

Case study

A large national health plan with over 1.5 million covered lives implemented InterQual® solutions as the catalyst to transforming their utilization management (UM) and case management (CM) programs.

Goals

- Seamlessly transition to InterQual, new criteria vendor, as part of a UM modernization initiative
- Streamline effective usage of medical necessity criteria throughout UM and CM teams
- Improve consistent application of complex CMS policy
- Ensure appropriate level of care placement and resource utilization with defensible decision-making processes
- Empower staff autonomy and decision-making with objective criteria

Solution

- Transitioned to InterQual criteria from another vendor, accessed through InterQual® Medical Review Service
- Implemented Medicare Content Navigator suite
- Added InterQual® Coordinated Care to streamline and enhance CM programs using evidence-based clinical content

Results



No disruption

to processes during transition



Improved consistency

of criteria application and clinical decision-making



Increased accuracy

and efficiency of UM processes

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InterQual solutions have been the cornerstone of our UM transformation. Creating a clearly defined framework for our teams, we find the criteria to be objective and clear-cut, promoting more autonomy and consistency among our nursing staff. Thanks to the support and partnership with the Optum team, the transition to InterQual was seamless, with no negative impact to affordability. InterQual is a solution we can rely on, and I look forward to continuing our enterprise transformation by expanding our solutions with their team.”

– Medical Director, Medicare Advantage