



# Medicare Content Navigator

**Increase consistency and streamline the medical review process for Medicare policies**

As the population ages and life expectancies lengthen, the number of Medicare enrollees is rapidly rising. Currently, more than 55 million individuals are covered by Medicare, with this number expected to grow to more than 70 million by 2025.\* The Centers for Medicare and Medicaid Services (CMS) provides specific criteria in the form of National and Local Coverage Determination (LCD/NCD) policies for tests, procedures and interventions.

To ensure consistent application of the criteria, a reviewer must currently navigate through the cumbersome CMS website and read through a multipage document. This time-consuming process can result in the inconsistent application of criteria and longer review times. By converting hundreds of LCDs/NCDs into a structured, interactive tool, Medicare Content Navigator helps payers and providers streamline and improve the medical review process for Medicare patients while reducing their administrative burden.

**Workflow integration** – Medicare policies are seamlessly integrated into your existing InterQual workflow to create a structured, interactive tool that helps to streamline the medical review process. An easily accessible link to the Medicare Coverage Database provides in-workflow access to all NCDs, LCDs and associated policies.

**Q&A format** – Automate the review process with Medicare policies which have been converted into an easy-to-use, Q&A format that improves efficiency and consistency.

**NCD or LCD/MAC auto-direct** – The reviewer is automatically directed to the appropriate NCD or LCD/MAC (Medicare Administrative Contractor) based on the date and location of service. The NCD or LCD/MAC number is also included in the review summary. This supports consistent and accurate use of coverage determinations and helps with tracking and auditing.

**Comprehensive support** – The criteria are aligned with Medicare NCD/LCDs and related policy articles and provide medical necessity support, quantity and time frame utilization limits and noncovered indications and services.

**Frequent content updates** – The criteria are updated monthly to provide your organization with the most up-to-date LCD/NCD policies.

**Pending update flags** – Flags are updated weekly for policies that have been revised by CMS. Access to the updated policy and revision detail are provided to ensure all reviewers are using the most up to date policy.






## Modules

- Medicare Behavioral Health
- Medicare Imaging
- Medicare Molecular Diagnostics and Lab
- Medicare Pharmacy
- Medicare Post-Acute and Durable Medical Equipment
- Medicare Procedures

\* Kaiser Family Foundation (KFF). Projected Change in Medicare Enrollment, 2000-2050. July 15, 2013.

# Clinical decision support across the continuum of care

## InterQual criteria and industry content

 Level of Care	 Behavioral Health	 Ambulatory Care Planning	 Industry Content	 Care Coordination
Acute Adult*	Adult and Geriatric Psychiatry	Procedures*	The ASAM Criteria®	Coordinated Care
Acute Pediatric*	Child and Adolescent Psychiatry	Imaging	Concert Genetics	Patient Education
Long-Term Acute Care*	Substance Use Disorders	Durable Medical Equipment*	Medicare Behavioral Health	
Inpatient Rehabilitation*	Behavioral Health Services	Molecular Diagnostics	Medicare Procedures*	
Subacute and Skilled Nursing*		Specialty Rx Non-Oncology	Medicare Imaging	
Home Care		Specialty Rx Oncology	Medicare Post-Acute and Durable Medical Equipment	
Outpatient Rehab and Chiropractic		Specialty Referral	Medicare Molecular Diagnostics and Lab	
		Retrospective Monitoring	Medicare Pharmacy	

\* Decision Reasons add-on available.

## Objective, specific and comprehensive clinical content

InterQual criteria are objective and specific, helping guide consistent, defensible decisions that ensure appropriate, quality care. The portfolio of 5 content suites offers comprehensive content that spans the continuum of care for medical and behavioral health.

## Rigorous, evidence-based development process

Our highly trained clinical development team performs an unbiased, systematic review and critical appraisal of the evidence using elements of the GRADE approach to help ensure InterQual criteria reflect the best available clinical evidence. No other criteria provide a higher level of accuracy and timeliness than InterQual. Developed with rigor and objectivity, InterQual criteria are updated frequently to remain current with the latest evidence.

## Extensive peer review

Our clinical review panel of more than 1,100 independent, multidisciplinary experts provides extensive, multilevel peer review. For situations that do not lend themselves to accepted research methods, larger and more geographically dispersed groups of clinical experts are used to establish best practices that reflect the current standard of care.

InterQual is used by:

**4,300+**

provider organizations

**300+**

payer organizations

**100%**

RACs, MACs, CMS and  
BFCC-QIOs

The ASAM Criteria is a registered trademark of the American Society of Addiction Medicine.



optum.com

Optum is a registered trademark of Optum, Inc. in the U.S. and other jurisdictions. All other brand or product names are the property of their respective owners. Because we are continuously improving our products and services, Optum reserves the right to change specifications without prior notice. Optum is an equal opportunity employer.

© 2024 Optum, Inc. All rights reserved. WF12919493 02/24