Medicare Advantage (MA) Medical Policy Hierarchy

In terms of the sequence of prior authorization review, BCBSKS will first reference existing <u>National Coverage Determinations (NCD)</u> or <u>Local Coverage Determinations (LCD)</u>. If neither of these exist, BCBSKS will reference InterQual criteria (Acute Adult, Subacute/SNF, Long-Term Acute Care Rehabilitation).

National Coverage Determinations (NCD) or Local Coverage Determinations (LCD)

InterQual Criteria (Acute Adult, Subacute/SNF, Long-Term Acute Care Rehabilitation)

Effective: 1/1/2020, Revised: 4/1/2022