Optum

InterQual® Durable Medical Equipment Criteria

2025 Review Process

Introduction

As part of the InterQual® Ambulatory Care Planning family of products, InterQual® Durable Medical Equipment Criteria provide healthcare organizations with evidence-based clinical decision support for the appropriateness of a piece of durable medical equipment. Healthcare providers and reviewers use the criteria to make effective utilization decisions at the point of care or during the preauthorization process.

Criteria are presented in an interactive question-and-answer (Q&A) format. As you conduct a review, your answers to questions about the patient's clinical presentation will lead you to the recommended equipment.

Note: The criteria reflect clinical interpretations and analyses and cannot alone either resolve medical ambiguities of particular situations or provide the sole basis for definitive decisions. The criteria are intended solely for use as screening guidelines with respect to the medical appropriateness of health care services and not for final clinical or payment determinations concerning the type or level of medical care provided, or proposed to be provided, to a patient.

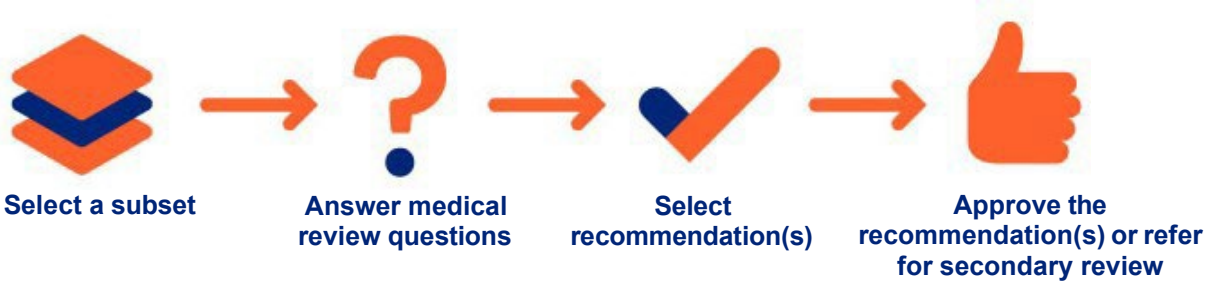
InterQual® content contains references to patient sex or gender. Depending on the context, these references may refer to either genotype or phenotype. At the individual patient level, a variety of factors, including but not limited to gender identity and gender affirmation via surgery or hormonal treatment, may affect the applicability of some InterQual® Criteria. This occurs most often with genetic testing and some procedures that require the presence of specific anatomy. For the purpose of these criteria, references to Male and Female are based on sex assigned at birth, unless otherwise defined. InterQual users should carefully consider patient genotype and anatomy when appropriate.

Informational notes

Notes provide information regarding best clinical practice, new clinical knowledge, explanations of criteria rationale, definitions of medical terminology, and literature references. The notes in the criteria are specific to each question and/or recommendation.

How to conduct a medical review

During a medical review, you use the criteria as a decision support tool to assess the medical appropriateness of a given piece of durable medical equipment. Although labeled as a "Medical Review" in the software, this type of review is also known as a primary review. This first-level review typically involves a non-physician reviewer who uses the criteria to determine if the request is appropriate or if the review requires secondary review.



Step 1: Select a subset

Select a subset.

You can search for a subset using one or more of the following methods:

- **By category** — categories organize specific, logical clinical groupings for medical equipment. Durable Medical Equipment Criteria include only one category: General. General criteria are clinically appropriate criteria for adult and/or pediatric populations.
- **By keyword(s)** — keywords are words found in the subset name or terms related to the specific equipment.
- **By medical code(s)** — medical codes include codes such as HCPCS codes.

A subset includes the criteria for the medical equipment that is being reviewed (e.g., Hospital Beds and Cribs). Within an individual subset, there may be criteria for multiple pieces of equipment (e.g., Fixed-height bed, Semi-electric bed, etc.).

Step 2: Answer medical review questions

Answer the medical review questions based on the clinical scenario.

The medical review is a sophisticated, branching-logic algorithm; a series of questions directs you to the most appropriate pathway based on the type of durable medical equipment.

Your answers lead to the most appropriate recommendation(s).

Review questions

When answering questions, keep the following guidelines in mind:

- For questions that enable you to select more than one answer choice, you must click Next to advance to the next question.
- In many questions, the last answer choice is “Other clinical information (add comment).” If the clinical scenario does not satisfy the other answer choices, select this answer. The following recommendation displays: “Current evidence does not support durable medical equipment in this clinical scenario.”
- Selecting “None of the above” also displays the recommendation: “Current evidence does not support durable medical equipment in this clinical scenario.”
- Selecting “More choices” leads to another question with more clinical presentations.
- Selecting “None of the above, more choices” leads to additional questions. This option is used when there is a list of criteria (e.g., symptoms, findings, diagnoses, medical conditions) that must be reviewed prior to moving to the next question (e.g., risk factors for cancer, involuntary weight loss, dysphagia, odynophagia). If any of the listed criteria are present, it must be selected. If none of the listed criteria are present, select “None of the above, more choices” to advance to the next question.

- Selecting “None of the above, see recommendation” leads to a recommendation. This option is used when there is a list of criteria (e.g., symptoms, findings, diagnoses, medical conditions) that must be reviewed prior to moving to a recommendation (e.g., risk factors for cancer, involuntary weight loss, dysphagia, odynophagia.) If any of the listed criteria are present, it must be selected. If none of the listed criteria are present, select “None of the above, see recommendation” to advance directly to a recommendation.

Reviewer comments can be added at any time during the review.

Step 3: Select recommendation(s)

Review and select recommendation(s) to authorize the appropriate durable medical equipment. Based on your organizational policies, you can also select the appropriate ICD-10-CM and/or HCPCS codes.

Recommendations

The recommendations that are displayed after you answer the questions in a pathway are based on the best available medical evidence and current practice. Once the medical review is completed, depending on the pathway taken, you will be led to any of the following recommendations:

- One piece of equipment is recommended without options or accessories.
- One piece of equipment is recommended with a list of options or accessories that have no specific criteria for their use.
- One piece of equipment is recommended in combination with specific recommendations for options or accessories (i.e., a main piece of equipment may be mutually recommended with options or accessories.)
- More than one piece of equipment is recommended but only one piece should be selected (i.e., the pieces of equipment are mutually exclusive.)
- More than one piece of equipment is recommended (i.e., the pieces of equipment are mutually recommended.)
- More than one piece of equipment is recommended, and one or more pieces of equipment can be selected. Messaging indicates if pieces of equipment must be selected together.
- No equipment is recommended: “Current evidence does not support durable medical equipment in this clinical scenario.” This occurs when all the required criteria have been filled but the durable medical equipment is not considered medically necessary based on the criteria selected.
- A recommendation for a piece of equipment is flagged as “This recommendation is designated as Limited Evidence in this clinical scenario. Criteria cannot be met.” A note will display “Recommendations are designated as “Limited Evidence” based on one or more of the following:
  - Research to date has not demonstrated this intervention’s equivalence or superiority to the current standard of care.
  - The balance of benefits and harms does not clearly favor this intervention.
  - The clinical utility of this intervention has not been clearly established.
  - The evidence is mixed, unclear or of low quality.
  - This intervention is not standard of care.
  - New technology is still being investigated.
- A device is recommended and flagged as “Off-label” in cases where use of the device does not have FDA-approval for the clinical scenario.

Next action(s)

Your next action(s) depends on the medical review results as shown in the following table:

Medical review results	Select recommendation(s)	Action(s)
According to current evidence, one or more of the recommendations or recommendation combinations is appropriate in this clinical scenario. View notes, if any, for details.	Recommended (one is selected)	Approve the recommended durable medical equipment
	Recommended (two or more are selected)	Approve the recommended durable medical equipment
	Mutually Exclusive (only one piece of equipment can be selected)	Approve the recommended durable medical equipment
	Mutually Recommended (two or more pieces of equipment must be selected.)	Approve the recommended durable medical equipment.
	Recommended: • *Off-label* Recommended • Recommended	Approve the recommended durable medical equipment
According to current evidence, one or more recommendations or combinations of recommendations is based on limited evidence (LE). If LE recommendations are selected, medical review is suggested based on payer policy. View notes for details. The criteria enable reviewers to proactively gather and document patient-specific clinical information for medical review.	Limited Evidence Ltd 2nd	Refer for secondary review as dictated by your organizational policies
	Mutually Exclusive • Limited Evidence Ltd 2nd OR • Recommended	**Limited Evidence:** Refer for secondary review as dictated by your organizational policies **Recommended:** Approve the recommended durable medical equipment
	Mutually Recommended • Limited Evidence Ltd 2nd AND Recommended Ltd 2nd • Limited Evidence AND Limited Evidence Ltd 2nd	Refer for secondary review as dictated by your organizational policies
Current evidence does not support durable medical equipment in this clinical scenario	No recommendations displayed	Obtain additional information from the requesting physician, if needed. • If the additional information satisfies the medical review, the request may be approved for the recommended piece or pieces of equipment • If the additional information does not satisfy the medical review or if no further information is available, refer for secondary review as dictated by your organization
Cancel current review		Cancel the review
No recommendations were made based on the answers to the Medical Review questions. Please answer all questions.	Medical review incomplete	Answer all questions

Medical review results	Select recommendation(s)	Action(s)
According to current evidence, one recommendation is appropriate for off-label indications and suggest medical review based on payer policy. View notes for details. The criteria enable reviewers to proactively gather and document patient-specific clinical information for medical review.	*Off-label* Secondary review required 2nd	Refer for secondary review as dictated by your organizational policies
According to current evidence, one recommendation is based on limited evidence (LE), an off-label recommendation and suggest medical review based on payer policy. View notes for details. The criteria enable reviewers to proactively gather and document patient-specific clinical information for medical review.	*Off-label* Limited Evidence Ltd 2nd	Refer for secondary review as dictated by your organizational policies

Step 4: Approve the recommended equipment or refer for secondary review

Outcome referral reasons

Referral reasons identify why the proposed request does or does not meet medical necessity or medical appropriateness. Examples include criteria issues, such as no criteria to cover indication/diagnosis/procedure, and provider issues, such as test results incomplete. Referral reasons vary from product to product and display based on the selected outcome.

Software note: In InterQual® Cloud Solutions, an organization can add as many outcomes and reasons as they require to meet their needs. In Review Manager, an organization can add their own specific referral reasons and create unique outcome groups to delete or hide existing referral reasons.

Secondary review

Secondary review determines the appropriateness of a request (e.g., imaging or diagnostic study, procedure, equipment) when it is not supported by criteria on primary review. Organizational policy should dictate the extent to which secondary review is performed to render a review outcome.

When is secondary review appropriate?

The following scenarios may indicate that a secondary review is appropriate:

- **Criteria subset not listed**. Only the more common interventions or equipment are included in criteria. InterQual content does not currently cover this request. This does not mean that the request is inappropriate, but that it is less common or emerging and requires secondary review.
- **Indications not listed**. An indication for the request is not listed.
- **Criteria not available for the age group**. The criteria do not cover the age group requested.
- **Criteria not met**. When the answers to the questions lead to a recommendation “Current evidence does not support x in this clinical scenario.”

- **Recommendation with Secondary review required and Limited Evidence or Secondary review required**. These criteria have been developed to provide reviewers with a basis for proactively gathering and documenting patient-specific clinical information that will facilitate secondary review.
- **Patient choice and preference**. The criteria delineate reasonable courses for most patients. Some patients choose or prefer different prerequisite therapies or testing; these cases require secondary review.

Who is responsible for completing a secondary review?

A secondary review may be completed by a supervisor, medical practitioner, subject matter expert, or designated clinician. A medical practitioner is not required to perform a secondary review; however, some regulatory requirements specify that only a physician can issue a final non-determination (denial) decision.

Secondary review steps

1. The secondary reviewer determines medical necessity based on review of the medical record; discussions with members of the interdisciplinary team (e.g., nursing staff, the discharge planner, therapists, and the attending medical practitioner) and clinical knowledge and judgment.

   Note: The secondary reviewer is not required to but may choose to apply InterQual Criteria when completing a secondary review. Best practice would include reviewing the results of the primary review to ensure internal agreement in criteria application.

   To determine medical necessity, it may be appropriate for the secondary reviewer to consider other factors in the determination, such as:

   – Age
   – Co-morbid conditions (e.g., medical, substance use and psychiatric disorders)
   – Treatment response and patient engagement
   – History of non-adherence and poor health outcomes
   – Availability (e.g., a drug not available in the formulary or an imaging test/procedure not available on-site)
   – Other organization- or patient-specific factors

   Tip: A primary reviewer can assist the secondary review process by including the outcome of the InterQual review, as well as documentation that could support these additional factors.

2. Determine the review outcome:
   – If the secondary reviewer agrees with the request, approve.
   – If the secondary reviewer does not agree with the request, discuss the optimal alternate management for this patient with the requesting provider.
   – If the requesting provider does not agree with the secondary reviewer's determination, a specialist may become involved in the review process.
3. Document the review outcome.

(Optional) Decision Reasons

Decision Reasons helps primary and secondary reviewers, case managers, medical directors, and others to author consistent communications to patients, members, and providers that include clear and specific clinical reasons for decisions regarding medical necessity written at a consumer level. Decision Reasons content is available as a content add-on module in InterQual® Cloud Solutions only. When referring a case for secondary review the primary reviewer may choose to select the appropriate Decision Reason(s) content to document why the primary review was not met. Each organization is responsible for determining where Decision Reasons will fit into their workflow.

Note: For details on how to use the Decision Reasons functionality, refer to the video tutorial in the InterQual® Cloud Solutions Help – Use InterQual® Decision Reasons.

Reference materials

Reference materials are provided with the criteria and should be used to assist in the correct interpretation of the criteria:

- **Abbreviations and symbols:** Defines acronyms, abbreviations and symbols used in the criteria.
- **Bibliography:** Provides references cited in the clinical content.
- **Clinical revisions:** Provide details of changes to InterQual® Criteria.
- **Drug list:** Categorizes drug names and classes mentioned within the criteria.
- **InterQual® clinical development process:** Describes the comprehensive development process for InterQual® clinical content.
- **Limited Evidence (LE) and Evidence Does Not Support (EDNS) subsets:** Lists the subsets that are designated as Limited Evidence (LE), or Evidence Does Not Support (EDNS).

Additional resources

InterQual® Resource Center

The InterQual® Resource Center is a central location for the most up-to-date InterQual clinical documentation and resources. The Resource Center provides access to:

- **What's new:** Includes release highlights for each of the InterQual® Criteria modules included in a content release.
- **Clinical revisions:** Includes the clinical revisions for the current InterQual® Criteria year and two years prior.
- **Clinical resources:** Includes information such as the Knowledge Articles, Known Issues List, and more.
- **Webinars:** Includes the Increase Your IQ educational webinar recordings.
- **Additional resources:** Includes access to resources such as the InterQual® release schedule, the InterQual® Learning Source, and Download Connect.

Customer Care Hub

Customer Care Hub is a web portal that provides the ability to submit, update, and view support case details and status.

To obtain a user ID and password, from the Customer Care Hub Welcome page, select Register.