

**Mental Health Parity and Addiction Equity Act Disclosure  
 Medical Necessity Frequently Asked Questions**

*This document includes standard responses to questions related to Mental Health Parity (MHP) and Non-Quantitative Treatment Limitations (NQTL). This communication is not intended, nor should it be construed, as legal advice. Federal and state laws and regulations are subject to change. The content provided is for informational purposes only and does not constitute medical advice. Decisions about medical care should be made by the doctor and patient. Please note, your plan documents govern all benefit determinations and in the case of conflict with this document your plan controls. Always refer to the plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the ID card.*

*The following explanations apply to both Medical/Surgical benefits and Mental Health/Substance Use Disorder benefits unless stated otherwise.*

**What is Medical Necessity?**

Medical/Surgical Benefits	Mental Health/Substance Use Disorder Benefits
The term Medical Necessity is defined in your plan documents. The term may also be defined by state-specific requirements. The Plan uses the same definition for both Medical/Surgical benefits and Mental Health/Substance Use Disorder Benefits.	

**What factors, sources, and evidentiary standards are used in creating Medical Necessity criteria?**

Medical/Surgical Benefits	Mental Health/Substance Use Disorder Benefits
<p>The Plan leverages and adopts the created committees within the broader United Healthcare corporate organization, and a standard process to approve Medical Necessity criteria is followed in-line with the parent corporation. These committees include board-certified physicians, behavioral health Medical Directors, and senior leaders from a variety of different departments and medical specialties.</p> <p>The committees may consider the following factors:</p> <ul style="list-style-type: none"> <li>• Clinical efficacy</li> <li>• Safety</li> <li>• Appropriateness of the proposed technology</li> </ul> <p>The sources and evidentiary standards may include:</p> <ul style="list-style-type: none"> <li>• Scientifically based clinical evidence</li> <li>• Peer-reviewed literature</li> <li>• Hierarchy of clinical evidence</li> </ul>	

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***When we look at Medical Necessity, is the process to develop and approve Mental Health/Substance Use Disorder clinical criteria different from the process that Medical/Surgical clinical criteria are developed or approved “as written”?***

Medical/Surgical Benefits	Mental Health/Substance Use Disorder Benefits
<p>No. The Plan’s analysis found that the strategy, process, factors, evidentiary standards and source information used to develop internal evidence-based policies and approve externally developed nationally recognized clinical criteria for Mental Health/Substance Use Disorder are comparable to, and applied no more stringently than, the strategy, process, factors, evidentiary standards, and source information used to develop internal evidence-based policies and approve externally developed clinical criteria for Medical/Surgical “as written”.</p>	

***Are Mental Health/Substance Use Disorder Medical Necessity decisions made any differently than Medical/Surgical decisions in practice?***

Medical/Surgical Benefits	Mental Health/Substance Use Disorder Benefits
<p>No. The processes used for Mental Health/Substance Use Disorder Medical Necessity decisions and Medical/Surgical decisions are comparable in practice.</p> <p>Both Mental Health/Substance Use Disorder coverage decisions and Medical/Surgical coverage decisions are made using medical/clinical policies.</p> <p>Golden Rule Insurance (GRI) utilizes independent external review agencies which utilize externally developed and nationally recognized clinical criteria guidelines, personal expertise and experience, along with evidenced based publications recognized by professional societies, in addition to adherence to federal and state requirements in which to make a medical/clinical opinion regarding coverage determinations as it applies to the question of Medical Necessity criteria.</p>	