Children’s Hospital and Health System
Chorus Community Health Plans (CCHP)
Policy and Procedure

This policy applies to the following entity(s):
- CHW – Milwaukee
- CHS Foundation
- CHW – Community Services Division
- Children’s Medical Group - Primary Care
- Children’s Medical Group - Urgent Care

Medical Utilization Management Policy

SUBJECT: NEW TECHNOLOGIES

INCLUDED PRODUCT(S):

Medical Coverage
- Medicaid
  - BadgerCare Plus
- Individual and Family
  - Commercial
  - Care4Kids Program
  - Commercial

PURPOSE OR DESCRIPTION:

CCHP’s New Technologies policy describes how CCHP incorporates new healthcare technologies into its benefit plan. New technologies include medical and behavioral health services, supplies, durable medical goods, implantable medical devices, and pharmaceuticals. Also included are new applications or new indications for existing technologies. For additional related policy information, see CCHP’s Medical Necessity Utilization Management Policy.

POLICY:

1. For CCHP’s Medicaid product line (BadgerCare Plus) only:
   a. Before any new technology can be considered for inclusion, it must be added to the State of Wisconsin’s list of Medicaid covered health services.

2. For all product lines, CCHP uses the evidence-based guidelines provided by MCG (formerly called Milliman Care Guidelines) to determine when to incorporate new technologies, and what criteria are needed, into the benefit plan. MCG’s annual updates cover most of the new technologies CCHP needs to evaluate.
3. For new technologies requiring consideration before MCG’s annual update, the process is as follows:
   a. A CCHP Medical Director initiates and manages the process. For new behavioral health technologies, the CCHP Medical Director for Behavioral Health will initiate and manage the process.
   b. CCHP uses one or more of the following resources when developing a new medical utilization management policy:
      i. On-line medical literature library, search engines, and guidelines provided by CCHP’s parent organization, Children’s Wisconsin. This includes guidelines of specialty organizations, government agencies, and national/international evidence-based databases, such as Cochrane.
      ii. Hayes, Inc. CCHP maintains a subscription service with Hayes, which includes evidence-based technology reviews that are updated on a weekly basis. Included in this subscription service is the ability to request a consult with a Hayes medical specialist to review any service, including new technologies.
   c. When a new Medical Utilization Management Policy is drafted, the Medical Director will bring this to CCHP’s Medical Advisory Committee (MAC). MAC members represent specialties that would be affected by the policy, including behavioral health specialists.
   d. After approval by CCHP’s MAC, the new Medical Utilization Management Policy is then presented for final approval by CCHP’s Quality Oversight Committee (QOC).
4. For new pharmaceuticals, or new uses of existing pharmaceuticals:
   a. For CCHP’s Medicaid product line, pharmaceutical benefits are managed by the State of Wisconsin Medicaid program. Therefore, CCHP does not independently assess new pharmaceuticals for benefit inclusion.
   b. For CCHP’s marketplace individual and family plans product line, CCHP contracts with UPMC (University of Pittsburgh Medical Center) to manage utilization for the pharmacy benefit. Evaluation of new pharmaceuticals is managed through UPMC’s pharmacy and therapeutics committee. Information about new pharmaceutical additions to the formulary is provided to CCHP after each meeting. See UPMC’s New Technology for Pharmaceuticals policy.
5. In the event a decision for coverage of a new technology must be made before the formal process described above can be concluded, a CCHP Medical Director, using the resources above, will make the decision based on section #3 of CCHP’s Medical Necessity Utilization Management Policy, which is reprinted here:
   a. For a new healthcare service or supply, a current one with a new application or indication, or for any service or supply without an applicable MCG guideline or a CCHP medical utilization management policy, CCHP will apply the above definition of medical necessity and consider any of the following questions which apply to the service or supply when determining if it is medically necessary:
      i. Is it consistent with the symptoms or diagnosis?
      ii. Is it provided according to generally accepted medical practice standards?
      iii. Is it only for custodial care?
      iv. Is it solely for the convenience of the practitioner or the covered member?
      v. Is it an experimental or investigational treatment?
      vi. Is it provided in the most cost effective care facility or setting?
      vii. Does it not exceed the scope, duration, or intensity of the level of care needed to provide safe, adequate and appropriate diagnosis or treatment?
viii. When specifically applied to a hospital confinement, can the diagnosis and treatment of the medical symptoms or conditions not be safely provided in the outpatient setting?

REFERENCES:

1. CCHP Medical Necessity Utilization Management Policy
2. MCG Careweb Guidelines, Copyright © 2016 MCG Health, LLC. All Rights Reserved