

Wellmark Utilization Management Criteria-Surgical-Inpatient Level of Care



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Original Effective Date: February 2024

Review Date: February 2024

Revised: February 2024

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This Utilization Management Guideline contains information which is clinical in nature. The Utilization Management Guideline is not medical advice. The information in this Utilization Management Guideline is used by Wellmark to make determinations about whether medical treatment is covered under the terms of a Wellmark member's health benefit plan. Physicians and other health care providers are responsible for medical advice and treatment. If you have specific health care needs, you should consult an appropriate health care professional. If you would like to request an accessible version of this document, please contact customer service at 800-524-9242.

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This Utilization Management Guideline describes the status of established standards of care at the time the document was developed. Since that time, standards of care may have evolved. This Utilization Management Policy will be reviewed regularly and updated as standards of care evolve; therefore, this policy is subject to change without notice.

INTRODUCTION

Various sites of service may be used to safely perform certain elective surgical procedures. These include inpatient hospitals or medical centers, off campus outpatient hospitals or medical centers, on campus outpatient hospitals or medical centers, ambulatory surgical centers, or doctor's offices. These various sites of service may vary in their costs for performing certain elective surgical procedures. To encourage performance of certain elective surgical procedures at the most safe, appropriate, and cost-effective site of service, precertification is required for Inpatient Hospital-Medical Center Level of Care for these services.

OBJECTIVE

To promote consistency between utilization management reviewers, this Utilization Management Guideline will be utilized for determining the medical necessity of the site of service-level of care for certain elective surgical procedures.

INPATIENT HOSPITAL LEVEL OF CARE DETERMINATION CRITERIA

Requests for Inpatient Hospital-Medical Center Level of Care for certain elective surgical procedures not meeting one of the following criteria will be considered not medically necessary:

Cardiovascular Risk

- Coronary Artery Disease (CAD) with:
 - Evidence ongoing myocardial ischemia or unstable angina
 - History of myocardial infarction ≤ 3 months ago
 - History of placement of drug eluting stent (DES) ≤ 1 year ago
 - History of angioplasty (PTCA) or placement of bare metal stent (BMS) ≤ 3 months
- Uncompensated chronic heart failure (CHF) (NYHA functional class III or IV)
- Severe valvular heart disease
- Recent history of cerebrovascular accident (CVA) or transient ischemic attack (TIA) ≤ 3 months ago

Diabetes Risk

- Uncontrolled diabetes with recurrent diabetic ketoacidosis (DKA) or uncontrolled diabetes with severe hypoglycemia

Hepatic Risk

- Advanced Liver Disease MELD Score $> 8^*$

Pulmonary Risk

- Chronic obstructive pulmonary disease (COPD) with FEV1 $< 50\%$ or oxygen dependent
- Poorly Controlled asthma with FEV1 $< 80\%$ despite medical management
- Severe Obstructive Sleep apnea (AHI ≥ 30 requiring CPAP or other treatment)

Renal Risk

- End stage renal disease (ESRD) requiring peritoneal dialysis or hemodialysis.

Other Factors Risk

- Morbid obesity (BMI ≥ 50) except bariatric surgical procedures

UTILIZATION MANAGEMENT CRITERIA HISTORY

Date	Reason	Action
February 2024	Internal Inquiry	New Utilization Management Criteria Developed.

Appendix

Appendix 1:

[MELD Score - Age above 12 years \(medscape.com\)](https://www.medscape.com)

New information or technology that would be relevant for Wellmark to consider when this policy is next reviewed may be submitted to:

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