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To: IPA Administrators and Medical Directors
From: IEHP – Provider Relations
Date: November 3, 2022
Subject: **Revised UM Authorization Guidelines**

IEHP’s Guideline Review Committee has approved the following authorization guideline updates/changes, effective November 1, 2022:

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_CSS 09	Sobering Centers	Revised Minor	Highlights: <ul style="list-style-type: none">• Updated Section D to better align with CSS Policy Guide.• Revised coverage limitations and exclusions language.• Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.
UM_CSS 07	Environmental Accessibility Adoptions-Home Modifications	Revised Minor	Highlights: <ul style="list-style-type: none">• Revised language to include additional examples of home modifications as per CSS Policy Guide.• Revised language around eligibility requirements, in an effort to better align with CSS Policy Guide.• Revised formatting of language under Coverage Limitations and Exclusions.• Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_CSS 06	Asthma Remediation	Revised Minor	Highlights: <ul style="list-style-type: none"> • Included additional items/services that can be considered for coverage under the program as per CSS Policy Guide. • Revised language around required documentation, in an effort to better align with CSS Policy Guide. • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.
UM_CSS 05	Housing Tenancy and Sustaining Services	Revised Minor	Highlights: <ul style="list-style-type: none"> • Revised eligibility requirements in an effort to better align with CSS Policy Guide. • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.
UM_CSS 04	Housing Transition Navigation Services	Revised Minor	Highlights: <ul style="list-style-type: none"> • Revised language under what housing transition services include as per CSS Policy Guide. • Added a hyperlink to CSS referenced within guideline. • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.
UM_CSS 03	Housing Deposits	Revised Minor	Highlights: <ul style="list-style-type: none"> • Included additional items that could be covered under Housing Deposits as per CSS Policy Guide. • Removed “at-risk of homelessness” as required eligibility (CSS Policy Guide does not include) • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_CSS 02	Nursing Facility Transition-Diversion to Assisted Living Facilities	Revised Minor	Highlights: <ul style="list-style-type: none"> • Revised language under allowable expenses as per CSS Policy Guide. • Revised language under coverage limitations and exclusions. • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.
UM_CSS 01	Community Transition Services/Nursing Transition to a Home	Revised Minor	Highlights: <ul style="list-style-type: none"> • Included hyperlinks to referenced UM guidelines • Revised language around eligibility requirements, in an effort to better align with CSS Policy Guide. • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.
UM_CSS 10	Recuperative Care	Revised Minor	Highlights: <ul style="list-style-type: none"> • Revised language to better align with CSS Policy Guide. • Revised required eligibility language in an effort to better align with the CSS Policy Guide. • Added presumptive authorization language as required by DHCS. • Revised coverage limitations and exclusions. • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.
UM_CSS 11	Short-Term Post-Hospitalization Housing	Revised Minor	Highlights: <ul style="list-style-type: none"> • Revised language to better align with CSS Policy Guide. • Added hyperlinks for referenced CSS. • Added presumptive authorization language as required by DHCS. • Regulatory source definition revised from In Lieu of Services (ILOS) to Community Support Services.

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_SUR 04	Transgender Services	Revised Moderate	<p>Highlights:</p> <ul style="list-style-type: none"> • Gender dysphoria is a state of distress or discomfort experienced by an individual if they feel their gender identity differs from their sex assigned at birth. IEHP considers requests for transgender services approvable if they are supported by evidence of medical necessity, and if applicable, evidence supporting the statutory criteria for reconstructive surgery. • Medicare has issued an NCD that states MCP’s should make coverage determinations on a case by cases basis, while Medi-Cal has both a general policy and an APL that reference the World Professional Association for Transgender Health (WPATH) Standards of Care (SOC) publication as an exemplary source of clinical guidance on these issues. • MCG has three guidelines regarding criteria necessary to qualify for specific gynecologic, urologic, and general transgender surgeries. Apollo has two guidelines that give general overviews of gender dysphoria, as well as criteria for hormone and surgical affirming care. Both use SOC as their main reference. • IEHP’s recommendation is to continue utilizing our UM Subcommittee Guideline, “Transgender Services” for both the Medicare and Medi-Cal lines of business. It has endorsed WPATH’s SOC as an appropriate resource to guide decision-making.
UM_OTH 17	Hair Removal	Revised Minor	<p>Highlights:</p> <ul style="list-style-type: none"> • IEHP considers hair removal medically necessary for gender-affirming treatments and procedures, as well as in cases of hirsutism when it is associated with endocrinopathies, neoplasms and/or medication. • Medicare does not address hair removal, while Medi-Cal has both a general policy and APL that reference hair removal as a covered benefit in patients with the diagnosis of gender dysphoria when they are transitioning from male to female. • MCG is silent on this topic, while Apollo has a guideline that states hair removal is indicated in cases of hirsutism secondary to endocrinopathies, neoplasms and/or medication. Otherwise, Apollo calls hair removal cosmetic. • IEHP’s recommendation is to continue utilizing our UM Subcommittee Guideline, “Hair Removal” for both the Medicare and Medi-Cal lines of business. For this review cycle our guideline has updated formatting and references.

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_BH 08	Behavioral Health Treatment (BHT)	Revised Minor	<p>Highlights:</p> <ul style="list-style-type: none"> • Brought to committee due to a minor change in guideline content. • Per DHCS APL 19-014, Medi-Cal provides coverage of BHT services for eligible beneficiaries under 21 years of age. <ul style="list-style-type: none"> ○ Must be medically stable w/o the need for 24hr care ○ Formal request from a physician or psychologist ○ May or may not have a diagnosis of Autism • These services must be provided, observed, and directed under a MCP approved behavioral treatment plan. • This treatment must meet certain criteria and does have service limitations.
UM_OTH 15	Congregate Health Living Facilities	Revised Minor	<p>Highlights:</p> <ul style="list-style-type: none"> • Now under Home and Community-Based Services (HCBS)waivers <ul style="list-style-type: none"> ○ In-Home Operations (IHO) waiver expired ○ Specifically, Home and Community Based Alternatives (HCBA) waiver • Indications remain unchanged <ul style="list-style-type: none"> ○ “The primary need of congregate living health facility residents shall be for availability of skilled nursing care on a recurring, intermittent, extended, or continuous basis. ○ This care is generally less intense than that provided in general acute care hospitals but more intense than that provided in skilled nursing facilities.”
UM_OTH 11	Transportation Criteria	N/A No changes	<p>Highlights: Reviewed, no changes</p>

You may access these and all other authorization guidelines through the Provider portal at:

www.iehp.org > Providers > Provider Resources > Utilization Management Criteria

As a reminder, all communications sent by IEHP can also be found on our Provider Portal at:

www.iehp.org > Providers > Plan Updates > Correspondence

If you have any questions, please contact the IEHP Provider Relations Team at (909) 890-2054, (866) 223-4347 or email

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