Managed Care Operations Memorandum General Operations MCOPS Memo # 12/2020-018

Date: December 30, 2020

Subject: Utilization Review Criteria Assessment Process (URCAP) - Licensed Proprietary

Product (LPP) Review 2020

To: Physical Health HealthChoices Managed Care Organizations (PH-MCOs) –

Statewide

From: Laurie Rock, Director, Bureau of Managed Care Operations, Office of Medical

Assistance Programs

Purpose:

To notify the HealthChoices PH-MCOs of the URCAP findings from the Department's review of LPPs revision.

Background:

The PH-MCOs must annually submit all LPP decision making tools, including updates, revisions or changes made to utilization review criteria, and policies and procedures for the Department's review and approval prior to implementation.

The Department evaluates all utilization review criteria, including LPP decision-making tools, utilized by the PH-MCOs to make determinations of medical necessity prior to the PH-MCOs implementation of the criteria.

Discussion:

LPP contain nationally recognized clinical criteria utilized by the PH-MCOs as a utilization decision-making tool to approve a service or item for a member. LPPs may not be used to deny a service or item. The 2020 revisions of InterQual Criteria Guidelines, 24th edition Milliman Care Guidelines, 2020 eviCORE Imaging Guidelines, 2020 Magellan Health Care Subsidiary (National Imaging Associates), and 2020 Versant Vision Guidelines were reviewed by the Department to ensure updates do not conflict with PA regulations, the HealthChoices Agreement, and the HealthChoices definition of medically necessity.

All LPP revisions/updates approved are noted as a "pass" and may be implemented into the PH-MCO utilization decision-making tool. The LPP table lists categories and findings by the Department. The LPP table can be found in the following embedded table.

PH-MCOs may not use LPPs for utilization management of Pharmaceutical injectable medications. Pharmaceutical injectable medications are required to have an individual policy submitted to the Department's Prior Authorization Review Panel (PARP) for approval.

Next Steps:

This information must be provided to all appropriate staff, particularly Utilization Management Directors and Medical Directors, within your organization. Please direct questions to the Clinical Operations Unit Supervisor at 717-772-6300.

Obsolete:

This OPS Memo supersedes previously issued OPS Memo 12/2019-013 and remains in effect until further notice.

Attachment:

