

Clinical Utilization Management Guidelines

Attached is a list of the *Clinical UM Guidelines* Anthem Blue Cross and Blue Shield Medicaid has adopted.

The full list of *Medical Policies* and *Clinical Utilization Management (UM) Guidelines* are publicly available on the [Medical Policy and Clinical UM Guideline subsidiary website](#). Their purpose is to help you provide quality care by reducing inappropriate use of medical resources.

MCG Care Guidelines are used for:

- Medical necessity review for medical and behavioral health inpatient review.
- Inpatient site of service appropriateness.
- Inpatient rehabilitation and skilled nursing facility review.
- Outpatient based service or procedure where there is not an established medical policy or clinical UM guideline.

If MCG Care Guidelines do not cover a behavioral health service; the following standardized tools for medical necessity determinations are used:

- Adults: Level of Care Utilization System® (LOCUS)
- Children and Adolescents: Child and Adolescent Service Intensity Instrument (CASII)
- Young Children: Early Childhood Service Intensity Instrument (ECSII)

In addition, American Society of Addiction Medicine® (ASAM) criteria are used for substance abuse services according to state requirements.

Medicaid state contracts, regulatory guidance, CMS requirements and our *Medical Policy/Clinical UM Guidelines*, when approved by the Department for Medicaid Services (DMS), supersede MCG Care Guidelines.

Note: We make determinations of medical necessity on a case-by-case basis in accordance with the definition of medical necessity that is contained within the Medicaid state contract, regulatory guidance, CMS requirements or in our *Medical Necessity Criteria Policy ADMIN.0004*.

If the request doesn't meet established criteria guidelines, it will be referred to a licensed physician reviewer with the appropriate clinical expertise to make a decision.



<https://providers.anthem.com/ky>

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The *Clinical Utilization Management Guidelines (CUMG)* below, that are indicated as *new*, were adopted by the Medical Operations Committee for Anthem Blue Cross and Blue Shield Medicaid members on March 23, 2023.

To view a guideline, visit <https://providers.anthem.com/kentucky-provider/resources/manuals-policies-guidelines>.

CUMG Number	CUMG Title	New Item
CG-MED-69	Inhaled Nitric Oxide	



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To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the right or via our online form (<https://bit.ly/3lZ9oEj>).



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