



SOUTH ATLANTIC MEDICAL GROUP UTILIZATION MANAGEMENT CLINICAL CRITERIA HIERARCHY

In accordance with applicable federal and state guidelines, the following order of precedence shall be observed:

For Medi-Cal Line of Business,

- Criteria required by applicable state or federal regulatory agency
- Health plan-specific clinical policies* (see Additional Resources)
- Corporate or evidence-based guidance addressing new or existing technology, such as Milliman Care Guideline (MCG), eviCore, NIA, InterQual®, Hayes, UpToDate, Apollo Medical Review Criteria Guidelines for Managed Care, etc.

For Medicare Line of Business,

- CMS Medicare National Coverage Determination (NCD), CMS Medicare Local Coverage Determination (LCD), CMS Local Coverage Determinations (LCD), CMS Local Coverage Articles (LCA), or CMS Medicare Benefit Policy Manual
- Health plan-specific clinical policies* (see Additional Resources)
- Corporate or evidence-based guidance addressing new or existing technology, such as Milliman Care Guideline (MCG), eviCore, NIA, UpToDate, Apollo Medical Review Criteria Guidelines for Managed Care, etc.

For Part B Drug and Biologicals Only:

- Medicare Approved Drug Compendia and/or relevant guidance from the FDA according to the rules in the Medicare Benefit Policy Manual Chapter 15, Section 50.4 and sub-chapters, paying special attention to the distinctions for anti-cancer chemotherapy regimen drugs (50.4.5) and immunosuppressive drugs (50.5.1), AND IF APPLICABLE
- Organization Specific Guidelines for Part B Drug Step Therapy or organization Specific Guidelines for Device Preferred Products. Step therapy guidelines can only be applied to drugs not used within the last 365 days

For Commercial Line of Business,

- Member's Evidence of Coverage (EOC) or criteria required by applicable state or federal regulatory agency
- Health plan-specific clinical policies* (see Additional Resources)
- Corporate or evidence-based guidance addressing new or existing technology, such as Milliman Care Guideline (MCG), eviCore, NIA, InterQual®, Hayes, UpToDate, Apollo Medical Review Criteria Guidelines for Managed Care, etc.

World Professional Association for Transgender Health (WPATH): Standards of Care for the Health of Transsexual, Transgender and Gender nonconforming people from WPATH will be utilized as primary source to provide clinical guidance in determination of coverage.

A copy of the criteria used to make a decision is available upon request. Please contact the UM Department ereyes@samg.org or vmolina@samg.org

The link/pathway for Milliman Care Guidelines (MCG) can be located at:

- Blue Shield of California <https://blueshiel dofca.access.mcg.com/index>
- Elevance Health (Anthem) <https://anthem.access.mcg.com/index>
- Molina Healthcare <https://molinahealth.access.mcg.com/index>

Additional Resources:

1. National Coverage Determination (NCD): <https://www.cms.gov/medicare/coverage/determination-process>
2. Local Coverage Determination (LCD): <https://www.cms.gov/medicare/coverage/determination-process/local>
3. Local Coverage Articles (LCA): <https://www.cms.gov/medicare-coverage-database/reports/local-coverage-articles-state-report.aspx?stateRegion=all&contractorNumber=all&articleStatus=all>
4. National Imaging Association (NIA): <https://www1.radmd.com/sites/default/files/2024-01/2024%20NIA%20Advanced%20Imaging%20Guidelines%20v2.pdf>
5. DHCS Medi-Cal Guidelines: <https://mcweb.apps.prd.cammis.medi-cal.ca.gov/publications>
6. National Comprehensive Cancer Network (NCCN) <https://www.nccn.org/guidelines/guidelines-process/about-nccn-clinical-practice-guidelines>
7. Carelon Clinical Guidelines <https://guidelines.carelonmedicalbenefitsmanagement.com/>
8. EviCore <https://www.evicore.com/provider/clinical-guidelines>
9. Up To Date <https://www.uptodate.com/contents/search>
10. Apollo <https://samg.apollomanagedcare.com>
11. *Health plan-specific clinical policies
 - a. Alignment Health Plan <https://www.alignmenthealthplan.com/providers/provider-resources>
 - b. Elevance Health (Anthem) <https://www.anthem.com/provider/policies/clinical-guidelines/>
 - c. Health Net https://www.healthnet.com/content/healthnet/en_us/providers/working-with-hn/medical_policies.html#F
 - d. Molina Healthcare <https://www.molinaclinicalpolicy.com/>