InterQual®

Conducting a Review

There are several steps to conducting a review:

1. Select a subset.
2. Evaluate criteria.
3. View and print the Review Summary.
4. Copy the review results.

   Close review or start new review.

Step 1: Select a Subset

The first step is to select a subset. You can do so by finding and selecting a subset or by selecting a subset that you previously bookmarked.

Find and select a subset:

1. Find a subset using one or a combination of these methods:

   – Select a product and category. (If working with a transition plan or quality indicator checklist, select the appropriate category.) If you have access to criteria from multiple years, select a content version.

   – Enter keywords (for example, words found in the subset name).

   – Enter medical codes (that is, ICD, CPT®, or HCPCS code).

2. If you searched by keywords or medical codes, click FIND SUBSETS.

   When the results display, the Results Count indicates the number of subsets that match your search criteria.

3. Click a subset name to select it.

   The subset notes display.
   If the subset has a revision version and your system is configured to show revisions, then the content version (for example, 2017.2) and revision version (for example, 2017.2 Rev 1) display in a table, enabling you to select the most appropriate one. The most recent revision (or the version that best matches your keyword or code search) displays in green text.

Example

Revision	Date
InterQual 2017.2 Rev 1	12/18/2017
InterQual 2017.2	10/14/2017

4. If necessary, select a subset from the table.

5. Read the subset notes to get information about the subset.

6. Optionally, view the medical codes that apply to the subset by clicking Show Codes. Click Close in the Codes dialog box when you finish viewing the codes.

7. If you selected a subset that has a clinical evidence summary, view the document as follows:

   A. Click Clinical Evidence Summary.

   B. Depending on the options available, click Open or click DOWNLOAD PDF .

   C. Use the controls in the PDF to save and/or print the document.

ⓘ **Note**: If necessary, at any time, you can clear your subset selection by clicking Clear All or clicking Change Subset to select a different subset. You can also select a subset that you previously bookmarked. Refer to the Help for directions on selecting a bookmarked subset.

Step 2: Evaluate Criteria

During a medical review, you evaluate criteria to help determine the medical appropriateness of proposed services.

Depending on the product you selected, the medical review is in either decision tree format or question-and-answer (Q&A) format.

- [Evaluate decision tree criteria](#)
- [Evaluate Q&A criteria](#)

Evaluate Decision Tree Criteria

ⓘ **Note:** Applies to InterQual® Level of Care (except Home Care Q&A), InterQual® Behavioral Health (except Procedures Q&A), InterQual® SIM *plus*™, and InterQual® Ambulatory Care Planning Specialty Referral products.

Following are the main tasks you perform as you evaluate criteria. For information about additional tasks, such as looking up the Clinical Reference, selecting a benchmark length of stay value, or adding reviewer comments, see [Additional Review Tasks](#)**.**

1. After you select a subset in decision tree format, click BEGIN MEDICAL REVIEW ⊙

2. Depending on the subset you selected, do the following:

- **Level of Care: Acute Adult and Pediatric**—Select an Episode Day (or Initial Review, which is available for select subsets) from the Select Day list.

- **Level of Care: Long Term Acute Care and Rehabilitation**—Select a review type (that is, Preadmission, Admission, Continued Stay, or Discharge).

- **Subacute/SNF**—Select Preadmission or the appropriate episode week (except the Medicare subset for which you select a review type).

- **Level of Care: Home Care**—Optionally, click Discharge Screens to complete a discharge plan. (For Home Care Q&A, see Evaluate Q&A Criteria.)

- **Level of Care: Outpatient Rehabilitation & Chiropractic**—Optionally, click Discharge Review to complete a discharge review.

- **Behavioral Health**— Select a level of care and then choose an Episode Day.

- **Care Planning: Specialty Referral**—Optionally, select an indication from the list.

3. Expand the decision tree as follows:

   - Click a plus sign ⊕ to expand a section of the decision tree and click a minus sign ⊖ to collapse it.

   - Click Expand All to expand all criteria in the decision tree and click Collapse All to collapse it.

4. View any notes associated with the criteria by clicking the appropriate note icon:

   - **Informational Note** Note —Provides reminders of best medical practice, new clinical knowledge, procedural information, explanations of criteria rationale, and current literature references.

   - **Quality Indicator Note** Qual —Indicates that quality indicator data exists for this condition. If you select a criteria point that has a Quality Indicator note, Change Healthcare recommends that you complete a quality indicator checklist.

   - **Transition Plan Note** Trans —Indicates that the patient might be at a higher risk for readmission and could benefit from comprehensive discharge planning. If you select a criteria point that has a Transition Plan note, Change Healthcare recommends that you complete a transition plan.

   - **Note (Red)** Note —Associated with an indication or criteria point, these mandatory notes provide important information that you must read while conducting a review.

   - **Care Management Note** Care —Provides information that helps to drive quality care and ensure that the patient is progressing along the continuum of care.

5. Select criteria points by clicking them.

   - Selected criteria change to green and have a check mark. If you select enough criteria points to satisfy criteria rules, the criteria status, which displays in the upper right corner, changes from Criteria Not Met to Criteria Met.

   - Use the vertical scroll bar to see all of the criteria.

ⓘ Note**:** At any time, you can return to a previous screen by clicking Previous or clicking Menu and selecting an option from the navigation pane. You can resume the medical review by clicking Resume Medical Review.

6. If you select a criteria point that automatically displays a note (for example, a transition plan or quality indicator note), read the note and then click OK to close it.

ⓘ Note: If a note indicates your selection exceeds the limit for these criteria, you must clear a previous selection before you can select the criteria point.

7. When you have finished selecting criteria, click **MEDICAL REVIEW COMPLETED ⊙** .

    The Review Summary screen displays.

Evaluate Q&A Criteria

ⓘ **Note1**: Applies to InterQual® Level of Care: Home Care Q&A, InterQual®Behavioral Health Procedures Q&A, InterQual® Care Planning: Procedures, Imaging, Specialty Rx Oncology, Specialty Rx Non-Oncology, Molecular Diagnostics, and Durable Medical Equipment and Medicare Procedures powered by InterQual®

ⓘ **Note 2**: If the CriteriaView feature is available, you can track availability of recommendations as you answer questions and view additional criteria for recommendations that do not meet criteria. If you are using CriteriaView, see Evaluate Q&A Criteria using CriteriaView

There are two steps to evaluating criteria in a medical review:

*   Answer questions

*   View and select a recommendation

ⓘ **Note**: Following are the main tasks you perform as you conduct a review. For information about additional tasks you might need to perform, such as looking up information in the Clinical Reference or adding reviewer comments, see Additional Review Tasks**.**

Answer Questions

1. After you select a subset in Q&A format, click **BEGIN MEDICAL REVIEW ⊙**

2. Answer the questions by reviewing each one as it displays and providing answers by selecting one or more options, as appropriate.

    – Follow rules associated with the questions. Rules display in brackets next to the question (for example, **[≥ One, except Other clinical information (add comment)]** is a rule).

    – If necessary, click **NEXT ⊙** to continue to the next question. Single answer questions automatically display the next question, while multi-answer questions display the Next button.

    – View any notes associated with the questions by clicking the Note icon.

3. When you reach the end of the questions, click **VIEW RECOMMENDATIONS ⊙** .

View and Select a Recommendation

When a medical review is complete, the results display in the Recommendations screen.

The results vary depending on the product (for example, not recommended, one recommendation, more than one recommendation, mutually exclusive recommendations and so on).

View and select a recommendation

When the medical review results in one or more recommendations, you select recommendations as follows:

1. View the recommendation details:

    –   Read any notes by clicking the note icon.

    –   View the ICD, CPT®, and HCPCS codes that apply by clicking Show Codes. Hide the codes by clicking Hide Codes.

    –   View any values associated with the recommendation, such as hour(s) per day, time(s) per year, or visit(s). For example, a Home Physical Therapy recommendation might indicate a number visits within a given time frame, such as 6 visits within 2 weeks.

    –   For Specialty Rx Oncology:

        o   View the NCCN Drugs & Biologics Compendium (NCCN Compendium®) rating for an off-label drug recommendation.

        o   Optionally, view the NCCN Compendium® rating description by moving the pointer over the rating number.

        o   Optionally, access the National Comprehensive Cancer Network® (NCCN®) website by clicking the link within the red note.

    –   For Level of Care: Home Care Q & A, the results might show both Recommended Services and Not Recommended Services. This occurs when you select two or more services and at least one service is recommended and at least one service is not recommended.

2. Select a recommendation by clicking it.

    Selected recommendations change to green and automatically display the associated codes.

3. If benchmark LOS information is available for an inpatient procedure, optionally, select a value:

    A. Click Benchmark LOS Benchmark LOS .

    B. The Benchmark LOS dialog box displays

    C. If appropriate, find a procedure by entering a partial or complete description in the Indications box.

    D. Select a procedure from the list.

    E. The dialog box closes and the selected value displays in the Recommendations screen.

4. Optionally, select codes:

- Click the tab for the type of code you want to select.

- Search by medical code or description. Alternately, scroll through the list until you find the code you want.

- Click a code description to select it. Click again if you want to clear a code.

5. View the selected codes by clicking Selected 4 . The value on the Selected button reflects the number of codes you selected.

6. When you have finished selecting recommendations, click REVIEW SUMMARY ⊙ .

Additional Review Tasks

Following are optional, review-related tasks you might perform in Step 2 as you evaluate criteria:

Look up information in the Clinical Reference (Applies to Decision Tree and Q&A Criteria)

1. Click CLINICAL REFERENCE to see a list of resources (in PDF format) (for example, clinical revision documents, criteria bibliographies, review processes, and other supporting materials).

2. Click a document name to view it.

3. Depending on the options available, click Open or click DOWNLOAD PDF .

4. Use the controls in the PDF to save and/or print the document.

Add reviewer comments (Applies to Decision Tree and Q&A Criteria)

As you evaluate criteria, you can record comments specific to a review or criteria point. Comments have a 4,000-character limit.

1. Click the comments icon ▢ .

   The Reviewer Comments dialog box displays.

2. Type your comment in the text box.

3. Click Add Comment.

4. Click the X to close the dialog box.

   The appearance of the comment icon changes, indicating reviewer comments are associated with the question.

5. You can view the details of added comments by clicking Comments 1 .

Select a benchmark LOS (length of stay) (Applies to Decision Tree Criteria)

Available for select Level of Care Acute Adult and Pediatric subsets, benchmark length of stay (LOS) information provides guidance around a typical length of stay for a condition.

Subsets with a single diagnosis or procedure have the benchmark automatically populated, so you don't select one. You select subsets with multiple diagnoses or procedures as follows:

1. Click Benchmark LOS.

The Benchmark LOS dialog box displays.

2. If appropriate, find a diagnosis or procedure in the list by entering a partial or complete description.

3. Select a diagnosis or procedure from the list.

The Benchmark LOS field is populated with your selection.

View care management information (Applies to Decision Tree Criteria)

Available for select subsets, Care Management Information is associated with a specific episode day.

To view care management information:

1. If closed, click Care Management on the right side of the Medical Review screen.

Depending on the episode day, the following information displays:

- **Admission Considerations**—Identifies the types of clinical findings that should be considered as part of an admission review.

- **Expected Progress**—Provides an overall picture of what a care manager should expect in response to treatment, potential barriers to care, and suggested interventions.

- **Care Facilitation**—Identifies when a plateau has been reached and provides direction to appropriate post-acute levels of care.

2. Optionally leave the Care Management information open as you evaluate criteria or close it by clicking Care Management.

Step 3: View and Print the Review Summary

The Review Summary includes information about the medical review and the criteria you selected.

- [View and print a decision tree review summary](#)
- [View and print a Q&A review summary](#)

View and print a decision tree review summary

ⓘ **Note:** Applies to InterQual® Level of Care (except Home Care Q & A), all InterQual® Behavioral Health (except Procedures Q&A), SIM *plus*™, and InterQual® Ambulatory Care Planning Specialty Referral products.

1. View the review summary details, which include:

- Reviewer name and date/time information

- Criteria Status

- Criteria product, subset, and version

- Any reviewer comments you added

2. Optionally, customize the Review Summary by selecting or clearing options for any of the following in the Settings list:

   – **Hide Criteria Status** *PDF Only*—Removes the criteria status from display in the PDF version.

   – **Include Notes** *PDF Only*—Includes InterQual notes in the PDF version.

   – The following options apply to display of information in the review summary screen and PDF, as well as in the Copy as Text or XML.

   – **Selected Criteria Only**—Displays only criteria you selected.

   – **Selected Criteria in Context** (Default)—Displays all criteria you selected as well as the unselected sibling criteria points.

   – **All Criteria**—Displays the entire subset and includes criteria for all episode days.

3. To print the Review Summary, click Print 🖨.

4. Depending on the options available, click Open or click DOWNLOAD PDF.

   The Review Summary PDF contains all of the review summary details.

5. Use the PDF controls to print and/or save the PDF.

View and print a Q&A review summary

ⓘ **Note:** Applies to InterQual®Level of Care: Home Care Q & A, InterQual® Ambulatory Planning: Procedures, Imaging, Specialty Rx Oncology, Specialty Rx Non-Oncology, Molecular Diagnostics, and Durable Medical Equipment products.

1. View the review summary details, which include:

   – Reviewer name and date/time information

   – Criteria product, subset, and version

   – Criteria Status

   – All available and selected recommendations

   – All selected medical codes (for example, ICD, CPT®, and HCPCS codes)

   – If the InterQual® CriteriaView feature is available, any tracked recommendations and/or additional criteria selections

   – All medical review questions and answers

   – Any reviewer comments you added

2. Optionally, customize the Review Summary by selecting or clearing options for the following in the Settings list:

   – **Include CriteriaView Selections** (Available with the CriteriaView feature)—Displays CriteriaView information on the Review Summary screen and in the PDF. This includes any recommendations you selected to track on the CriteriaView pane and/or any additional criteria selections you made. The option, which displays only if you tracked

recommendations and/or made additional criteria selections, is selected by default; however, if you don't want to include this information, clear the check box.

– **Include Notes** *PDF only*—Displays InterQual notes in the PDF version.

– **Hide Criteria Status** *PDF only*—Removes the criteria status from display in the PDF version.

3. To print the Review Summary PDF, click Print 🖶 .

4. Depending on the options available, click Open or click DOWNLOAD PDF .

5. Use the PDF controls to print and/or save the PDF.

Step 4: Copy the Review Results

You can copy the review summary details from a review to your computer's Clipboard and paste it to your system. You can choose to copy the review information as Text or XML.

1. In the Review Summary screen, click Copy As...

   The Copy & Save dialog box displays.

2. Click either Text or XML, then click Select All.

3. Copy the contents to your system using Ctrl + C.

4. When you have finished copying, click the (X) to close the dialog box.

   You have now completed the steps for conducting a review.

5. Optionally, continue with any of the following tasks:

   – Start a new review.

   – Click Menu to exit the workflow and return to a previous screen. Then, optionally, select an option from the navigation pane.

Close Review or Start New Review

You can close a review or start a new one when you reach the end of the workflow after conducting a review.

1. In the Review Summary screen, click Close Review/New Review.

   A message alerts you that closing or starting a new review will erase the current review.

2. Click OK to continue.

   The Select Subset screen displays where you can, optionally, start a new review.

Evaluate Q&A Criteria using CriteriaView

If the CriteriaView feature is available, you can use it to track availability of recommendations as you answer questions and view additional criteria for recommendations that do not meet criteria. There are two steps to evaluating criteria:

- Answer questions

- View recommendations and additional criteria

Answer Questions

1. After you select a subset, click **BEGIN MEDICAL REVIEW ➤**

2. Select the recommendations you want to track:

   A. Click CriteriaView on the right side of the screen to display the CriteriaView pane. Hide the pane at any time by clicking CriteriaView again or, optionally, leave it open as you answer the questions.

   B. The CriteriaView pane displays a list of recommendations for the subset.

   C. Click SELECT ALL to track all recommendations or select the check box(es) to track specific recommendation(s).

3. Answer the questions by reviewing each one as it displays and providing answers by selecting one or more options, as appropriate.

   – Follow rules associated with the questions. Rules display in brackets next to the question (for example, **[≥ One, except Other clinical information (add comment)]** is a rule).

   – If necessary, click NEXT ➤ to continue to the next question. Single answer questions automatically display the next question, while multi-answer questions display the Next button.

   – View any notes associated with the questions by clicking the Note icon.

4. Optionally, view availability of the recommendations in the CriteriaView pane:

   A. If closed, click CriteriaView to display the pane.

   B. Click View All to see all recommendations or click Selected to see only tracked recommendations. Tracked recommendations that become unavailable, based on your answers, are crossed off; for example, PET, Brain ❓.

   C. View the question that caused a recommendation to become unavailable by clicking the question mark (❓) next to the recommendation.

   D. The Recommendation Availability dialog box displays and shows the question. From here, you can view additional criteria and answer questions that lead to the recommendation or you can return to the medical review.

ⓘ **Note:** If you choose *not* to view additional criteria at this point in the workflow, you can do so later in the Recommendations screen for any unavailable recommendations.

E. Continue with one of the following options:

- View additional criteria and answer questions by continuing with step 5 below.

- Resume the medical review and answer the remaining questions. Click the X to close the Recommendations Availability dialog box, answer the remaining medical review questions, and then continue with step 6 below.

5. In the Recommendation Availability dialog box, click View Additional Criteria.

A. Review the question that caused the recommendation to become unavailable, then using the rules that display in the highlighted box below each question as a guide, answer the questions.

ⓘ **Note:** If you do not have all the required information, you may skip a question. Additionally, you are not required to answer the questions in any specific order; however, the rules may guide you to follow a certain path.

B. When you finish answering the questions, click Additional Criteria Completed or click the continue to recommendations link.

ⓘ **Note**: Clicking Cancel returns you to the medical review without saving your additional criteria responses.

The Recommendations screen displays. It shows why criteria for the recommendation were not met and, beginning with the question that caused the recommendation to become unavailable, lists each clinical scenario that would lead to the recommendation.

- A checkmark (✔) indicates the answer you selected leads to the recommendation.

- An X (✖) indicates the answer you selected does not lead to the recommendation.

C. After you view the results, continue with any of the following options:

- If appropriate, edit your selections for the same recommendation by clicking the pencil icon next to the recommendation Bone/joint scan with SPECT ✎ .

- View additional criteria for another unavailable recommendation by clicking the Additional Criteria link and selecting a recommendation. Answering questions for a different recommendation will erase your current additional criteria responses. Click Yes or No in the warning message that displays.

- Return to the medical review by clicking ◉ PREVIOUS and answer the remaining questions. Answering the remaining questions will erase your additional criteria responses. Click Yes or No in the warning message that displays.

- Go to the review summary by clicking REVIEW SUMMARY ◉ and then continue with Viewing and Printing the Review Summary.

6. If you continued with the medical review, when you reach the end of the questions, click VIEW RECOMMENDATIONS ◉ .

View recommendations and additional criteria

When a medical review is complete, the results display in the Recommendations screen.

The results vary depending on the product (for example, not recommended, one recommendation, more than one recommendation, mutually exclusive recommendations and so on). Additionally, if the CriteriaView feature is available, you might see recommendations that are no longer available.
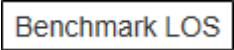

View and select a recommendation

When the medical review results in one or more recommendations, you select recommendations as follows:

1. View the recommendation details:

    –   Read any notes by clicking the note icon.

    –   View the ICD, CPT®, and HCPCS codes that apply by clicking Show Codes. Hide the codes by clicking Hide Codes.

    –   View any values associated with the recommendation, such as hour(s) per day, time(s) per year, or visit(s). For example, a Home Physical Therapy recommendation might indicate a number visits within a given time frame, such as 6 visits within 2 weeks.

    –   For Specialty Rx Oncology:

        o   View the NCCN Drugs & Biologics Compendium (NCCN Compendium®) rating for an off-label drug recommendation.

        o   Optionally, view the NCCN Compendium® rating description by moving the pointer over the rating number.

        o   Optionally, access the National Comprehensive Cancer Network® (NCCN®) website by clicking the link within the red note.

    –   For Level of Care: Home Care Q & A, the results might show both Recommended Services and Not Recommended Services. This occurs when you select two or more services and at least one service is recommended and at least one service is not recommended.

2. Select a recommendation by clicking it.

    Selected recommendations change to green and automatically display the associated codes.

3. If benchmark LOS information is available for an inpatient procedure, optionally, select a value:

A. Click Benchmark LOS [Benchmark LOS].

B. The Benchmark LOS dialog box displays

C. If appropriate, find a procedure by entering a partial or complete description in the Indications box.

D. Select a procedure from the list.

E. The dialog box closes and the selected value displays in the Recommendations screen.

4. Optionally, select codes:

    – Click the tab for the type of code you want to select.

    – Search by medical code or description. Alternately, scroll through the list until you find the code you want.

    – Click a code description to select it. Click again if you want to clear a code.

    – If you select HCPC(S) codes for a Specialty Rx Oncology recommendation, you can enter a quantity amount for a drug on the HCPCS Code/NDC Crosswalk pane.

5. View the selected codes by clicking [Selected 4]. The value on the Selected button reflects the number of codes you selected.

6. When you have finished selecting recommendations, do one of the following:

    – Optionally, view additional criteria for any unavailable recommendations.

    – Click [REVIEW SUMMARY].

View additional criteria for recommendations no longer available

If the CriteriaView feature is available and a recommendation(s) is no longer available, you can view additional criteria and answer questions to see the clinical scenarios that lead to a recommendation.

1. Click the *Why didn't a recommendation meet criteria?* link.

    The Recommendation Availability dialog box displays.

2. If more than one recommendation is available, select one from the list.

3. Review the question that caused the recommendation to become unavailable and then click View Additional Criteria.

4. Answer the questions using the rules that display below each question as a guide.

ⓘ **Note:** If you do not have all the required information, you may skip a question. Additionally, you are not required to answer the questions in any specific order; however, the rules may guide you to follow a certain path.

5. When you finish answering the questions, click Additional Criteria Completed.

ⓘ **Note**: Clicking Cancel erases your additional criteria responses.

    The Recommendations screen results show why criteria for the recommendation were not met and, beginning with the question that caused the recommendation to become unavailable, lists each clinical scenario that would lead to the recommendation.

- A checkmark (✔) indicates the answer you selected leads to the recommendation.

- An X (✖) indicates the answer you selected does not lead to the recommendation.

6. Optionally, continue with the following options:

   - If appropriate, edit your selections for the same recommendation by clicking the pencil icon next to the recommendation **Bone/joint scan with SPECT** ✏ .

   - View additional criteria for another unavailable recommendation by clicking the Additional Criteria link and selecting a recommendation. Answering questions for a different recommendation will erase your current additional criteria responses. Click Yes or No in the warning message that displays.

7. When you have finished, click **REVIEW SUMMARY ⊙** .