

Utilization management and clinical practice guidelines

Imperial Health Holdings Medical Group (IHHMG) utilize clinical practice guidelines as standards of health care applicable to members and providers.

The IHHMG's Medical Services Committee performs a review of nationally and locally developed guidelines and gives final approval of the adoption of all guidelines.

All clinical practice guidelines are based on scientific evidence, review of the medical literature, or appropriately established authority, as cited. All recommendations are based on published consensus guidelines that do not favor any specific treatment based solely on cost consideration.

The recommendations for care are suggested as guides for making medical necessity clinical decisions. Clinicians and their patients must work together to develop individual treatment plans tailored to the specific needs and circumstances of each patient.

Providers and members have the right to request a copy of a guideline that IHHMG has used to make a treatment authorization decision.

The guidelines utilized by Imperial Health Holdings come from a variety of sources including:

1. Centers for Medicare & Medicaid Services (CMS) and Local Coverage Determinations
2. Medicare National Coverage Determination Manuals
3. Contracted Health Plans Clinical Policies
4. MCG 25th Edition®
5. Imperial Health Holding's Medical Group approved Clinical Practice Guidelines
6. Specialty Guidelines
 - National Comprehensive Cancer Network
 - American Society of Anesthesiologists (ASAHQ) Guidelines
 - American Academy of Orthopedic Surgeons (AAOS) Guidelines

Availability of Criteria

Specific criteria used for UM decision-making are available to practitioners, members, and the public upon request with the following disclosure: "The material provided to you are guidelines used by this plan to authorize, modify, or deny care for the person with similar illnesses or conditions. Care and treatment may vary depending on individual need and the benefits covered under your contract." If you would like to obtain a copy of a particular criteria, please contact the **UM Department at (626) 838-5100 ext. 1.**

Availability of Physician Reviewer

Only a licensed physician can make a denial decision. The physician reviewer is available to discuss denial decisions with the requesting practitioner and can be reached by calling **(626) 838-5100 Ext 8818.**

Affirmative Statements About Incentives

Imperial Health Holdings Medical Group affirms that it encourages appropriate utilization of medically necessary customer care and discourages under-utilization of services by the following statements:

- Utilization management (UM) decision making is based only on appropriateness of care and service and existence of coverage.
- Imperial Health Holdings Medical Group does not specifically reward practitioners or other individuals for issuing denials of coverage or service care.
- Financial incentives for UM decision makers do not encourage decisions that result in under-utilization.
- Providers and practitioners are not prohibited from acting on behalf of the member.

Appropriate Professionals

Licensed physicians oversee all UM decision making process. Appropriate licensed health professionals conduct the supervision of all review decisions and processes. All denied or modified requests are determined only by qualified physician(s). Non-licensed staff members may collect data for pre-authorization and concurrent review under the supervision of licensed personnel.

Access to UM Department

Business hours at Imperial Health Holdings Medical Group are 8:00 AM – 5:00 PM Mondays to Fridays, excluding holidays. The Utilization Management Department can be reached at **UM Department at (626) 838-5100 ext. 1.**