Blue Cross Blue Shield of Michigan will implement InterQual® acute care, rehabilitation, long-term acute care, skilled nursing and home health criteria, effective Aug. 1, 2019. On this date, the modifications outlined below will take effect and all previous modifications and InterQual criteria will be replaced with these guidelines. All precertification requests must be submitted via e-referral. When clinical information is requested for a medical or surgical admission, we require submission of the specific components of the medical record that validate that the request meets the criteria.

**2019 Blue Cross Blue Shield of Michigan modifications (local rules) of InterQual acute care criteria**

Blue Cross will implement the adult and pediatric 2019 InterQual acute care criteria on Aug. 1, 2019. On this date, the modifications outlined below will take effect, and all previous modifications and InterQual criteria will be replaced with these guidelines.

**Acute adult:**

- Uncomplicated detoxification management must be precertified and billed under the psychiatric benefit.

**Guidelines for surgery and procedures in the inpatient setting, adult and pediatric:**

Facilities are required to submit an e-referral for all acute hospital admissions and surgical procedures. All hospital admission precertification requests must be made through the e-referral system.

Procedures that are listed on InterQual’s inpatient listing are either appropriate for the inpatient setting, based on InterQual procedures criteria, or appropriate for the inpatient setting but not addressed by InterQual procedures criteria. Due to variations in practice, surgical procedures marked with an asterisk may be performed as inpatient or outpatient. The attending surgeon continues to determine the best level of care for his or her patient based on the procedure and its urgency, as well as the patient’s stability, co-morbidities and likelihood of complications. Medicare Advantage PPO uses the Centers for Medicare & Medicaid Services inpatient list for determination of procedures appropriate for the inpatient setting.

Blue Cross Blue Shield of Michigan’s medical policies and payment policies apply to procedures that are investigational or experimental.
Note: The postoperative management of outpatient surgical procedures is not considered by Blue Cross to be an observation level of care and should not be billed as such. Blue Cross requires precertification for postoperative management that’s provided in the inpatient setting.

2019 Blue Cross Blue Shield of Michigan modifications (local rules) of InterQual home health care criteria

Blue Cross will implement the 2019 InterQual home health care criteria on Aug. 1, 2019. On this date, the modifications outlined below will take effect, and all previous modifications and InterQual criteria will be replaced with these guidelines.

- Blue Cross criteria require that the patient must be receiving skilled services to meet home health care criteria.

- All home health care visits must be made to the patient’s home. Telephone visits aren’t sufficient to meet Blue Cross criteria.

- Skilled nursing visits, which are provided for eight hours or more per day, don’t meet Blue Cross intensity of service criteria.

2019 Blue Cross Blue Shield of Michigan modifications (local rules) of InterQual rehabilitation criteria

Blue Cross will implement the 2019 InterQual rehabilitation criteria on Aug. 1, 2019. On this date, the modifications outlined below will take effect and all previous modifications and InterQual criteria will be replaced with these guidelines.

- The “Rancho level 3 or less and evolving responses” criteria may not be used as Severity of Illness, or SI, for admission reviews.

- Cardiac rehabilitation and pulmonary rehabilitation don’t meet Blue Cross requirements for the acute inpatient rehabilitation level of care and must be administered under each member's contract benefits.

- The “Ventilator management or weaning” and “Uncontrolled pain with neurologic or musculoskeletal etiology” criteria may not be used as SI for admission reviews.

- The “medical instability (new onset)” criteria may not be used as intensity of service, or IS, for continued stay reviews.

- Speech, cognitive, language, swallowing impairment and respiratory therapy don’t meet criteria for Blue Cross patients without meeting physical and occupational therapy criteria. Physical and occupational therapy are required criteria for precertification and recertification of acute rehabilitation inpatient facility treatment.
• Blue Cross requires that cases for patients requiring total assistance in all areas be reviewed by a medical consultant.

• Blue Cross requires that for IS criteria, the “post admission evaluation” must be a “preadmission evaluation” by a rehabilitation medical practitioner or authorized representative with the recommendation of acute inpatient rehab.

• Blue Cross rehabilitation criteria require that group therapy be limited to three participants requiring similar treatments. Of the required three hours, no more than 30 minutes (two units) per day can be completed in a group. Documentation should include the number of participants, length of time or units of group therapy, the treatments given, the patient’s response and the necessity of treatments.

• Blue Cross will review precertification requests for major joint arthroplasty no sooner than the third post-operative day. Therapy notes from the operative day and post-operative day one won’t be accepted.

2019 Blue Cross Blue Shield of Michigan modifications (local rules) of InterQual skilled nursing facility criteria

Blue Cross will implement the 2019 InterQual skilled nursing facility criteria on Aug. 1, 2019. On this date, the modifications outlined below will take effect, and all previous modifications and InterQual criteria will be replaced with these guidelines.

• Requests for maintenance therapy don’t meet Blue Cross SNF level of care criteria for precertification.

• For Blue Cross members, multiple stage II pressure ulcers don’t meet the finding for “alteration in skin integrity” criteria for SNF level of care.

• Therapy services must include physical or occupational therapy. Speech, cognitive, language or swallowing therapy does not meet as a stand-alone criterion for Blue Cross members.

• The finding criteria “Life expectancy ≤3 weeks” doesn’t meet Blue Cross SNF level of care criteria for precertification.

Note: Group-specific benefits may vary.

• “Pain management” and “Uncontrolled pain” may not be selected as admission or continued-stay criteria for Blue Cross members under the SNF benefit.

• ”Neurological assessment >1x/24h” may not be used as SNF Admission Intervention or recert Partial Responder criteria.
• Transplant cases must be administered under the Human Organ Transplant Program benefit and aren’t precertified under SNF.

• “Complex PO medication regimen (new)” may not be used as SNF recert Partial Responder criteria.

• “Enteral feedings” and “Tube feeding (new)” is revised as: “Tube feeding (new) or parenteral feedings (new) > one.”

• “Patient or caregiver education” may not be used for SNF recert Partial Responder criteria.

• Blue Cross requires that cases for patients requiring total or maximum assistance in all areas will be reviewed by a medical consultant.

• Blue Cross will review precertification requests for major joint arthroplasty no sooner than the third postoperative day. Therapy notes from the operative day and post-operative day one won’t be accepted.

2019 Blue Cross Blue Shield of Michigan modifications (local rules) of InterQual long-term acute care criteria

Blue Cross will implement the 2019 InterQual LTAC criteria on Aug. 1, 2019. On this date, the modification outlined below will take effect, and all previous modifications and InterQual criteria will be replaced with this guideline.

• For Blue Cross members, “Pain management” can’t be used as a standalone criteria point for “Continued medical management of primary condition or illness.”