

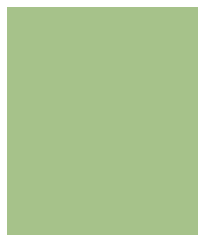
Care Providers & Commissioners

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InterQual® Evidence-Based Clinical Content

InterQual Evidence-Based Criteria Portfolio **Enabling shared, clinical decision support**

McKesson's InterQual® Criteria portfolio helps support better patient outcomes through integrated, streamlined care management processes and evidence-based appropriateness of care decision support. The InterQual content portfolio consists of four content suites:

- **InterQual Level of Care Criteria**
- **InterQual Care Planning Criteria**
- **InterQual Behavioral Health Criteria**
- **InterQual Complex Case Management Content**



Unmatched Content Integrity

InterQual Criteria has been refined and proven to provide exceptional credibility and integrity. The InterQual development cycle combines systematic, critical appraisal of the medical literature by our highly trained clinical development team—comprised of medics, registered nurses and allied health professionals—with peer review from our InterQual Clinical Review Panel of more than 800 experts.

Every content update or addition undergoes extensive peer review by multiple experts from across the world, plus an additional round of review to validate clinical accuracy by independent medical experts for each relevant discipline.



**BUSINESS
CARE
CONNECTIVITY**

InterQual Level of Care Criteria

InterQual Level of Care Criteria help healthcare organizations assess the clinical appropriateness of patient services across the continuum of care: prospectively, concurrently or retrospectively. Robust clinical detail allows organizations to consider in real time the severity of illness, comorbidities and complications, as well as the intensity of services being delivered, guiding them to the most appropriate, safest level of care. They also assist the care manager in discharge planning and transitioning care across the continuum.

InterQual Level of Care Criteria	Description
InterQual Acute Adult Criteria	Help determine the appropriateness of admission, continued stay and discharge at acute care facilities for patients who are age 18 or older. InterQual Acute Adult Criteria are organized by primary condition in a “condition-specific” format and include relevant complications, comorbidities, guideline standard treatments, proactive care management guidance, and benchmark length of stay, all in one view. Addressing the individual patient, the criteria facilitate moving patients through the care continuum, based on their response to treatment. This integrated approach to utilization and case management is a powerful aid to decreasing inappropriate admissions, avoidable days and readmissions.
InterQual Acute Pediatric Criteria	Help determine the appropriateness of admission, continued stay and discharge at acute care facilities for patients who are less than 18 years of age. InterQual Acute Pediatric Criteria feature the same “condition-specific” format as the adult criteria including comorbidities and benchmark length of stay.
InterQual Long-Term Acute Care Criteria	Help determine the appropriateness of admission, continued stay and discharge at long-term acute care facilities.
InterQual Rehabilitation Criteria	Help determine the appropriateness of admission, continued stay and discharge at inpatient rehabilitation facilities for the adult and pediatric patient.
InterQual Subacute & Skilled Nursing Facility Criteria	Help determine the appropriateness of admission, continued stay and discharge at subacute and skilled nursing facilities.
InterQual Home Care Criteria	Support healthcare professionals in determining the appropriateness of initial and ongoing skilled home care services, hospice and palliative care needs for the adult and pediatric patient. Home Care Criteria also include visit recommendations.
InterQual Outpatient Rehabilitation & Chiropractic Criteria	Aid in determining the appropriateness of initial and ongoing outpatient rehabilitation and chiropractic services for the adult, adolescent and pediatric patient, including visit recommendations.

InterQual Care Planning Criteria

InterQual Care Planning Criteria help to identify when imaging studies, procedures, molecular diagnostics, durable medical equipment, specialty referral consultations, and specialty pharmaceuticals are medically appropriate based on the evidence. The criteria feature extensive informational notes and references that support clinical recommendations and offer guidance to the reviewer in a timely manner. The intuitive Q&A format, available in all Care Planning Criteria, supports efficient review workflows. In addition, where appropriate, the best evidence-based recommendation is suggested within a single workflow according to the clinical scenario presented (e.g., MRI being superior to CT of the head in cases of evaluation for primary brain tumor), driving more value from your criteria investment.

InterQual Care Planning Criteria	Description
InterQual Durable Medical Equipment Criteria	Address the most challenging, costly and time-consuming equipment requiring authorization. They distinguish between senior and general populations (adult and pediatric), and the senior subsets align with Medicare coverage guidelines. The criteria also include ICD-9 codes, ICD-10 codes, and HCPCS codes to facilitate the authorization process. These criteria are updated at a minimum, twice per year to help ensure alignment with Centers for Medicare & Medicaid Services (CMS) updates of local coverage determination (LCDs), national coverage determination (NCDs) for the senior set and policy articles.
InterQual Imaging Criteria	Address high-volume, high-cost imaging studies and include ICD-9 codes, ICD-10 codes, and CPT® codes. Covering more than 240 imaging studies, the criteria provide the most comprehensive coverage of imaging studies for pediatric, adolescent and adult populations in the industry, including Computed Tomography (CT), Magnetic Resonance Imaging (MRI) and Positron Emission Tomography (PET). In addition, the criteria help identify the most appropriate imaging studies based on the clinical presentation of the patient and the best medical evidence available.

InterQual Molecular Diagnostics Criteria	Help healthcare organizations determine whether a genetically-based lab test is appropriate based on the evidence and the patient’s clinical presentation. The criteria also help you make more appropriate test utilization decisions, so treatment can be tailored to genetic make-up while helping ensure the cost-effective allocation of medical resources. The tests are organized into more than 120 families, including the newest and most complex tests and test panels requiring authorization such as inherited and non-inherited breast cancer, non-small cell lung cancer, and colon cancer.. The criteria include lower-cost, non-molecular tests that are often the most clinically appropriate. Also included are Clinical Evidence Summaries which provide extensive support. These criteria are updated semi-annually to reflect the fast pace of change in the molecular diagnostics literature.
InterQual Procedures Criteria	Support quality care and better outcomes for patients by helping providers ensure that the appropriate clinical management steps have been taken prior to an invasive procedure or surgery. The criteria cover more than 350 high-volume, high-cost procedures covering major categories of surgical and invasive procedures for all body systems for adults and children. The criteria include arthroscopy, hysterectomy, bariatric surgery and adenoidectomy. The criteria also recommend whether the procedure or surgery can be performed in an inpatient or outpatient setting depending on the patient’s clinical presentation.
InterQual Specialty Referral Criteria	Help identify when referral to specialty care is appropriate and when care should remain in the hands of a generalist or be co-managed by both. Also provides guidance on the appropriate type of specialist that should be consulted as well as the typical duration of involvement.
InterQual Specialty Rx Non-Oncology Criteria	Help guide the most appropriate use of a drug based on the latest medical evidence, providing clear guidance on step therapy and addressing both on-label and off-label indications. The criteria cover 108 drugs for 27 common conditions. Sample conditions include Crohn’s disease, factor deficiency, hepatitis, multiple sclerosis and rheumatoid arthritis. These criteria are updated, at a minimum, twice per year.
InterQual Specialty Rx Oncology Criteria	Help guide the most appropriate use of an oncology drug based on the latest medical evidence, providing clear guidance on the drug in the context of the appropriate regimen and addressing both on-label and off-label indications. The criteria cover 34 drugs for 51 cancer and cancer-related conditions and incorporate content from the National Comprehensive Cancer Network® (NCCN®), the market leader in decision support for the use of drugs and biologics in treating cancer. The NCCN content is used for determining criteria for off-label (non-FDA approved) oncologic drug use. On-label indications are developed utilizing the InterQual Criteria development process. Specialty Rx Oncology Criteria delivered via McKesson or McKesson-partner software are the only automated source for NCCN recommendations on appropriate use of off-label prescription drugs and biologics in patients with cancer. The criteria are updated, at a minimum, twice per year.
SIM <i>plus</i> Retrospective Monitoring Criteria	Help enable healthcare organizations to assess the appropriateness of surgical and invasive procedures. Retrospective assessments can be performed to identify care delivery improvement opportunities, which can help increase quality and decrease risk.

InterQual Behavioral Health Criteria

InterQual Behavioral Health Criteria support initial and continued stay level of care decisions across the behavioral health continuum of care. The criteria address the varying needs of geriatric, adult, adolescent, and child patients with both psychiatric and substance use disorders. The depth of criteria allows care managers to consider symptoms, functional status and quality of support system as determinants for the most appropriate level of care. The criteria follow our new continuum format and present all levels of care in one view. This format incorporates the episode day feature to provide timeline guidance for each patient and condition (similar to the level of care condition-specific format). It also provides criteria to assess the status of the individuals’ symptoms and provides guidance for safe movement to alternate levels of care.

InterQual Behavioral Health Criteria	Description
InterQual Adult & Geriatric Psychiatry Criteria	For the review of patients/members who are age 18 and older.
InterQual Child & Adolescent Psychiatry Criteria	For the review of patients who are age 4 through 17 years of age.
InterQual Substance Use Disorders Criteria	For the review of patients/members age 13 years and older.
InterQual Behavioral Health Procedures Criteria	For the review of behavioral health procedures for all age groups. The exception is the Applied Behavior Analysis (ABA) criteria, where the age range is 18 months through 12 years.

InterQual Complex Case Management Content

InterQual Complex Case Management Content supports management of complex cases or high-risk members.

- **InterQual Coordinated Care Content** patented assessments blend multiple conditions or disease states and generate content for a patient-specific care plan. The primary assessment covers common barriers to care, case management and more than 40 specific conditions or disease states. In addition, there is a separate readmission reduction assessment to aid in mitigating avoidable readmissions within 30 days of hospital discharge.

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