



To: Medi-Cal IPA Administrators, Medical Directors & Behavior Health Providers
From: IEHP – Provider Relations
Date: February 20, 2020
Subject: **New/Revised/Retired UM Authorization Guideline**

IEHP’s Utilization Management Subcommittee has approved the following authorization guidelines, effective 2/12/2020:

Guideline #	Guideline Title	Degree of Change	Revisions
UM_OTH 20	Spravato (esketamine)	New	<ul style="list-style-type: none"> • FDA approved for treatment-resistant depression in adults • Requires prior inadequate response to multiple antidepressants • Only available at treatment centers under the supervision of a Psychiatrist certified by FDA regulated REMS (Risk Evaluation and Mitigation Strategy) program.
UM_BH 07	Behavioral Health Home Base Services	New	<ul style="list-style-type: none"> • Requires either a referral by a physician OR meeting criteria on the Screening Form • 18 years of age or older • Requires that travel outside of home is contraindicated because of a medical and/or mental health condition. • Must have a persistently poor self-management or inconsistent treatment history • Must be able to cognitively engage in treatment and adhere to treatment goals
UM_OTH 14	Hepatitis C-Center of Excellence (COE) Admission Criteria	Minor	<ul style="list-style-type: none"> • List of specific facilities has been removed • Formulary treatment regimen is periodically reviewed by the IEHP Pharmacy and Therapeutics Subcommittee

Guideline #	Guideline Title	Degree of Change	Revisions
UM_BH 05	Behavioral Health Treatment Services	Retired	<ul style="list-style-type: none"> • UM Subcommittee Guideline is based on DHCS All Plan Letter 18-006 • Recommend retiring UM Subcommittee guideline and replace with DHCS All Plan Letter 18-006, Responsibilities for Behavioral Health Treatment Coverage for Members Under the Age of 21
UM_DME 02	Binaural (Analog or Digital) Hearing Aids	Retired	<ul style="list-style-type: none"> • Medicare does not cover hearing aids • Medi-Cal covers hearing aids but does not provide criteria • Apollo Guideline includes criteria for air conduction hearing aids • Recommend retiring the current UM Subcommittee Guideline and replacing with Apollo DM 173 Hearing Aids: External, Bone-Anchored (BAHA) and Implantable
UM_DIA 16	Video Electroencephalogram (EEG)	Retired	<ul style="list-style-type: none"> • Indications outlined in MCG guideline are similar to that of UM subcommittee guideline but go into more detail regarding clinical indications. • Recommend retiring the current UM Subcommittee Guideline and replacing with MCG M-580 EEG, Video Monitoring
UM_DIA 12	Magnetic Resonance Spectroscopy (MRS)	Retired	<ul style="list-style-type: none"> • UM Subcommittee Guideline considers MRS to be investigational and not medically necessary • MCG cites more recent information that MRS may be indicated for differentiating current or residual brain neoplasm from post-therapy change or non neoplastic lesions • Recommend retiring the current UM Subcommittee Guideline and replacing with MCG A-0482 Magnetic Resonance Spectroscopy

You may access these and all other authorization guidelines through the Provider portal.

Location: www.iehp.org > For Providers > Provider Resources > Utilization Management Criteria

As a reminder, all communications sent by IEHP can also be found on the Provider portal:

Location: www.iehp.org > For Providers > Plan Updates > Correspondence

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054.