



Utilization Management Criteria

The role of the Utilization Management (UM) Department and Case Management (CM) Department is to ensure consistent delivery of appropriate and quality health care services to our members. The UM functions include pre-certification, inpatient concurrent review, discharge planning and retrospective review.

UM and CM decision making is based on Health Plan contract, benefit coverage and appropriateness of care. Vantage Medical Group provides equitable care and decision making to all patients without regard to race, color, religion, national origin, creed, service in the uniformed services (as defined in State and Federal law), veteran status, sex, age, political ideas, marital or family status, physical or mental disability, sexual orientation or on the basis of any factor that is related to health status.

- UM and CM decision making is based only on appropriateness of care and service and existence of coverage.
- Vantage Medical Group does not specifically reward practitioners or other individuals for issuing denials of coverage or service care.
- Member healthcare is not compromised.
- Vantage Medical Group does not offer financial incentives to UM and CM decision makers that encourage decisions that result in underutilization.
- Practitioners are ensured independence and impartiality in making referral decisions that will not influence:
 - Hiring
 - Compensation
 - Termination
 - Promotion
 - Any other similar matters

Authorization/denial determinations are based on medical necessity and reflect appropriate application of approved clinically sound, nationally developed and accepted practice guidelines as follows:

- MCG Version 9.1 Content Version 21.1 Copyright Date 2018
- Apollo Managed Care
 - Medical Review Criteria for Managing Care, 17th Edition, 5th Online 2018
 - Acute Care Inpatient Review Criteria Guidelines 5th Online Edition, 2018
 - Managing Physical/Occupational/Speech Therapy & Rehabilitation Care 13th Edition, 5th Online Edition 2018
 - Managing Behavioral Health Care, Review Criteria, Care Management 8th Edition, 5th Online Edition 2018
- National Comprehensive Cancer Network (NCCN) Guidelines

To access the Health Services Department for questions about the UM process or how to obtain copies of UM and CM criteria, please call (951) 280-7700 or Toll Free (855) 257-9964 or TTY 711 during regular business hours, Monday through Friday, 8:00AM to 5:00PM.

UM and CM criteria, policies and procedures used to authorize, modify or deny services are available upon request to members or member designated representative, contracted health care provider and the public. Criteria are available as copy, to be read over the phone, review at each provider office, distributed via the internet, via fax, mail or email. Vantage Medical Group will provide a paper copy upon request.