

October 5, 2026

MCG PROVIDER NOTIFICATION

BACKGROUND

Notice: Updates to Clinical Review Criteria

Dear Provider Partner,

Effective **January 1, 2027**, Community Health Choice will update its clinical review criteria to incorporate Milliman Care Guidelines (**MCG Care Guidelines**) alongside our existing guidelines. This update ensures our medical necessity reviews align with the latest evidence-based medicine, clinical best practices, and changing regulatory environments.

To support your administrative and clinical teams through this transition, we have outlined how clinical guidelines will be allocated across service types:

- **Inpatient Acute Care Stays:** Will continue to be reviewed using **InterQual® (IQ)** guidelines.
- **Med-Surg MCG Criteria:** Ambulatory Care, Chronic Care Guidelines, Transitions of Care, and Post Acute Care will move to **MCG Care Guidelines**.
- **Specialty Medications (Specialty Rx):** Moving to **MCG Care Guidelines**.
- **Behavioral Health (Mental Health & Substance Use):** Reviewed using **both InterQual® (including ASAM Criteria) and MCG Care Guidelines**, depending on the specific program or level of care.

What This Means for You

- **Prior Authorization Process:** The workflow for submitting prior authorization requests remains unchanged. Please continue to submit requests via the Community Health Choice portal or our standard fax numbers.
- **Documentation Requirements:** Please ensure clinical notes submitted with your authorizations are comprehensive to support review under the updated criteria.

Access to Guidelines

Guidelines and Frequently Asked Questions (FAQ) sheets will be available on our Provider Portal starting **December 31, 2026**. In accordance with transparency guidelines, references to specific criteria may be requested during the authorization process.

KEY DETAILS

MCG Provider Notification

Clinical Criteria Allocation Crosswalk Matrices

These tables serve as the primary operational matrix for Community Health Choice and provider utilization management teams.

Medical / Surgical (Med-Surg) Crosswalk

Service Category	Specific Level of Care / Service Type	Primary Clinical Criteria
Inpatient (Acute Care)	• Medical/Surgical Admissions	InterQual® (IQ) — Acute Care Criteria
	• Intensive Care Unit (ICU) / Stepdown	
	• Inpatient Long Term Acute	
Post Acute, Ambulatory Care, & Outpatient	• Ambulatory Care	MCG Care Guidelines — Ambulatory Care; Chronic Care Guidelines; Transitions of Care; Post Acute Care
	• Chronic Care Guidelines	
	• Transitions of Care	
	• Skilled Nursing (Recovery Facility Care)	
	• Home Care	
Laboratory Services	• Routine and Advanced Clinical Laboratory Tests	MCG Care Guidelines — Ambulatory Care
Genetic Testing	• Molecular Diagnostics & Genetic Testing	MCG Care Guidelines — Ambulatory Care
	• Pharmacogenomics & Hereditary Cancer Panels	
Specialty Rx	• Provider-Administered Infusions (Medical Benefit)	MCG Care Guidelines — Ambulatory Care
	• Oncology Specialty Drugs & Biologics	
	• Self-Administered Specialty Medications (Pharmacy Benefit)	

Behavioral Health (BH) Crosswalk

Service Category	Specific Level of Care / Service Type	Primary Clinical Criteria
Behavioral Health: Mental Health	• Acute Inpatient Psychiatric Admissions	InterQual® (IQ) — Behavioral Health Criteria
	• Residential Treatment Centers (RTC)	
Behavioral Health: Substance Use (SUD)	• Inpatient Detoxification / Withdrawal Management	ASAM Criteria® (Powered by InterQual)
	• Substance Use Residential Rehabilitation	
Behavioral Health: Outpatient	• Partial Hospitalization (PHP)	MCG Care Guidelines — Behavioral Health Criteria
	• Intensive Outpatient (IOP)	
	• Outpatient Therapy	

FREQUENTLY ASKED QUESTIONS (FAQ)

Provider FAQ Document

General & Med-Surg Criteria Questions

Q: Why is Community Health Choice introducing MCG Care Guidelines?

A: Incorporating MCG Care Guidelines allows us to use industry-leading, data-driven clinical indications that align closely with outpatient workflows, specialty drug advancements, laboratory services, and current ambulatory care management practices.

Q: Will the introduction of MCG change how I submit prior authorizations?

A: No. Your submission process remains the same. Continue to submit authorizations through the provider portal or via fax. Our internal systems will route the request to the appropriate clinical review team and criteria set based on the specific codes entered.

Q: Which guidelines will apply to laboratory and genetic testing authorizations?

A: Laboratory services and genetic testing prior authorization requests will be reviewed using **MCG Care Guidelines**. This transition supports evidence-based review criteria that keep pace with changes in molecular and genetic testing.

Q: If an outpatient ambulatory surgery changes to an inpatient stay, which criteria will be used?

A: The initial authorization for the outpatient procedure will be evaluated under **MCG Care Guidelines**. If the patient later requires an acute inpatient admission or an extended stay that meets the threshold for inpatient level of care, the review will transition to **InterQual® Inpatient Acute Criteria**.

Behavioral Health Specific Questions

Q: Why is Behavioral Health utilizing both InterQual® and MCG guidelines?

A: Community Health Choice uses both criteria sets to support appropriate, evidence-based review across different behavioral health services. InterQual® remains suited for traditional acute psychiatric levels of care, while MCG supports selected outpatient programs, digital therapeutics, and integrated behavioral health-medical models.

Q: Our facility submits authorizations for Substance Use Disorder (SUD) treatments. Will you use InterQual or MCG?

A: For substance use disorder levels of care, including inpatient detoxification and residential rehabilitation, Community Health Choice uses the **ASAM Criteria®**, which is hosted within the **InterQual® platform**. MCG guidelines will be used for selected lower-level outpatient mental health and ambulatory therapy services.

QUESTIONS

For any questions regarding this notice, please contact your Community Provider Performance Manager (provider representative).

E-mail: ProviderRelationsInquiries@CommunityHealthChoice.org