applicable		R		R	
Service type	R	R	R		
Severity or chronicity of an illness	R	R	R		
Variability in quality	R	R	R		

			Sources Medical necessity	
15C57	Sigura A	Cuputerd - 2054r	Medylwy Cupatert-Office Raed	Energency Rendits
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8. Current and projected demand for services		Medical expert strates	Nationizary conclusio, including any published Examinations well as unevent plane or iscure classically, when you to define the factors traggering the application of an NDYs. To benefits Internal classes analyzes Toternal and and an advectory analyses	
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7. High variability in cost per episode of care		Endentary candids, including any published candids as well as interval plan or isoner candids, index upon to define the factor triggering the application of as toget, to keepfix	Indextary Candack, including any publicled Eandardcas well as internal plan or knew candards, ented upon to define the factors traggering the application of an NQPs to benefits. Internal cases analysis	
R Lack of adherence to quality standards		tedestary standards, including any published standards as well as intervial plan or issuer standards, reled upon to define the factors triggering the application of an N271 to benefit	hadrotary clandard, including any published clandards is well as internal plan or issuer clandards, releal upon to define the factors toggining the application of an index. Is benefits totenal clans calapies Medicine and revens	
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12. Medicary/bedical program participation eligibility 11. medication status on preferred any list (PCL) is determined by the preferred ding program via incommendations by the PAC committee		Enderstary candidely, including any publiched candiditi so well as interval plan or knew candiditi, robel upon to define the factor traggering the application of an 1927; to benefits	1004 and Medical requirements	
12. Not Applicable 13. Provider distribution is determining diagnosis		Nut Applicable		
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11 Provider distribution in determining type or length of sourcework				
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18. Safety rola			Medicare physican des chedules	
11. Sanos type	Kith ad Nabid Ingustration	Naketary thulada, na kuly any publical candrat and a strate give a trace candral, when you take the factor typing of a spectrum of a toty, to knowle	Kite withheld expenses	
20. Sevently or chronicity of an illiness		tedestary standards, including any published standards as well as intervial plan or issuer standards, relief upon to define the factors triggering the application of an N271 to benefit	todestary tandack, including any published standacks well as internal plan or issuer standack, roled upon to define the factors triggering the application of an NQTs. to benefits Medical expert reviews	
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Factor 1. clinical appropriateness, line-dical networky	2 million de la companya de la compa	Dulpabelt - Other	Duppliest - Office Rained	Emergency Benefits
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is. Least networke appropriate level at care 7. medication status or preferred drug bit (PSC) as determined by the preferred drug program via reciammendations by the P&T committee 8. Not Applicable		haldentary canadady, including any published standards are well as internal plan or issuer standards, releal upon to define the factors triggering the application of an HSTs to benefits Not Audiocable		
R. Not Application B. Service Topie 23. Services of Chronolicity of An Illines	Enderstary tandards, including any publicled strutation is well as interval places insure standards, enled upon to define the factors triggering the application of an N275 to benefits Enderstary tandards, including any publicked standards is well as interval places insure standards, ended upon to define the factors triggering the application of an N275 to benefits	Not opportable Individually including any publiched standards is well as internal plan or Kouer standards, relead upon to define the factors triggering the application of an NETX to benefits Individually calculated, excluding any publiched standards is well as internal plan or kouer standards, relead upon to define the factors triggering the application of an NETX to benefits	Indentary conducts, including any publiched standards is well as internal plan or scient standards, reted upon to define the factors organing the application of an NSYs to benefits Indentary conducts, including any publiched standards is well as internal plan or scient standards, reted upon to define the factors organing the applications of an NSYs to benefits	
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	meturgion requ Existerior promotio, including any published candinols as well as moving plus or isoure candinols, reliad upon to define the factors taggering the application of an VBT to benefits Medical ingent reveals Existerior promotion, encluding any published candinols as well as moving plus or isoure candinols, relief upon to define the factors taggering the application of an VBT. To benefits
tion of an NETS to benefit:	
	trudentary standards, including any published standards as well as internal plan or issuer standards, reled upon to define the factors toggering the application of an MQTs to benefits

		Evid	dentiary Standards	
			Medical necessity	
			Med/Surg	
Factor	Inpatient	Outpatient - Other		Outpatient - Office Based
1. Current and projected demand for services				A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
2. Excessive utilization	Compliance with professionally recognized breatment 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 to so stander devices above average utilization per espicede of care.
3. High variability in cost per episode of care				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.
Lack of adherence to quality standards				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				Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
6. Medicare/Medicaid program participation eligibility				A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
				State regulatory standards for health plan network adequacy.
7. Belative reimbursement rates				Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
8. Service type 9. Severity or chronicity of an illness	A certain number/type of necogrized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.			A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies. A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.
a. Severity of Choncey of an inness				Conciliance (right or recognized instant meaning and plantamental manufactorial) according to the plantament meaning and plantament
				Companies was provisionally incognized creations guarantee and any appropriate summaries of care such as Adom Cristian of PPP treatment guarantee.
			MH/SUD	
Factor	Inpatient	Outpatient - Other		Outpatient - Office Based
 High levels of variation in length of stay Lack of clinical efficiency of treatment or service 	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.
 Lack or carecal emcency or treatment or service Least restrictive appropriate level of care 	Compliance with professionally recommend treatment audielines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment audielines.			Compliance with professionally recommized treatment puddelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment euidelines.
 Least restrictive appropriate level of care 	Comparate who providence in the providence of the contrast of the contrast of the second of the seco	Compliance with professionally recomized treatment suidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment suidelines.		Companies was provisionally incognized orientering galactering dated to dening cancers y spin-prime standards of care such as Advertising on Port orientering galactering.
5. Service type	Compliance with professionally recomized treatment sudelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment sudelines.	Compliance with professionally recommized treatment suddelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment suddelines.		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.

Emergency Benefits

Emergency Manufes Compliance with productionally recognized treatment guidelines used to define cloically appropriate standards of care such an ASAM orderius rAPA treatment guidelines. Prescription Drugs

Prescription Drugs

Operation Measures Medical necessity Med/Surg Measure Inpatient Outpatient - O Addressing workforce shortage issues Average denial rates for medical necessity for mental health and substance use disorder benefits, and medical/surgical benefits. х Average length of stay authorized per episode of care Х clinical criteria applied based on FDA labeling and requirements and official compendium Complaint tracking (enrollees and providers) Degree of discretion exercised by utilization review staff Х Х duplicate restorations (monthly Frequency that authorization requirements are waived Frequency with which reviews are conducted Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers Х Х Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria х х internal monitoring of prior authorizations to determine compliance of treatement/service plans for drug efficacy based on concurrent review of treatment plans, service usage and drug utilization Length of time afforded for each review NQTL does not apply to any services in this classification Number of days or visits authorized per review х 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. Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews Utilization trends Х Х MH/SUD Measure Inpatient Outpatient - Of Authorization Denial Rates for MH/SUD Х Х Authorization Denial Rates for MH/SUD Х clinical criteria applied based on FDA labeling and requirements and official compendium Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers Х Х

Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria internal monitoring of prior authorizations to determine compliance of treatement/service plans for drug efficacy based on concurrent review of treatment plans, service usage and drug utilization

NQTL does not apply to any services in this classification

Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews

Utilization trends

Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
			Х
			Х
			х
			x
(x
	Х		
(х
(х		х
			х
			Х
		Х	
			х
			x
(Х		х
Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
(х		

		х
Х		
Х		
		Х
	Х	
		х
		Х

Benefits

Outlier Management Med/Surg

		Med/Surg	
	Benefit	Inpatient	Outpatient - Other
(2) Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;			Х
(4) Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;			Х
(6) Restorative services (filings, crowns, etc) - OP OR/ASC;			Х
(8) Endodontic services (root canals, etc.) - OP OR/ASC;			Х
(10) Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;			X
(12)Prosthodontics (dentures, etc.) - OP OR/ASC;			Х
(14) Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;			X
(17) Anesthesia - OP OR/ASC.			X
1915c: certified Nursing Assistant/Home Health Aide 1915c: nursing (private duty) (21+ years of age)			X X
		v	^
Acute Care Services (Births/Deliveries) Acute Care Services (Medical/Surgical)		X X	
Amputationsoutpatient		^	
Applied Behavior Analysis (autism services)primarily in-home			х
Autism: adult life planning			X
Autism: Environmental accessibility adaption			x
Autism: Family leave (retainer day)			X
Autism: family training			х
Autism: Intensive individual support services			Х
Autism: Residential habilitation (regular and intensive)			Х
Autism: Respite care			Х
Autism: Therapeutic integration (regular and intensive)			Х
Bariatric Surgery		Х	
Brain Injury: Day habilitation			Х
Brain injury: Individual support services			Х
Brain injury: medical Day Care			Х
Brain Injury: Residential habilitation			Х
Brain injury: Supported employment			Х
Bypass surgeryoutpatient			
Cardiac Procedures (non-emergent)outpatient			
Cardiac Rehabilitation			
CFC: environmental assessments			Х
CFC: home delivered meals			Х
Chemotherapyoutpatient			
Community Pathways and Community Supports waivers: Assistive technology and services			Х
Community Pathways and Community Supports waivers: Behavioral support services			X
Community Pathways and Community Supports waivers: Career exploration			X
Community Pathways and Community Supports waivers: Community development			x x
Community Pathways and Community Supports waivers: Day habilitation Community Pathways and Community Supports waivers: Employment discovery and customization			X
Community Pathways and Community Supports waivers. Employment discovery and customization			X
Community Pathways and Community Supports waivers. Employment services			X
Community Pathways and Community Supports waivers: Environmental assessment			X
Community Pathways and Community Supports waivers: Family and peer mentoring supports			X
Community Pathways and Community Supports waivers: Family caregiver training and empowerment			x
Community Pathways and Community Supports waivers: Housing support services			X
Community Pathways and Community Supports waivers: Individual and family directed goods and services			X
Community Pathways and Community Supports waivers: Medical Day Care			Х
Community Pathways and Community Supports waivers: Nurse consultation			Х
Community Pathways and Community Supports waivers: Nurse health case management			Х
Community Pathways and Community Supports waivers: Participant education, training and advocacy			Х
Community Pathways and Community Supports waivers: Personal supports			Х
Community Pathways and Community Supports waivers: Respite care services			Х
Community Pathways and Community Supports waivers: Support broker services			Х
Community Pathways and Community Supports waivers: Supported employment			Х
Community Pathways and Community Supports waivers: Transportation			Х
Community Pathways and Community Supports waivers: Vehicle modification			Х
Community Pathways only: community living			Х
Community Pathways only: live-in caregiver supports			Х
Community Pathways only: Remote support services			Х
Community Pathways only: Shared living			Х
Community Pathways only: Support living			X
Community Pathways only: transition services			Х
Corrective Surgeryoutpatient			
CPAS and CFC: Personal assistance services			Х
Dermatology Procedures			

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Diagnostic and X-ray services: CT--outpatient Diagnostic and X-ray services: MRI--outpatient Diagnostic and X-ray services: PET--outpatient Disposable Medical Equipment (w/o HCPCS) Disposable Medical Supplies (> \$500.00) Disposable Medical Supplies (≤ \$500.00) DME/DMS Alternative Approach--Full category; need to identify any NQTLs that apply to any DME/DMS under the broad category. Description of NQTL factors should be more detailed. Doula - labor/delivery attendance Doula - prenatal/postpartum Durable Medical Equipment (> \$1,000.00) Durable Medical Equipment (w/o HCPCS) Durable Medical Equipment (≤ \$1,000.00) Durable Medical Equipment rental (> 3 months) Durable Medical Equipment rental (\leq 3 months) Emergency Room--Beyond EMTALA Screening EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician) Family Supports: Assistive technology and services Family Supports: Behavioral support services Family Supports: Environmental assessment Family Supports: Environmental modification Family Supports: Family and peer mentoring supports Family Supports: Family caregiver training and empowerment Family Supports: Housing support services Family Supports: Individual and family directed goods and services Family Supports: Nurse case management and delegation Family Supports: Nurse consultation Family Supports: Participant education, training and advocacy Family Supports: Personal supports Family Supports: Respite care services Family Supports: Support broker services Family Supports: Transportation Family Supports: Vehicle modification Gender affirmation surgery Genetic Testing Grafts/Implants--outpatient HCBS: case management HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing) HH: Home Health Aide (< 1 visit per day; < 4 hours of service per day; visit w/ skilled nursing; services rendered during a 30-day period that do not exceed the Medicaid NF rate) HH: Occupational therapy HH: Occupational therapy HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)) HH: Occupational therapy (< 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate) HH: physical therapy HH: physical therapy HH: Physical therapy HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate) HH: Physical therapy (< 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate) HH: Registered Nurse HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate) HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate) HH: Speech therapy HH: Speech therapy HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate) HH: Speech therapy (< 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate) Home Health Services: occupational therapy Home Health Services: physical therapy Home Health Services: skilled nursing services Home Health Services: speech pathology services Home Visiting Services - Parent/Support Services Hospice: Short-term inpatient care Hospice Care--Inpatient Hospital Care--inpatient Hyperbaric Oxygen Therapy Hysterectomy ICS: case management Infusion/Maintenance Drug Infusion Institutional Long Term Care/Skilled Nursing Facility (first 90 days) Investigational Surgeries/Clinical Trials--outpatient Medical Day Care waiver with associated services(16+ years of age): Neurosurgical procedures--outpatient

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Nursing Facility: ActivitiesNursing Facility: Dental servicesNursing Facility: Dietary servicesNursing Facility: Nursing servicesNursing Facility: Pharmaceutical servicesNursing Facility: Physician servicesNursing Facility: Social workNursing Facility: Social workObservation Stay up to 24 hOccupational TherapyOral Surgery AdultOral Surgery ChildOutpatient hospital care (non-emergent)Outpatient Rehabilitative services	x x x x x x x x x x	
Outpatient Surgery (Ambulatory Surgery Center) Oxygen Oxygen (w/o HCPCS) PACE: Day health care PACE: In-home care PACE: Medical specialty services (podiatry, psychiatry, dentistry, optometry and audiology) PACE: Nursing care PACE: Recreation PACE: Recreation PACE: Social work PACE: Social work PACE: Transportation Panagement Procedures		× × × × × × × ×
Physical Therapy Plastic and Restorative Surgeryinpatient Plastic and Restorative Surgeryoutpatient Proton Therapy Treatment Pulmonary Rehab Rehabilitation Services (Acute)	x x	
Sleep Studies /Sleep Apnea Studies Speech Therapyoutpatient Transplants Transplants Pre and Post Transplant Services Transplants Pre and Post Transplant Servicesoutpatient	x x	

Benefit	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Dru
Acute Care Services	Х				
Ncohol and/or drug assessment			х		
Ambulatory detoxification			Х		
liofeedback			Х		
Drug Testing		Х			
lectroconvulsive therapy (ECT)outpatient			Х		
vaulation and Management-Outpatient			х		
amily Psycho-Educational Therapy			Х		
amily Therapyoutpatient			Х		
Sroup therapyoutpatient			Х		
Sroup therapyoutpatient			Х		
lealth Behavior Assessment			х		
lealth Behavior Reassessment			Х		
ndividual Psycho-Educational Therapy			Х		
ndividual therapyoutpatient			х		
ndividual therapyoutpatient			х		
npatient ASAM 4.0	X				
npatient Detoxificationhospital	X				
npatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	X				
ntensive outpatient (IOP)			х		
ntensive Outpatient (IOP)ASAM 2.1			х		
aboratory Services		Х			
aboratory Services		Х			
AAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)			х		
/IAT Initial Intake (Evaluation and Management, Including Rx)			х		
/IAT Ongoing (Evaluation and Management, including Rx)			х		
Aental health assessment			х		
Aental health reassessment			х		

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Mobile treatment-Assertive community treatment (ACT)	
Mobile treatment-non-ACT	
Multiple family group therapy	
Not Applicable	
Nursing Facility: MH Services	Х
Nursing Facility: SUD services	Х
Opioid Treatment Program (OTP) services - including med management	
Partial hospitalization (PHP)	
Partial Hospitalization (PHP)ASAM 2.5	
Psychiatric Rehabilitation Services	
Psychological or neuropsychological testing and evaluation	
Residential SUD TreatmentASAM 3.1	Х
Residential SUD TreatmentASAM 3.3	Х
Residential SUD TreatmentASAM 3.5	Х
Residential SUD TreatmentASAM 3.7	Х
Residential SUD TreatmentASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	Х
Residential Treatment Centers	Х
Special Psychiatric Hospital	Х
Targeted Case Management	
Therapeutic Behavioral Services	
Transcranial Magnetic Stimulation (TMS)	
Traumatic Brain Injury (TBI) Day Habilitation	

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		0	utlier Management Med/Surg		
Factor 1. Excessive utilization	Inpatient A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.	Oxtpalient - Other		Outpatient - Office Based	Emergency Benefits A certain number/type of containers with professionally recognized medical literature and professional standards (including comparative effectiveness studies and clinical T Compliance with professionally recognized treatment publishes used to define clinically appropriate standards of care such as ASAM criteria
2. Not Applicable	Not Applicable				Not Applicable
3. Safety risks	A certain number/type of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.				
			MH/SUD		
Factor	Inpatient	Outpatient - Other		Outpatient - Office Based	Emergincy Benefits
1. Excessive utilization	Compliance with professionally recognized treatment guidelines used to define dinically 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 oritoria 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.		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.	
 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.				
5. Not Applicable	Not Applicable	Not Applicable		Not Applicable	
6. Relative reimbursement rates				Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	
7. Safety risks				Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.	
8. Service type	Compliance with professionally recognized treatment guidelines used to deline dinically 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.	
9. Severity or chronicity of an illness	Compliance with professionally recognized treatment guidelines used to define dinically 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.	
10. 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.	

Evidentiary Standards

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Prescription Drugs

Benefits Prior Authorization/Pre-Authorization

	-
Med	/Surg

	Med/Surg		
	Benefit	Inpatient	Outpatient - Other
) Diagnostic services (oral exams, x-rays, etc.) - Clinic;			
) Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;			Х
) Diagnostic services (oral exams, x-rays, sealants, etc.) - Clinic;			
) Restorative services (filings, crowns, etc) - Clinic;			v
) Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;			Х
) Endodontic services (root canals, etc.) - Clinic;			
) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;			
) Restorative services (filings, crowns, etc) - Clinic;) Prosthodontics (adjustment of dentures, etc.) - Clinic;			
) Restorative services (filings, crowns, etc.) - OP OR/ASC;			х
) Endodontic services (nonics, etc.) - Clinic;			A
) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic; and			
) Endodontic services (root canals, etc.) - OP OR/ASC;			х
) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;			X
0) Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;			х
1) Prosthodontics (dentures, etc.) - Clinic;			X
2)Prosthodontics (dentures, etc.) - OP OR/ASC;			х
3) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;			
4) Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;			х
5) Orthodontic services - Clinic;			
7) Anesthesia - OP OR/ASC.			х
915c: certified Nursing Assistant/Home Health Aide			X
915c: nursing (private duty) (21+ years of age)			х
mputationsoutpatient			
oplied Behavior Analysis (autism services)primarily in-home			х
utism: adult life planning			х
utism: Environmental accessibility adaption			х
utism: Family leave (retainer day)			х
utism: family training			х
utism: Intensive individual support services			Х
utism: Residential habilitation (regular and intensive)			Х
utism: Respite care			Х
utism: Therapeutic integration (regular and intensive)			Х
ariatric Surgery		Х	
rain Injury: Day habilitation			х
rain injury: Individual support services			х
rain injury: medical Day Care			х
rain Injury: Residential habilitation			х
rain injury: Supported employment			х
ypass surgeryoutpatient			
ardiac Procedures (non-emergent)outpatient			
ardiac Rehabilitation			
FC: Accessibility adaptations			Х
FC: assistive technology			Х
FC: Consumer training			Х
FC: environmental assessments			Х
FC: home delivered meals			Х
FC: Personal emergency response system			Х
FC: Transition services			Х
nemotherapyoutpatient			
orrective Surgeryoutpatient			
PAS and CFC: Nurse monitoring			Х
PAS and CFC: Personal assistance services			Х
ermatology Procedures			
agnostic and X-ray services: CToutpatient			
agnostic and X-ray services: MRIoutpatient			
agnostic and X-ray services: PEToutpatient			
ME/DMS Alternative ApproachFull category; need to identify any NQTLs that apply to any DM	IE/DMS under the broad category. Description of NQTL factors should be more detailed.		X
urable Medical Equipment (DME)/Disposable Medical Supplies (DMS)			Х
PSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-C	Certified Medication Technician)		Х
-			
ender affirmation surgery		Х	
enetic Testing			Х
rafts/Implantsoutpatient			
CBS: Assisted living			Х
CBS: Behavioral consultation			Х
ME/DMS Alternative ApproachFull category; need to identify any NQTLs that apply to any DM urable Medical Equipment (DME)/Disposable Medical Supplies (DMS) 2SDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-C 2S M/S Drug ender affirmation surgery enetic Testing rafts/Implantsoutpatient CBS: Assisted living		х	

Outpatient - Office Based	Emergency Benefits	Prescription Drugs
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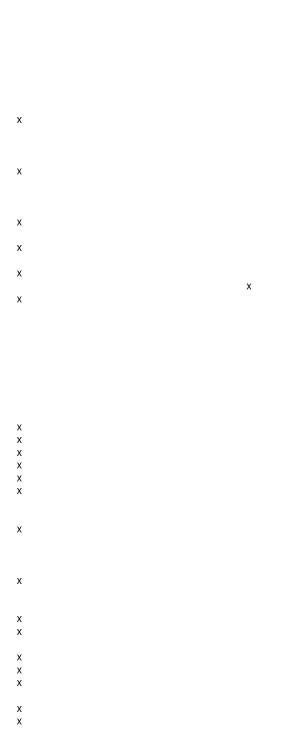


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HCBS: behavioral consultation		
HCBS: family training		х
HCBS: Medical Day Care		х
HCBS: Nutritionist/Dietician		х
HCBS: nutritionist/Dietician		
HH: Home Health Aide		х
HH: Occupational therapy		х
HH: physical therapy		х
HH: registered Nurse		х
HH: Speech therapy		х
Home Health Services: occupational therapy		х
Home Health Services: physical therapy		х
Home Health Services: skilled nursing services		х
Home Health Services: speech pathology services		х
Hospice: Short-term inpatient care	Х	
Hospice CareInpatient	Х	
Hospital Careinpatient	х	
Hyperbaric Oxygen Therapy		
Hysterectomy	х	
ICS: Assisted living		х
ICS: behavioral consultation		х
ICS: Behavioral consultation		
ICS: Family training		х
ICS: Medical Day Care		x
ICS: Nutritionist/Dietician		x
ICS: Nutritionist/Dietician		~
ICS: senior Center Plus		х
Infusion/Maintenance Drug Infusion		~
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	х	
Investigational Surgeries/Clinical Trialsoutpatient	^	
MCO administered prescription drug		
Neurosurgical proceduresoutpatient	v	
Nursing Facility: Activities	X	
Nursing Facility: Dental services	X	
Nursing Facility: Dietary services	x	
Nursing Facility: Laboratory, radiology and other diagnostic testing	X	
Nursing Facility: Nursing services	X	
Nursing Facility: Pharmaceutical services	X	
Nursing Facility: Physician services	X	
Nursing Facility: Social work	Х	
Nursing Facility: Specialized rehabilitation	х	
Occupational Therapy		
Oral Surgery Adult		
Oral Surgery Child		
Outpatient hospital care (non-emergent)		
Outpatient Rehabilitative services		
Outpatient Surgery (Ambulatory Surgery Center)		
PACE: In-home care		х
PACE: Meals		х
PACE: Medical specialty services (podiatry, psychiatry, dentistry, optometry and audiology)		
PACE: Nursing care		х
PACE: Personal care		х
PACE: Recreation		х
PACE: Rehabilitation		
PACE: Social work		х
PACE: Transportation		х
Pain Management Procedures		
Physical Therapy		
Plastic and Restorative Surgeryinpatient	х	
Plastic and Restorative Surgeryoutpatient		
Proton Therapy Treatment		
Pulmonary Rehab		
Rehabilitation Services (Acute)	х	
Sleep Studies /Sleep Apnea Studies		
Speech Therapyoutpatient		
Transplants		
I alispiants	х	
	x x	
Transplants Transplants Pre and Post Transplant Services Transplants Pre and Post Transplant Servicesoutpatient		

Benefit

MH/SUD



Х

х

х

Acute Care Services	х
Ambulatory detoxification	~
Biofeedback	
Electroconvulsive therapy (ECT)outpatient	
Evallation and Management-Outpatient	
Family Therapyoutpatient	
FFS MH Drug	
FFS SUD Drug	
Group therapyoutpatient	
Group therapyoutpatient	
Individual therapyoutpatient	
Individual therapyoutpatient	
Inpatient ASAM 4.0	х
Inpatient Detoxificationhospital	х
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	х
Intensive outpatient (IOP)	
Intensive Outpatient (IOP)ASAM 2.1	
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)	
MAT Initial Intake (Evaluation and Management, Including Rx)	
MAT Ongoing (Evaluation and Management, including Rx)	
Methadone Maintenance	
Mobile treatment-Assertive community treatment (ACT)	
Mobile treatment-non-ACT	
Multiple family group therapy	
Not Applicable	
Nursing Facility: MH Services	Х
Nursing Facility: SUD services	Х
Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified	
Opioid Treatment Program (OTP) services - including med management	
Partial hospitalization (PHP)	
Partial Hospitalization (PHP)ASAM 2.5	
Psychiatric Rehabilitation Services	
Psychological or neuropsychological testing and evaluation	
Residential SUD TreatmentASAM 3.1	Х
Residential SUD TreatmentASAM 3.3	х
Residential SUD TreatmentASAM 3.5	Х
Residential SUD TreatmentASAM 3.7	Х
Residential SUD TreatmentASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	Х
Residential Treatment Centers	Х
Special Psychiatric Hospital	Х
Targeted Case Management	
Therapeutic Behavioral Services	
Transcranial Magnetic Stimulation (TMS)	

Traumatic Brain Injury (TBI) Day Habilitation

Х X X X X X Х X X х Х Х х х x x х х Х Х х x x

Х х

х

х

X X X

X X

Factors Prior Authorization/Pre-Authorization Med/Surg

Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
	R	R		
				R
				R
	R	R		R
R	R	R		R
				R
	R	R		R
				R
R	R			
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R	R	R		R
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	R	R		R
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	R	R		
				R
R	R	R		
				R
Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
_	R R R R	R R R R R R R R R R R R R R R R R R R	R R R R R R R R R R R R R R R R R R R R	R R R R R R

Factor	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
an approval required from the department or its designee before a drug is dispensed					R
clinical appropriateness/medical necessity					R
fail first protocol					R
fiscal responsibility/cost effectiveness					С
High levels of variation in length of stay		R	R		
internal auditing for treatment compliance via concurrent review of treatment plans and medical documentation					С
Lack of clinical efficiency of treatment or service					С
Least restrictive appropriate level of care	R	R			
Least restrictive appropriate level of care			R		
Licensure, certification, accreditation and/or experience requirements for providers to join provider network					С
limitations on prescribing a drug based on the age of the participant					R
limitations on the daily, monthly or yearly quantity for which the drug can be prescribed to the participant					R
medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					С
Not Applicable	R	R	R		
Safety risks					С
Service type		R	R		
Severity or chronicity of an illness	R	R	R		С
Variability in quality		R	R		

		Sources Prior Authorization //Pr- Authorization	
former and the second se	loslind	Outputiest - Other Med/Song	Outpatient - Office Based
1. Claim types with high percentage of fraud	s quanti ta	coupares - score of the second se	ooppoint - thro a sale I objectively and active in a sale of the standards as well as internal plan or insuer standards, willed upon to define the factors triggering the application of an NQP, to benefits internal actives analysis internal market and compositive analysis
2. clinical appropriateness/medical necessity			Internal market and competitive analysis
 Constraint address in a second second second in the second in the second s			
3. Current and around for services			
a. Content and projected detailed on the more			
4. Elasticity of demand		Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of as NQTs to benefits	
4. Lastochy of Demand		subsets y tandards, including any published standards as well as internal pain of issuer tandards, reveal upon to derive the factors triggining the applications of an HULL 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 NQE to benefits Internal claims analysis
5. Sprake utilization		Subtentiar v tandards, including any cublished standards as well as internal plan or issuer standards, relied upon to define the factors trimening the application of an NOT, to benefits	
5. License Unicition	Evidentiary standards, including any published standards as well as internal plan or issuer standards, miled upon to define the factors triggering the application of an NQRL to benefits	subsets by takadron, including any published takadron as were as internal plan or issuer standards, resea upon to denne the fuctors triggining the application of an Wull Lto 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 NQTs to benefits Internal claims analysis Internal minister and competitive analysis
			internal manuet and completione analysis
6. fail first protocol			
7. High variability in cost per episode 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 Internal claims analysis
8. Lack of clinical efficiency of treatment or service			
a. Lack of clinical efficiency of treatment of service			
	State and Federal requirements	State and Federal requirements	
 Medicare/Medicaid program participation eligibility medication status on preferred drug (bit) (so determined by the preferred drug program via recommendations by the P&T committee 	XUR AD HORI INFURIENCE	satas and +denti requirements.	
11. Not Applicable 12. Provider discretion in determining diagnosis	Not Applicable	Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTL to benefits	Not Applicable
12. Violeer distriction in determining diagnosis			
13. Provider discretion in determining type or length of treatment			
2.5. Fromer und read in determining spir of region of order real			
34. Recent medical cost exclution		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	Edularities standards including was sublished standards wavel to internal plan or insur standards milled upperts define the factors triagening the senitration of an INTE to heavily
			Evidenciary standards, including any published standards as well as internal plan or issuer standards, mind upon to define the factors triggering the application of an NQRs to benefits, Internal within an application and plants.
15. Recognition of accreditation by certain accrediting bodies			
16. Relative reimburisement rates		Evidentiary standards, including way published standards as well as internal plan or issuer standards, relied spon to define the factors triggering the application of an NQTs to benefits	Evidentiary standards, including any published standards as well as internal plan or issuer standards, wiled upon to define the factors triggering the application of an NQTL to benefits
			terrorisal sensitivity sensitivity sensitivity sensitivity as a contranguation to non-contrant, meno sport southers or tagging the appearance or an index or annexa Internal material and competitive analysis State as of the indexing menos
17. Safety risks			Rate and Federal requirements
18. Service tope	Evidentiary transfering, 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 way published standards as well as internal plan or issuer standards, relied spon to define the factors triggering the application of an NQTs to benefits	Evidentiary standards, including any published standards as well as internal plan or issuer standards, wiled upon to define the factors triggering the application of an NQR to benefits
11. Service type 19. Severity or chronicity of an illness			
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Factor 1. an approval required from the department or its designee before a drug is dispensed	legationt	Outpatiert - Other	Outpatient - Office Raned
2. clinical appropriateness/medical necessity			
3. full first protocol			
4. facal responsibility/cost effectiveness			
5. High levels of variation in length of stay		Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied spon to define the factors triggering the application of an NQTs to benefits	Evidentiary standards, including any published standards as well as internal plan or issuer standards, wiled upon to define the factors triggering the application of an NQR to benefits
5. High levels of variation in length of stay 6. Internal auditing for transmet compliance via concurrent twolwe of treatment plans and medical documentation 7. Luck of indical efficiency of substrates of variance			
 Least metricible appropriate level of care Least metricible appropriate level of care Licence, certification, and/data mediate mequirements for providers to join provider network 	Evidentiary standards, including any published standards as well as internal plan or issuer standards, miled 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, wiled upon to define the factors triggering the application of an NQII to benefits
10. Licensure, certification, accreditation and/or experience requirements for providers to join provider network			
11. limitations on prescribing a drug based on the age of the participant			
12. Imitations on the daily, monthly or yearly quantity for which the drug can be prescribed to the participant			
13. medication status on preferred drug list (POL) as determined by the preferred drug program via recommendations by the P&T committee			
14. Not Applicable 15. Safety risks	Not Applicable	Net Applicable	Not Applicable
16. Service type 17. Severity or chronicity of an illness.		Evidentiary tandards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTs to benefits Evidentiary issuandards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors triggering the application of an NQTs to benefits	Evidentiary standards, including any published isandards as well as internal plan or issuer standards, miled upon to define the factors triggering the application of an NQRs to benefits Evidentiary standards, including any published isandards as well as internal plan or issuer standards, miled upon to define the factors triggering the application of an NQRs to benefits
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18. Variability in quality		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 NQIL to benefits

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		Didentiary standards, including any published standards as well as internal plan or issuer standards, nelied upon to define the factors triggering the application of an NQR to benefits internal claims analysis
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		Medical sepert melwas National accorditation standards
		immananyen remen National anomhatismis statards Sales and Administrationents Workersany statards, in charge any published statards as well as internal plan or issuer standards, miled upon to define the factors triggering the application of an NQD, to benefits
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		National accreditation standards State and Federal requirements
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		nazona accionazione susanno. El assa la fa desin el aprimenta provinciane a su el a si internal pian er insuer standaró, mied apos to define the factors triggering the application of an NQD, to benefita Hormani Clama nagina, facilitaria provinciane a su el a si internal pian er insuer standaró, mied apos to define the factors triggering the application of an NQD, to benefita Hormani Clama nagina piante a su esta piante
		Medical report moleves National accenditation standards
58 		Noteriary standards, including any published standards as well as internal plan or insurer standards, relied opon to define the factors triggering the application of an NQR, to benefits, toremark loss analysis termark models and competitive analysis
		Internal market and completional analysis Medical repert reviews National accompletion standards
		National accorditation standards State and Federal requirements Understary standards (including any published standards as well as internal plan or issuer standards, relied upons to define the factors triggering the application of an NQRs to benefits
		Internal market and competitive analysis Medicularement resident
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		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 NQR to benefits Internal claims analysis
		Internal market and competitive analysis Medical expert melews
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		impactiveness remains Stora and Administration Stora and Administrationess standards
		Internal market and competitive analysis Medical expert mulews
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		Medical expert muleux Nacional accessitation danaderk Sate and Federal muleuments
ts.		
		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
		Internal market and competitive analysis Medical expert melewa
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	Emergency Renefits	Prescription Drugs Evidentiary standards, including any published standards as well as internal plan or insuer standards, relied upon to define the factors triggering the application of an NQS. to benefits
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		Evidentiary italiana ata, including any published standards as well as internal plan or issuer standards, relied upon to define the factors traggering the application of an Notic to benefits internal claims analysis.
ts.		State and Federal requirements
		Internal claims analysis 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 NOTL to benefits
		internal claims analysis State and Federal requirements
5		Evidentiary standards, including any published standards as well as internal plan or issuer standards, miled upon to define the factors triggering the application of an NQTL to benefits
		National accreditation standards State and Federal requirements
		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 MQR. So benefits Internal Cleans analysis States and Gedania requirements
		woonexpy standards, excluding any published standards at wen at internal plan for insuer standards, relead upon to denier the tactors inggering the application or an equil to deniers. Internal claims analysis State and Federal requirements.
		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 a nd Federal nequirements

Evidentiary Standards Prior Authorization/Pre-Authorization

Compliant

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

ed treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.

			Med/Surg	
Factor	Inputient	Outpatient - Other		Outpatient - Office Based
1. Exercise utilization	A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.			
	Ubilization is two standard deviations above average utilization per episode of care.			
2. Medicare/Medicald program participation eligibility	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.			
3. Not Applicable	Not Applicable			
4. Service type	A certain number/hype of recognized medical literature and professional standards (including comparative effectiveness studies and clinical trials), and published research studies.			
			MH/SUD	
Factor	Institut	Outpatient - Other		Outpatient - Office Based
1. an approval required from the department or its designee before a drug is dispensed				
 an approve requires many the department of its designed between a stage is depended. 				
2. clinical appropriateness/medical necessity				
3. fail first protocol				
4. facal responsibility/cost effectiveness				
5. 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 tre	ucment gubernet.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
6. Internal auditing for treatment compliance via concurrent review of treatment plans and medical documentation				
7. Lack of clinical efficiency of treatment or service				
E. Least restrictive appropriate level of care	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as KGAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as AGAM criteria or APA tre	utment guidelines.	
9. Least restrictive appropriate level of care				Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM oriteria or APA treatment guidelines.
10. Licensure, certification, accreditation and/or experience requirements for providers to join provider network				
11. Imitations on prescribing a drug based on the age of the participant				
11. Instantin of precising a degraded on on age to one perception				
12. limitations on the daily, monthly or yearly quantity for which the drug can be prescribed to the participant				
13. medication status on preferred drug list (POL) as determined by the preferred drug program via recommendations by the P&T committee				
The intervalues interval and the fraction of the business of the business of the business of the set commuter				
34. Not Applicable	Not Applicable	Not Applicable		Not Applicable
15. Safety risks				
16. Service type		Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or AFA tre	atment midelines	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as ASAM criteria or APA treatment guidelines.
20. and only or chronicity of an illness	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as AGAM criteria or APA treatment guidelines.	Compliance with professionally recognized treatment guidelines used to define clinically appropriate standards of care such as AGAM criteria or AFA tre		Comparison with professionally recognised treatment guidelines used to define chically appropriate standards of care such as ASAM chicks of APP instantent guidelines.
27. arvening in containing on an interes	Comparison was processioning recognized oreasters gamenies and to serve conserv appropriate summaries or one each as Karda Cristra or Ave treatment galaxies.	Comparison with provisional programs transmissing programs and an define clinically appropriate itandards of care such as AGAM criteria of AGA to	workers Employees	Company, was provident or agriculture gradentes and to serve concern any appropriate standards or care such as ASAM criteria or APA treatment galaxies.

18. Variability in quality

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Operation Measures

F	Prior A	Authorizat	ion/Pre-	Authoriz	ation
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Med/Surg					
Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drug
Addressing workforce shortage issues					Х
Average denial rates for medical necessity for mental health and substance use disorder benefits, and medical/surgical benefits.	Х				Х
Average length of stay authorized per episode of care	Х				
clinical criteria applied based on FDA labeling and requirements and official compendium					х
Complaint tracking (enrollees and providers)					Х
Degree of discretion exercised by utilization review staff	х				Х
evaluation of annual concurrent reviews and prior authorization reviews conducted on a quarterly basis		Х			
Frequency that authorization requirements are waived	х				
Frequency with which reviews are conducted	х	Х			
How the health plan verifies credentials of its staff conducting medical management/utilization review					Х
Inter-rater reliability surveys for medical/surgical, mental health and substance use disorder reviewers	х	Х	х		Х
Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria	Х				х
internal monitoring of prior authorizations to determine compliance of treatement/service plans for drug efficacy based on concurrent review of treatment plans, service usage and drug utilization					Х
Length of time afforded for each review					Х
Number of days or visits authorized per review	Х				
services preathorized not received monthly			х		
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.					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	х			х
MH/SUD					
Measure	Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drug
Authorization Denial Rates for MH/SUD	Х	Х	Х		
Authorization Denial Rates for MH/SUD		Х	х		

clinical criteria applied based on FDA labeling and requirements and official compendium

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

Internal audit findings related to coverage determination consistency with the plan's medical necessity criteria

internal monitoring of prior authorizations to determine compliance of treatement/service plans for drug efficacy based on concurrent review of treatment plans, service usage and drug utilization

Type and level of documentation (e.g., chart notes, lab results, treatment plans, etc.) the health plan requires from providers during reviews

Utilization trends

х
Х
x x
Х

X X X X X X

Benefits				
Service limitation	ns			
Med/Surg				
Benefit	Inpatient Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drugs
(1) Preventive services (cleanings, fluoride, etc.) - Clinic;		Х		
(1) Preventive services (semiannual cleanings, fluoride, etc.) - Clinic;		Х		
(2) Diagnostic services (oral exams, x-rays, etc.) - Clinic;		Х		
(2) Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;	Х			
(3) Diagnostic services (oral exams, x-rays, sealants, etc.) - Clinic;		Х		
(3) Restorative services (filings, crowns, etc) - Clinic;		Х		
(4) Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;	Х			
(4) Endodontic services (root canals, etc.) - Clinic;		Х		
(5) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;		х		
(5) Restorative services (filings, crowns, etc) - Clinic;		х		
(6) Prosthodontics (adjustment of dentures, etc.) - Clinic;		х		
(6) Restorative services (filings, crowns, etc) - OP OR/ASC;	Х			
(7) Endodontic services (root canals, etc.) - Clinic;		X		
(7) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic; and		X		
(8) Anesthesia - Clinic.		Х		
(8) Endodontic services (root canals, etc.) - OP OR/ASC;	Х			
(9) Periodontal services (scaling, full mouth debridement, etc.) - Clinic;		Х		
(10) Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;	Х			
(11) Prosthodontics (dentures, etc.) - Clinic;		х		
(12)Prosthodontics (dentures, etc.) - OP OR/ASC;	Х			
(13) Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;		х		
(14) Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;	Х			
(15) Orthodontic services - Clinic;		х		
(16) Anesthesia - Clinic; and		х		
(17) Anesthesia - OP OR/ASC.	Х			
Applied Behavior Analysis (autism services)primarily in-home	Х			
Autism: adult life planning	Х			
Autism: Family leave (retainer day)	Х			
Autism: Intensive individual support services	X			
Autism: Residential habilitation (regular and intensive)	X			
Autism: Respite care	X			
Autism: Therapeutic integration (regular and intensive)	X			
CFC: home delivered meals	X			
CFC: Transition services	X			
CPAS and CFC: Personal assistance services	X			
Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS)	X			
EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician)	X			
HCBS: Assisted living	X			
HCBS: case management	X			
HCBS: family training	×			
HCBS: Nutritionist/Dietician	×			
HH: Home Health Aide	×			
	× ×			
HH: Occupational therapy HH: physical therapy	A			
	A			
HH: Speech therapy	Χ			
Home Health Services: occupational therapy	Χ			
Home Health Services: physical therapy	X			
Hospice: home health and aide services	X			
Hospice: Medical appliances and supplies	X			
Hospice: Medical social services	X			
	v			
Hospice: nursing services	Α			
ICS: case management	×			

Benefits

ICS: Family training		х
ICS: Nutritionist/Dietician		Х
Not Applicable	Х	
Oxygen		Х
PACE: Day health care		Х
PACE: In-home care		Х
PACE: Meals		Х
PACE: Nursing care		Х
PACE: Personal care		Х
PACE: Recreation		Х
PACE: Social work		Х
PACE: Transportation		Х
Remote Patient Monitoring		Х

	,					
Benefit		Inpatient	Outpatient - Other	Outpatient - Office Based	Emergency Benefits	Prescription Drug
Icohol and/or drug assessment				Х		
nbulatory detoxification				Х		
ofeedback				Х		
aulation and Management-Outpatient				Х		
mily Psycho-Educational Therapy				Х		
mily Therapyoutpatient				Х		
oup therapyoutpatient				Х		
oup therapyoutpatient				х		
alth Behavior Assessment				Х		
alth Behavior Reassessment				х		
lividual therapyoutpatient				х		
lividual therapyoutpatient				х		
ensive outpatient (IOP)				х		
ensive Outpatient (IOP)ASAM 2.1				х		
AT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)				х		
AT Initial Intake (Evaluation and Management, Including Rx)				х		
AT Ongoing (Evaluation and Management, including Rx)				х		
ental health assessment				х		
ental health reassessment				х		
thadone Maintenance				х		
bile treatment-Assertive community treatment (ACT)			Х			
bile treatment-non-ACT			Х			
Itiple family group therapy				х		
t Applicable		Х	Х			
going services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified				х		
ioid Treatment Program (OTP) services - including med management				х		
tial hospitalization (PHP)				х		
tial Hospitalization (PHP)ASAM 2.5				х		
chiatric Rehabilitation Services				х		
chological or neuropsychological testing and evaluation				х		
geted Case Management			Х			
erapeutic Behavioral Services				Х		

MH/SUD

Factors tiered drug formulary Med/Surg

	Med/Surg			
Factor		Inpatient	Outpatient - Other	Outpatient - O
Claim types with high percentage of fraud				
clinical appropriateness/medical necessity				
Current and projected demand for services				
Elasticity of demand				
Excessive utilization				
fiscal responsibility/cost effectiveness				
Lack of adherence to quality standards				
Lack of clinical efficiency of treatment or service				
medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee				
Provider discretion in determining diagnosis				
Provider discretion in determining type or length of treatment				
Recent medical cost escalation				
Recognition of accreditation by certain accrediting bodies				
Safety risks				
Severity or chronicity of an illness				
	MH/SUD			
Factor		Inpatient	Outpatient - Other	Outpatient - O

clinical appropriateness/medical necessity

Excessive utilization

fiscal responsibility/cost effectiveness

medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee

- Office Based	Emergency Benefits	Prescription Drugs
		R
		R
		R
		R
		R
		R
		R
		R
		R
		R
		R
		R
		R
		R
		R

- Office Based	Emergency Benefits	Prescription Drugs
		R
		R
		R
		R

				Sources tiered drug formul: Med/Surg	ary
Factor 1. Claim types with high percentage of fraud	Inpatient Outpatient -	Other Outpatient	t - Office Based	Emergency Benefits	Prescription Drugs Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
2. clinical appropriateness/medical necessity					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
3. Current and projected demand for services					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal market and competitive analysis
4. Elasticity of demand					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal market and competitive analysis
5. Excessive utilization					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
6. fiscal responsibility/cost effectiveness					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
7. Lack of adherence to quality standards					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
8. Lack of clinical efficiency of treatment or service					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal market and competitive analysis
9. medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee					National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
10. Provider discretion in determining diagnosis					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis Medical expert reviews
11. Provider discretion in determining type or length of treatment					Mational accreditation standards National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis Medical expert reviews
12. Recent medical cost escalation					National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
13. Recognition of accreditation by certain accrediting bodies					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis Medical expert reviews
14. Safety risks					National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis
15. Severity or chronicity of an illness					Medical expert reviews National accreditation standards State and Federal requirements Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Internal claims analysis Internal market and competitive analysis Medical expert reviews National accreditation standards
				MH/SUD	State and Federal requirements
Factor 1. clinical appropriateness/medical necessity 2. Excessive utilization	Inpatient Outpatient -	Other Outpatient	t - Office Based	Emergency Benefits	Prescription Drugs Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr Medical expert reviews Evidentiary standards, including any published standards as well as internal plan or issuer standards, relied upon to define the factors tr
					Internal claims analysis Internal market and competitive analysis Medical expert reviews Medicare physician fee schedules

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3. fiscal responsibility/cost effectiveness

4. medication status on preferred drug list (PDL) as determined by the preferred drug program via recommendations by the P&T committee

National accreditation standards State and Federal requirements 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 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 Medical expert reviews State and Federal requirements