

Clinical Utilization Management Guidelines

Anthem Blue Cross and Blue Shield Medicaid | Ohio Medicaid Managed Care

Attached is a list of the *Clinical Utilization Management (UM) Guidelines* the health plan has adopted.

The full list of *Medical Policies* and *Clinical 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 use 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.



Clinical Utilization Management Criteria

Anthem Blue Cross and Blue Shield Medicaid | Ohio Medicaid Managed Care

The Clinical Utilization Management Criteria below, which are indicated as new, were adopted by the Medical Operations Committee for Anthem members on June 27, 2024.

To view the criteria below, select the link in the *Criteria Title* column. For additional information regarding our *Medical Policies* and *Clinical UM Guidelines*, visit **Provider Manuals**, **Policies and Guidelines**.

Criteria Number	Criteria Title	New Item
CG-ADMIN-01	Clinical Utilization Management (UM) Guideline for Pre- Payment Review Medical Necessity Determinations When No Other Clinical UM Guideline Exists	
CG-ANC-08	Mobile Device-Based Health Management Applications	
CG-DME-06	Pneumatic Compression Devices for Lymphedema	
CG-DME-37	Air Conduction Hearing Aids	
CG-DME-46	Pneumatic Compression Devices for Prevention of Deep Vein Thrombosis of the Extremities in the Home Setting	
CG-DME-49	Standing Frames	
CG-DME-55	Automated External Defibrillators for Home Use	New
CG-LAB-03	Tropism Testing for HIV Management	
CG-LAB-10	Zika Virus Testing	
CG-LAB-11	Screening for Vitamin D Deficiency in Average Risk Individuals	
CG-LAB-14	Respiratory Viral Panel Testing in the Outpatient Setting	
CG-LAB-16	Serum Amylase Testing	
CG-LAB-17	Molecular Gastrointestinal Pathogen Panel (GIPP) Testing for Infectious Diarrhea in the Outpatient Setting	
CG-LAB-20	Thyroid Testing	
CG-LAB-21	Serum Iron Testing	
CG-LAB-24	Outpatient Urine Culture	
CG-LAB-25	Outpatient Glycated Hemoglobin and Protein Testing	
CG-LAB-26	Outpatient Alpha-Fetoprotein Testing	
CG-LAB-27	Human Chorionic Gonadotropin Testing	
CG-LAB-28	Prostate Specific Antigen Testing	
CG-LAB-29	Gamma Glutamyl Transferase Testing	
CG-LAB-30	Outpatient Laboratory-based Blood Glucose Testing	
CG-MED-37	Intensive Programs for Pediatric Feeding Disorders	

Criteria Number	Criteria Title	New Item
CG-MED-53	Cervical Cancer Screening Using Cytology and Human Papillomavirus Testing	
CG-MED-61	Preoperative Testing for Low-Risk Invasive Procedures and Surgeries	
CG-MED-62	Resting Electrocardiogram Screening in Adults	
CG-MED-66	Cryopreservation of Oocytes or Ovarian Tissue	
CG-MED-69	Inhaled Nitric Oxide	
CG-MED-90	Chelation Therapy	New
CG-MED-92	Foot Care Services	
CG-MED-94	Vestibular Function Testing	
CG-MED-95	Transanal Irrigation	
CG-OR-PR-06	Spinal Orthoses: Thoracic-Lumber-Sacral (TLSO), Lumbar- Sacral (LSO), and Lumber	
CG-REHAB-02	Outpatient Cardiac Rehabilitation	
CG-REHAB-03	Pulmonary Rehabilitation	
CG-REHAB-12	Rehabilitative and Habilitative Services in the Home Setting: Physical Medicine/Physical Therapy, Occupational Therapy and Speech-Language Pathology	
CG-SURG-03	Blepharoplasty, Blepharoptosis Repair and Brow Lift	
CG-SURG-24	Functional Endoscopic Sinus Surgery (FESS)	
CG-SURG-40	Cataract Removal Surgery for Adults	
CG-SURG-70	Gastric Electrical Stimulation	
CG-SURG-78	Locoregional and Surgical Techniques for Treating Primary and Metastatic Liver Malignancies	
CG-SURG-79	Implantable Infusion Pumps	
CG-SURG-82	Bone-Anchored and Bone Conduction Hearing Aids	
CG-SURG-84	Mandibular/Maxillary (Orthognathic) Surgery	
CG-SURG-94	Keratoprosthesis	
CG-SURG-99	Panniculectomy and Abdominoplasty	
CG-THER-RAD-07	Intravascular Brachytherapy (Coronary and Non-Coronary)	
CG-TRANS-02	Kidney Transplantation	
ADMIN.00007	Immunizations	New
DME.00011	Electrical Stimulation as a Treatment for Pain and Other Conditions: Surface and Percutaneous Devices	
DME.00037	Cooling Devices and Combined Cooling/Heating Devices	
LAB.00011	Selected Protein Biomarker Algorithmic Assays	
LAB.00015	Detection of Circulating Tumor Cells	
LAB.00019	Proprietary Algorithms for Liver Fibrosis in the Evaluation and Monitoring of Chronic Liver Disease	
LAB.00024	Immune Cell Function Assay	
LAB.00026	Systems Pathology and Multimodal Artificial Intelligence Testing for Cancerous and Precancerous Conditions	
LAB.00027	Selected Blood, Serum and Cellular Allergy and Toxicity Tests	

Criteria Number	Criteria Title	New Item
LAB.00029	Rupture of Membranes Testing in Pregnancy	
LAB.00035	Multi-biomarker Disease Activity Blood Tests for Rheumatoid Arthritis	
LAB.00036	Multiplex Autoantigen Microarray Testing for Systemic Lupus Erythematosus	
LAB.00037	Serologic Testing for Biomarkers of Irritable Bowel Syndrome (IBS)	
LAB.00039	Pooled Antibiotic Sensitivity Testing	
LAB.00041	Machine Learning Derived Probability Score for Rapid Kidney Function Decline	
LAB.00050	Metagenomic Sequencing for Infectious Disease in the Outpatient Setting	
MED.00011	Sensory Stimulation for Brain-Injured Individuals in Coma or Vegetative State	
MED.00013	Parenteral Antibiotics for the Treatment of Lyme Disease	New
MED.00053	Non-Invasive Measurement of Left Ventricular End Diastolic Pressure in the Outpatient Setting	
MED.00059	Idiopathic Environmental Illness (IEI)	
MED.00089	Quantitative Muscle Testing Devices	
MED.00097	Neural Therapy	
MED.00128	Insulin Potentiation Therapy	New
MED.00148	Gene Therapy for Metachromatic Leukodystrophy	New
RAD.00061	PET/MRI	
SURG.00023	Breast Procedures; including Reconstructive Surgery, Implants and Other Breast Procedures	
SURG.00084	Implantable Middle Ear Hearing Aids	
SURG.00113	Artificial Retinal Devices	
SURG.00152	Wireless Cardiac Resynchronization Therapy for Left Ventricular Pacing	
SURG.00158	Implantable Peripheral Nerve Stimulation Devices as a Treatment for Pain	
SURG.00161	Nanoparticle-Mediated Thermal Ablation	
Carelon MBM Cardiovascular	Imaging of the Heart	New
Carelon MBM Genetic Testing	Carrier Screening in the Reproductive Setting	
Carelon MBM Genetic Testing	Cell-free DNA Testing for the Management of Cancer	
Carelon MBM Genetic Testing	Chromosomal Microarray Analysis	
Carelon MBM Genetic Testing	Genetic Testing for Inherited Conditions	
Carelon MBM Genetic Testing	Hereditary Cancer Testing	
Carelon MBM Genetic Testing	Pharmacogenomic Testing	
Carelon MBM Genetic Testing	Predictive and Prognostic Polygenic Testing	
Carelon MBM Genetic Testing	Prenatal Testing Using Cell-free DNA	

Clinical Utilization Management Criteria Page 4 of 4

Criteria Number	Criteria Title	New Item
Carelon MBM	Somatic Tumor Testing	
Genetic Testing		
Carelon MBM	Whole Exome and Whole Genome Sequencing	
Genetic Testing		
Carelon MBM	Interventional Pain Management (MSK)	
Musculoskeletal		
Carelon MBM	Sacroiliac Joint Fusion	New
Musculoskeletal		
Carelon MBM	Joint Surgery	New
Musculoskeletal		
Carelon MBM	Spine Surgery	New
Musculoskeletal		
Carelon MBM	Imaging of the Brain	New
Radiology		
Carelon MBM	Imaging of the Heart	New
Radiology		
Carelon MBM	Vascular Imaging	
Radiology		
Carelon MBM	Oncologic Imaging	New
Radiology		





Email is the quickest and most direct way to receive important information from Anthem.

To start receiving email from us (including some sent in lieu of fax or mail), submit your information using our QR code or via our online form: http://anthem.ly/signup-abcbs-oh.