

Operations Bulletin 07-11



Date: November 30, 2011

To: Participating Hospital Facilities

Re: **New Medical Management Criteria: Milliman Care Guidelines®**

Beginning January 1, 2012, Geisinger Health Plan Medical Management Department will transition from InterQual® Criteria to Milliman Care Guidelines® for determination of appropriate inpatient levels of care for our Members. This change will not affect the current precertification and concurrent review notification process. For inpatient admissions that span this transition period, Medical Management will incorporate the Milliman Hospital Care Planning and Discharge Planning guidelines into the concurrent review discussions.

Milliman Care Guidelines are used by more than 1,700 clients to support the care management of a majority of Americans. A full-time clinical staff uses the industry's most rigorous evidence-based methodology including a hierarchy of evidence grading starting with randomized controlled trials, then other published sources, and finally, appropriate unpublished data. All content is reviewed annually, and updated as necessary, by physicians and nurses.

Milliman Care Guidelines:

- Support proactive care and define best practices which help reduce unnecessary variation and improve care quality and efficiency. Milliman products provide detailed admission and procedure criteria including care pathways, alternatives to admission, operative status criteria, plus pediatric and behavioral health content;
- Integrate clinical evidence. Milliman's full time faculty develops guidelines using explicit evidence-based principles providing direct links to references and available extracts and a narrative Annotated Bibliography;
- Offer concurrent review and discharge planning. The guidelines describe key elements and recovery milestones, help track potentially avoidable variances that may increase length of stay, prompt discharge planning activity, and indicate when a patient is ready for discharge or transition to a lower level of care;
- Include length of stay targets and utilization models;
- Incorporate national quality measures. Diagnosis and procedure-specific Hospital Quality Alliance measures are integrated within the guidelines and are flagged and footnoted through appropriate diagnoses;
- Present guidance for extended stays and complications including prevention, continued stay, and discharge information; and;
- Provide care planning and management assistance. Alternative care content is available in every guideline: including guidance on common tests, procedures, treatments, consultations. Care management tools include patient, family, and caregiver education.

As always, a copy of the criteria used to make a denial determination is available upon request by phone or in writing by contacting:

**Geisinger Health Plan
Medical Management Department
100 North Academy Ave
Danville, PA 17822-3218
Telephone: (800) 544-3907
Fax: (570) 271-5534**

Information contained in this Operations Bulletin is effective January 1, 2012 for all Health Plan product lines and amends the Participating Provider Guide.