

HEALTH POLICY COMMISSION

OFFICE OF PATIENT PROTECTION



MEMORANDUM TO INSURANCE CARRIERS

To: Commercial Health Insurers, Blue Cross Blue Shield of Massachusetts, and Health Maintenance Organizations Accredited Pursuant to M.G.L. c. 176O; and Other Interested Parties

From: Jenifer Bosco, Director, Office of Patient Protection

Date: April 27, 2015

Re: Process for Disclosure of Medical Necessity Criteria to the Office of Patient Protection

As outlined in the bulletin issued jointly by the Health Policy Commission and the Division of Insurance (Bulletin HPC-OPP 2014-01/DOI Bulletin 2014-10), M.G.L. c. 6D, §16; M.G.L. c. 176O, §12; and M.G.L. c. 176O, §16 have been amended to provide greater public access to medical necessity criteria.

In addition, the amended laws protect the confidentiality of medical necessity criteria that is proprietary in nature. As described in Bulletin HPC-OPP 2014-01/DOI Bulletin 2014-10, proprietary medical necessity criteria shall be made available upon request to insureds, prospective insureds, health care providers, the Office of Patient Protection and the Division of Insurance. Proprietary criteria need not be disclosed to the public, and shall not be subject to disclosure under Massachusetts public records laws.

The Office of Patient Protection requests that Commercial Health Insurers, Blue Cross Blue Shield of Massachusetts, and Health Maintenance Organizations accredited pursuant to M.G.L. c. 176O submit all proprietary and non-proprietary medical necessity criteria and protocols in use for the 2015 calendar year to the Office of Patient Protection on or before May 21, 2015, subject to the processes outlined below.

The Office of Patient Protection is aware that insurance carriers may use, in whole or in part, criteria purchased from a vendor or “proprietary criteria,” such as McKesson’s InterQual criteria. Some proprietary criteria, such as the InterQual criteria, are typically used in an on-line form and submission of these criteria and updates on paper would likely be unwieldy and inefficient. Therefore, the Office of Patient Protection offers the following simplified submission process for carriers:

1. McKesson InterQual Criteria

Carriers that use some or all of the InterQual criteria may authorize McKesson to provide access to relevant sections of the InterQual criteria to the Office of Patient Protection on their behalf.

Carriers shall submit the following information to the Office of Patient Protection:

- Documentation or a statement indicating that the carrier has authorized McKesson to disclose its InterQual medical necessity criteria to the Office of Patient Protection on the carrier's behalf
- A list of the sections of the InterQual criteria that the carrier uses, and for which health plans
- An electronic or hard copy of other non-proprietary criteria or protocols used by the carrier

2. Other Proprietary Criteria

Carriers that use some or all of the proprietary criteria from a vendor other than McKesson may either provide such proprietary criteria directly to the Office of Patient Protection or authorize and direct the vendor to provide access to relevant sections of the proprietary criteria to the Office of Patient Protection on their behalf. Such carriers shall submit the following information to the Office of Patient Protection:

- Either a copy (electronic or hard copy) of proprietary criteria in use by the carrier, or documentation to show that the carrier has authorized the vendor to contact the Office of Patient Protection and provide proprietary medical necessity criteria to the Office of Patient Protection on the carrier's behalf
- If the carrier chooses to authorize the vendor to provide proprietary medical necessity criteria to the Office of Patient Protection on the carrier's behalf, a list of the sections of the proprietary criteria that the carrier uses, and for which health plans
- An electronic or hard copy of other non-proprietary criteria or protocols used by the carrier

3. Non-proprietary Criteria

Carriers that do not use any proprietary medical necessity criteria or protocols shall submit the following information to the Office of Patient Protection:

- An electronic or hard copy of all non-proprietary medical necessity criteria or protocols in use by the carrier

Submission Deadline

Submissions are due to the Office of Patient Protection by May 21, 2015. Submissions may be sent by email to HPC-OPP@state.ma.us, or by mail to:

Health Policy Commission
Office of Patient Protection
50 Milk Street, 8th Floor
Boston, MA 02108

Updates

All carriers are also directed to provide prompt updates to the Office of Patient Protection if the submitted criteria or protocols are updated or if new criteria or protocols are added throughout the calendar year. Updates may be provided in the same manner used by the carrier to provide its initial submission of criteria or protocols.

Please direct any questions to Jenifer Bosco, Director of the Office of Patient Protection, at 617-979-1413 or jenifer.bosco@state.ma.us.