

## 2022 Clinical Utilization Management Guidelines

### District of Columbia | Medicaid

Linked is a list of the *Clinical Utilization Management (UM) Guidelines* that Amerigroup District of Columbia, Inc. has adopted.

The full list of *Medical Policies* and *Clinical UM Guidelines* are publicly available on the [\*\*Medical Policy and Clinical UM Guideline subsidiary website\*\*](#). Their purpose is to help you provide quality care by reducing inappropriate use of medical resources.

InterQual® Criteria or MCG Care Guidelines are used for:

- Medical necessity review for medical and behavioral health inpatient review.
- Inpatient site of service appropriateness.
- Inpatient rehabilitation and skilled nursing facility review.
- Outpatient based service or procedure where there is not an established *Medical Policy* or *Clinical UM Guideline*.

In addition, American Society of Addiction Medicine® criteria is used for substance abuse services according to state requirements.

Medicaid state contracts, regulatory guidance, CMS requirements, and our *Medical Policy/Clinical UM Guidelines* supersede MCG Care Guidelines and InterQual Criteria.

**Note:** We make determinations of medical necessity on a case-by-case basis in accordance with the definition of medical necessity that is contained within the Medicaid state contract, regulatory guidance, CMS requirements, or in our *Medical Necessity Criteria Policy ADMIN.0004*. If the request doesn't meet established criteria guidelines, it will be referred to a licensed physician reviewer with the appropriate clinical expertise to make a decision.

## Clinical Utilization Management Guidelines

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The *Clinical Utilization Management Guidelines (CUMG)* below, that are indicated as new, were adopted by the Medical Operations Committee for DC Healthy Families Program enrollees.

To view a guideline, visit [Medical Policies](#) and [Clinical UM Guidelines](#).

| CUMG Number | CUMG Title  | New Item |
|-------------|---|----------|
| CG-ADMIN-01 | Clinical Utilization Management (UM) Guideline for Pre-Payment Review Medical Necessity Determinations When No Other Clinical UM Guideline Exists |          |
| CG-ANC-03   | Acupuncture   |          |
| CG-ANC-04   | Ambulance Services: Air and Water   |          |
| CG-ANC-05   | Ambulance Services: Ground; Emergent  |          |
| CG-ANC-06   | Ambulance Services: Ground; Nonemergent   |          |
| CG-ANC-07   | Inpatient Interfacility Transfers   |          |
| CG-ANC-08   | Mobile Device-Based Health Management Applications  |          |
| CG-BEH-14   | Intensive In-Home Behavioral Health Services  |          |
| CG-BEH-15   | Activity Therapy for Autism Spectrum Disorders and Rett Syndrome  |          |
| CG-DME-03   | Neuromuscular Stimulation in the Treatment of Muscle Atrophy  |          |
| CG-DME-04   | Electrical Nerve Stimulation, Transcutaneous, Percutaneous  |          |
| CG-DME-05   | Cervical Traction Devices for Home Use  |          |
| CG-DME-06   | Pneumatic Compression Devices for Lymphedema  |          |
| CG-DME-07   | Augmentative and Alternative Communication (AAC) Devices with Digitized or Synthesized Speech Output  |          |
| CG-DME-08   | Infant Home Apnea Monitors  |          |
| CG-DME-09   | Continuous Local Delivery of Analgesia to Operative Sites using an Elastomeric Infusion Pump During the Postoperative Period                      |          |
| CG-DME-10   | Durable Medical Equipment   |          |

<https://provider.amerigroup.com/dc>

| <b><i>CUMG</i> Number</b> | <b><i>CUMG</i> Title</b>  | <b>New Item</b> |
|---------------------------|---|-----------------|
| CG-DME-12                 | Home Phototherapy Devices for Neonatal Hyperbilirubinemia   |                 |
| CG-DME-13                 | Lower Limb Prosthesis   |                 |
| CG-DME-15                 | Hospital Beds and Accessories   |                 |
| CG-DME-16                 | Pressure Reducing Support Systems Groups 1, 2 and 3   |                 |
| CG-DME-18                 | Home Oxygen Therapy   |                 |
| CG-DME-19                 | Therapeutic Shoes, Inserts or Modifications for Individuals with Diabetes   |                 |
| CG-DME-20                 | Orthopedic Footwear   |                 |
| CG-DME-21                 | External Infusion Pumps for the Administration of Drugs in the Home or Residential Care Settings                                      |                 |
| CG-DME-22                 | Ankle-Foot & Knee-Ankle-Foot Orthoses   |                 |
| CG-DME-23                 | Lifting Devices for Use in the Home   |                 |
| CG-DME-24                 | Wheeled Mobility Devices: Manual Wheelchairs — Standard, Heavy Duty and Lightweight   |                 |
| CG-DME-25                 | Seat Lift Mechanisms  |                 |
| CG-DME-26                 | Back-Up Ventilators in the Home Setting   |                 |
| CG-DME-30                 | Prothrombin Time Self-Monitoring Devices  |                 |
| CG-DME-31                 | Wheeled Mobility Devices: Wheelchairs — Powered, Motorized, With or Without Power Seating Systems, and Power Operated Vehicles (POVs) |                 |
| CG-DME-33                 | Wheeled Mobility Devices: Manual Wheelchairs — Ultra Lightweight  |                 |
| CG-DME-34                 | Wheeled Mobility Devices: Wheelchair Accessories  |                 |
| CG-DME-35                 | Electric Breast Pumps   |                 |
| CG-DME-36                 | Pediatric Gait Trainers   |                 |
| CG-DME-37                 | Air Conduction Hearing Aids   |                 |
| CG-DME-39                 | Dynamic Low-Load Prolonged-Duration Stretch Devices   |                 |
| CG-DME-40                 | Noninvasive Electrical Bone Growth Stimulation of the Appendicular Skeleton   |                 |
| CG-DME-41                 | Ultraviolet Light Therapy Delivery Devices for Home Use   |                 |
| CG-DME-42                 | Continuous Glucose Monitoring Devices   |                 |
| CG-DME-43                 | High Frequency Chest Compression Devices for Airway Clearance   |                 |

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|--------------------|---|-----------------|
| CG-DME-44          | Electric Tumor Treatment Field (TTF)  |                 |
| CG-DME-45          | Ultrasound Bone Growth Stimulation  |                 |
| CG-DME-46          | Pneumatic Compression Devices for Prevention of Deep Vein Thrombosis of the Extremities in the Home Setting |                 |
| CG-DME-47          | Noninvasive Home Ventilator Therapy for Respiratory Failure   |                 |
| CG-DME-48          | Vacuum Assisted Wound Therapy in the Outpatient Setting   |                 |
| CG-DME-49          | Standing Frames   |                 |
| CG-DME-50          | Automated Insulin Delivery Systems  |                 |
| CG-DME-51          | External Insulin Pumps  |                 |
| CG-DME-52          | Continuous Passive Motion Devices in the Home Setting   |                 |
| CG-DME-53          | Biomechanical Footwear Therapy  |                 |
| CG-DME-54          | Mechanical Insufflation-Exsufflation Devices  |                 |
| CG-DME-55          | Automated External Defibrillators for Home Use  |                 |
| CG-LAB-03          | Tropism Testing for HIV Management  |                 |
| CG-LAB-09          | Drug Testing or Screening in the Context of Substance Use Disorder and Chronic Pain                         |                 |
| CG-LAB-10          | Zika Virus Testing  |                 |
| CG-LAB-11          | Screening for Vitamin D Deficiency in Average Risk Individuals  |                 |
| CG-LAB-12          | Testing for Oral and Esophageal Cancer  |                 |
| CG-LAB-13          | Skin Nerve Fiber Density Testing  |                 |
| CG-LAB-14          | Respiratory Viral Panel Testing in the Outpatient Setting   |                 |
| CG-LAB-15          | Red Blood Cell Folic Acid Testing   |                 |
| CG-LAB-16          | Serum Amylase Testing   |                 |
| CG-LAB-17          | Molecular Gastrointestinal Pathogen Panel (GIPP) Testing for Infectious Diarrhea in the Outpatient Setting  |                 |
| CG-LAB-19          | Laboratory Evaluation of Vitamin B12  |                 |
| CG-LAB-20          | Thyroid Testing   |                 |
| CG-LAB-21          | Serum Iron Testing  |                 |
| CG-LAB-22          | Nucleic Acid Amplification Tests Using Algorithmic Analysis for the Diagnosis of Bacterial Vaginosis        |                 |
| CG-LAB-24          | Outpatient Urine Culture  |                 |

| <b>CUMG Number</b> | <b>CUMG Title</b>   | <b>New Item</b> |
|--------------------|---|-----------------|
| CG-LAB-25          | Outpatient Glycated Hemoglobin and Protein Testing                              |                 |
| CG-LAB-26          | Outpatient Alpha-Fetoprotein Testing  |                 |
| CG-LAB-27          | Human Chorionic Gonadotropin Testing  |                 |
| CG-LAB-28          | Prostate Specific Antigen Testing   |                 |
| CG-LAB-29          | Gamma Glutamyl Transferase Testing  |                 |
| CG-LAB-30          | Outpatient Laboratory-based Blood Glucose Testing                               |                 |
| CG-LAB-32          | Cancer Antigen 125 Testing  |                 |
| CG-LAB-33          | Carcinoembryonic Antigen Testing  | New             |
| CG-LAB-35          | Cancer Antigen 19-9 Testing   | New             |
| CG-MED-02          | Esophageal pH Monitoring  |                 |
| CG-MED-05          | Ketogenic Diet for Treatment of Intractable Seizures                            |                 |
| CG-MED-08          | Home Enteral Nutrition  |                 |
| CG-MED-19          | Custodial Care  |                 |
| CG-MED-21          | Anesthesia Services and Moderate ("Conscious") Sedation                         |                 |
| CG-MED-23          | Home Health   |                 |
| CG-MED-24          | Electromyography and Nerve Conduction Studies                                   |                 |
| CG-MED-26          | Neonatal Levels of Care   |                 |
| CG-MED-28          | Iontophoresis for Medical Indications   |                 |
| CG-MED-34          | Monitored Anesthesia Care for Gastrointestinal Endoscopic Procedures            |                 |
| CG-MED-35          | Retinal Telescreening Systems   |                 |
| CG-MED-37          | Intensive Programs for Pediatric Feeding Disorders                              |                 |
| CG-MED-39          | Bone Mineral Density Testing Measurement  |                 |
| CG-MED-40          | External Ambulatory Cardiac Monitors  |                 |
| CG-MED-41          | Moderate to Deep Anesthesia Services for Dental Surgery in the Facility Setting |                 |
| CG-MED-42          | Maternity Ultrasound in the Outpatient Setting                                  |                 |
| CG-MED-45          | Transrectal Ultrasonography   |                 |
| CG-MED-46          | Ambulatory Electroencephalography   |                 |
| CG-MED-47          | Fundus Photography  |                 |

| <b>CUMG Number</b> | <b>CUMG Title</b>   | <b>New Item</b> |
|--------------------|---|-----------------|
| CG-MED-48          | Scrotal Ultrasound  |                 |
| CG-MED-49          | Auditory Brainstem Responses (ABRs) and Evoked Otoacoustic Emissions (OAEs) for Hearing Disorders |                 |
| CG-MED-50          | Visual, Somatosensory and Motor Evoked Potentials   |                 |
| CG-MED-51          | Three-Dimensional (3-D) Rendering of Imaging Studies  |                 |
| CG-MED-52          | Allergy Immunotherapy (Subcutaneous)  |                 |
| CG-MED-53          | Cervical Cancer Screening Using Cytology and Human Papillomavirus Testing                         |                 |
| CG-MED-54          | Strapping   |                 |
| CG-MED-56          | Non-Obstetrical Transvaginal Ultrasonography  |                 |
| CG-MED-57          | Cardiac Stress Testing with Electrocardiogram   |                 |
| CG-MED-59          | Upper Gastrointestinal Endoscopy in Adults  |                 |
| CG-MED-61          | Preoperative Testing for Low-Risk Invasive Procedures and Surgeries                               |                 |
| CG-MED-62          | Resting Electrocardiogram Screening in Adults   |                 |
| CG-MED-64          | Transcatheter Ablation of Arrhythmogenic Foci in the Pulmonary Veins                              |                 |
| CG-MED-65          | Manipulation Under Anesthesia   |                 |
| CG-MED-66          | Cryopreservation of Oocytes or Ovarian Tissue   |                 |
| CG-MED-68          | Therapeutic Apheresis   |                 |
| CG-MED-69          | Inhaled Nitric Oxide  |                 |
| CG-MED-70          | Wireless Capsule Endoscopy for Gastrointestinal Image and the Patency Capsule                     |                 |
| CG-MED-71          | Chronic Wound Care in the Home or Outpatient Setting  |                 |
| CG-MED-73          | Hyperbaric Oxygen Therapy (Systemic/Topical)  |                 |
| CG-MED-74          | Implantable Ambulatory Event Monitors and Mobile Cardiac Telemetry                                |                 |
| CG-MED-76          | Magnetic Source Imaging and Magnetoencephalography  |                 |
| CG-MED-78          | Anesthesia Services for Interventional Pain Management Procedures                                 |                 |
| CG-MED-79          | Diaphragmatic/Phrenic Nerve Stimulation and Diaphragm Pacing Systems                              |                 |

| <b>CUMG Number</b> | <b>CUMG Title</b>  | <b>New Item</b> |
|--------------------|--|-----------------|
| CG-MED-81          | High Intensity Focused Ultrasound (HIFU) for Oncologic Indications                                   |                 |
| CG-MED-83          | Site of Care: Specialty Pharmaceuticals  |                 |
| CG-MED-84          | Non-Obstetric Gynecologic Duplex Ultrasonography of the Abdomen and Pelvis in the Outpatient Setting |                 |
| CG-MED-85          | Posterior Segment Optical Coherence Tomography   |                 |
| CG-MED-86          | Enhanced External Counterpulsation in the Outpatient Setting   |                 |
| CG-MED-88          | Preimplantation Embryo Biopsy  |                 |
| CG-MED-89          | Home Parenteral Nutrition  |                 |
| CG-MED-90          | Chelation Therapy  |                 |
| CG-MED-91          | Remote Therapeutic and Physiologic Monitoring Services   |                 |
| CG-MED-92          | Foot Care Services   |                 |
| CG-MED-93          | Navigational Bronchoscopy  |                 |
| CG-MED-94          | Vestibular Function Testing  |                 |
| CG-MED-95          | Transanal Irrigation   |                 |
| CG-MED-96          | Prefabricated External Infant Ear Molding Systems  |                 |
| CG-MED-97          | Biofeedback and Neurofeedback  |                 |
| CG-OR-PR-02        | Prefabricated and Prophylactic Knee Braces   |                 |
| CG-OR-PR-03        | Custom-made Knee Braces  |                 |
| CG-OR-PR-04        | Cranial Remodeling Bands and Helmets (Cranial Orthotics)   |                 |
| CG-OR-PR-05        | Myoelectric Upper Extremity Prosthesis Devices   |                 |
| CG-OR-PR-06        | Spinal Orthoses: Thoracic-Lumber-Sacral (TLSO), Lumbar-Sacral (LSO), and Lumber                      |                 |
| CG-OR-PR-08        | Microprocessor Controlled Lower Limb Prosthesis  |                 |
| CG-OR-PR-09        | Microprocessor Controlled Knee-Ankle-Foot Orthosis   |                 |
| CG-REHAB-02        | Outpatient Cardiac Rehabilitation  |                 |
| CG-REHAB-03        | Pulmonary Rehabilitation   |                 |
| CG-REHAB-07        | Skilled Nursing and Skilled Rehabilitation Services (Outpatient)                                     |                 |
| CG-REHAB-08        | Private Duty Nursing in the Home Setting   |                 |

| <b>CUMG Number</b> | <b>CUMG Title</b>  | <b>New Item</b> |
|--------------------|--|-----------------|
| CG-REHAB-12        | Rehabilitative and Habilitative Services in the Home Setting: Physical Medicine/Physical Therapy, Occupational Therapy and Speech-Language Pathology |                 |
| CG-SURG-01         | Colonoscopy  |                 |
| CG-SURG-03         | Blepharoplasty, Blepharoptosis Repair and Brow Lift  |                 |
| CG-SURG-05         | Maze Procedure   |                 |
| CG-SURG-07         | Vertical Expandable Prosthetic Titanium Rib  |                 |
| CG-SURG-08         | Sacral Nerve Stimulation as a Treatment of Neurogenic Bladder Secondary to Spinal Cord Injury  |                 |
| CG-SURG-09         | Temporomandibular Disorders  |                 |
| CG-SURG-10         | Ambulatory or Outpatient Surgery Center Procedures   |                 |
| CG-SURG-11         | Surgical Treatment for Dupuytren's Contracture   |                 |
| CG-SURG-12         | Penile Prosthesis Implantation   |                 |
| CG-SURG-15         | Endometrial Ablation   |                 |
| CG-SURG-17         | Trigger Point Injections   |                 |
| CG-SURG-18         | Septoplasty  |                 |
| CG-SURG-24         | Functional Endoscopic Sinus Surgery (FESS)   |                 |
| CG-SURG-25         | Injection Treatment for Morton's Neuroma   |                 |
| CG-SURG-28         | Transcatheter Uterine Artery Embolization  |                 |
| CG-SURG-29         | Lumbar Discography   |                 |
| CG-SURG-30         | Tonsillectomy for Children with or without Adenoidectomy   |                 |
| CG-SURG-31         | Treatment of Keloids and Scar Revision   |                 |
| CG-SURG-34         | Diagnostic Infertility Surgery   |                 |
| CG-SURG-35         | Intracytoplasmic Sperm Injection (ICSI)  |                 |
| CG-SURG-36         | Adenoidectomy  |                 |
| CG-SURG-37         | Destruction of Pre-Malignant Skin Lesions  |                 |
| CG-SURG-40         | Cataract Removal Surgery for Adults  |                 |
| CG-SURG-41         | Surgical Strabismus Correction   |                 |
| CG-SURG-46         | Myringotomy and Tympanostomy Tube Insertion  |                 |
| CG-SURG-50         | Assistant Surgeons   |                 |

| <b><i>CUMG</i> Number</b> | <b><i>CUMG</i> Title</b>  | <b>New Item</b> |
|---------------------------|---|-----------------|
| CG-SURG-51                | Outpatient Cystourethroscopy  |                 |
| CG-SURG-55                | Cardiac Electrophysiological Studies (EPS) and Catheter Ablation                            |                 |
| CG-SURG-56                | Diagnostic Fiberoptic Flexible Laryngoscopy   |                 |
| CG-SURG-57                | Diagnostic Nasal Endoscopy  |                 |
| CG-SURG-58                | Radioactive Seed Localization of Nonpalpable Breast Lesions                                 |                 |
| CG-SURG-61                | Cryosurgical or Radiofrequency Ablation to Treat Solid Tumors Outside the Liver             |                 |
| CG-SURG-70                | Gastric Electrical Stimulation  |                 |
| CG-SURG-71                | Reduction Mammoplasty   |                 |
| CG-SURG-72                | Endothelial Keratoplasty  |                 |
| CG-SURG-73                | Balloon Sinus Ostial Dilation   |                 |
| CG-SURG-75                | Transanal Endoscopic Microsurgical (TEM) Excision of Rectal Lesions                         |                 |
| CG-SURG-76                | Carotid, Vertebral and Intracranial Artery Stent Placement with or without Angioplasty      |                 |
| CG-SURG-77                | Refractive Surgery  |                 |
| CG-SURG-78                | Locoregional and Surgical Techniques for Treating Primary and Metastatic Liver Malignancies |                 |
| CG-SURG-79                | Implantable Infusion Pumps  |                 |
| CG-SURG-81                | Cochlear Implants and Auditory Brainstem Implants   |                 |
| CG-SURG-82                | Bone-Anchored and Bone Conduction Hearing Aids  |                 |
| CG-SURG-83                | Bariatric Surgery and Other Treatments for Clinically Severe Obesity                        |                 |
| CG-SURG-84                | Mandibular/Maxillary (Orthognathic) Surgery   |                 |
| CG-SURG-87                | Nasal Surgery for the Treatment of Obstructive Sleep Apnea and Snoring                      |                 |
| CG-SURG-88                | Mastectomy for Gynecomastia   |                 |
| CG-SURG-89                | Radiofrequency Neurolysis and Pulsed Radiofrequency Therapy for Trigeminal Neuralgia        |                 |
| CG-SURG-90                | Mohs Micrographic Surgery   |                 |
| CG-SURG-91                | Minimally Invasive Ablative Procedures for Epilepsy   |                 |
| CG-SURG-92                | Paraesophageal Hernia Repair  |                 |

| <b>CUMG Number</b> | <b>CUMG Title</b>  | <b>New Item</b> |
|--------------------|--|-----------------|
| CG-SURG-93         | Angiographic Evaluation and Endovascular Intervention for Dialysis Access Circuit Dysfunction                            |                 |
| CG-SURG-94         | Keratoprosthesis   |                 |
| CG-SURG-95         | Sacral Nerve Stimulation and Percutaneous Tibial Nerve Stimulation for Urinary and Fecal Incontinence; Urinary Retention |                 |
| CG-SURG-96         | Intraocular Telescope  |                 |
| CG-SURG-98         | Prostate Biopsy using MRI Fusion Techniques  |                 |
| CG-SURG-99         | Panniculectomy and Abdominoplasty  |                 |
| CG-SURG-100        | Laser Trabeculoplasty and Laser Peripheral Iridotomy   |                 |
| CG-SURG-101        | Ablative Techniques as a Treatment for Barrett's Esophagus   |                 |
| CG-SURG-102        | Alcohol Septal Ablation for Treatment of Hypertrophic Cardiomyopathy   |                 |
| CG-SURG-103        | Penile Circumcision  |                 |
| CG-SURG-104        | Intraoperative Neurophysiological Monitoring   |                 |
| CG-SURG-105        | Corneal Collagen Cross-Linking   |                 |
| CG-SURG-106        | Venous Angioplasty with or without Stent Placement or Venous Stenting Alone  |                 |
| CG-SURG-108        | Stereotactic Radiofrequency Pallidotomy  |                 |
| CG-SURG-111        | Open Sacroiliac Joint Fusion   |                 |
| CG-SURG-112        | Carpal Tunnel Decompression Surgery  |                 |
| CG-SURG-113        | Tonsillectomy with or without Adenoidectomy for Adults   |                 |
| CG-SURG-114        | Ophthalmic use of Nd: YAG Laser for Posterior Capsulotomy  |                 |
| CG-SURG-115        | Mechanical Embolectomy for Treatment of Stroke   |                 |
| CG-SURG-116        | Surgical Treatment of Hyperhidrosis  |                 |
| CG-SURG-117        | Balloon Dilation of the Eustachian Tubes   |                 |
| CG-SURG-118        | Intraocular Anterior Segment Aqueous Drainage Devices (without extraocular reservoir)                                    |                 |
| CG-SURG-119        | Treatment of Varicose Veins (Lower Extremities)  |                 |
| CG-SURG-120        | Vagus Nerve Stimulation  |                 |
| CG-SURG-121        | Fetal Surgery for Prenatally Diagnosed Malformations   |                 |
| CG-SURG-122        | Lingual Frenotomy for Ankyloglossia-Related Feeding Difficulties   | New             |

| <b>CUMG Number</b> | <b>CUMG Title</b>   | <b>New Item</b> |
|--------------------|---|-----------------|
| CG-THER-RAD-07     | Intravascular Brachytherapy (Coronary and Non-Coronary)   |                 |
| CG-TRANS-02        | Kidney Transplantation  |                 |
| CG-TRANS-03        | Donor Lymphocyte Infusion for Hematologic Malignancies after Allogeneic Hematopoietic Progenitor Cell Transplantation |                 |



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