

Wellpoint DC *Clinical Criteria*

Wellpoint District of Columbia, Inc. | Medicaid

Effective April 1, 2023, Wellpoint DC will use MCG Care Guidelines, InterQual® Guidelines, Carelon Medical Benefits Management, Inc. * Guidelines, and *Medical Policies* and *Clinical UM Guidelines* to make medical necessity decisions except in cases where the District's *Clinical Criteria* or policy supersede Wellpoint DC criteria.

Wellpoint DC uses nationally recognized, peer-reviewed, evidence-based criteria to make medical necessity determinations for inpatient and outpatient services. These guidelines represent best practices drawn from the current medical evidence. The following modules are utilized to provide guidance for medical necessity, level of care, and site-of-service determinations.

MCG Care Guidelines:

- General Recovery Care (GRG)
- Ambulatory Care (AC)
- Recovery Facility Care (RFC)
- Behavioral Health Care (BHG)

InterQual:

- LOC: Home Care
- LOC: Subacute/SNF
- LOC: Rehabilitation
- LOC: Long-Term Acute Care
- LOC: Acute Pediatric
- LOC: Acute Adult
- LOC: Behavioral Health

Carelon Medical Benefits Management, Inc.

Wellpoint DC may use guidelines developed by Carelon Medical Benefits Management to perform utilization management services for some procedures and certain enrollees.

Carelon Medical Benefits Management, Inc. is an independent company providing utilization management services on behalf of the health plan.