

Clinical Practice Guideline: Clinical Guidelines and Criteria

Date of Implementation: February 9, 2006

Product: Specialty

American Specialty Health – Specialty (ASH) is charged, through its role as a health plan, to:

- Evaluate current peer-reviewed research literature, generally accepted standards of practice, and existing practice parameters relevant to services offered by the specialties represented by ASH;
- Develop clinical practice guidelines for these diagnostic and treatment planning practices;
- Obtain initial and annual review and approval of the clinical practice guidelines by ASH’s clinical committees, consisting of practicing, contracted clinicians;
- Implement clinical practice guidelines within ASH’s credentialing, clinical services, and clinical performance programs; and
- Manage practitioner compliance with these clinical practice guidelines and criteria.

ASH defines generally accepted standards of practice as those based on peer-reviewed, published research and the educational standards accepted by the majority of the profession’s educational institutions that are core to the profession. Practices and protocols incorporated into baseline education, competency training, and certification or licensure testing requirements of the profession’s regulators (e.g., national and state boards and certifying entities) are also considered contributory to generally accepted standards of practice. The following definitions are applied:

Generally Accepted Standards of Medical Practice:

Generally accepted standards of medical practice refer to standards that are based on **Credible Scientific Evidence** published in peer-reviewed **Medical Literature** generally recognized by the relevant medical community¹, practitioner and **Healthcare Provider Specialty Society** recommendations, and the views of practitioners and Healthcare Providers practicing in relevant clinical areas and other relevant factors.

¹ The term Medical Community as used in ASH policy means that body of appropriately credentialed healthcare providers who engage in clinical practice, academic research, professional education, and clinical administration within the scope of the applicable clinical guidelines.

Credible Scientific Evidence:

Credible Scientific Evidence is clinically relevant scientific information used to support diagnosis or treatment of a member that meets industry-standard research quality criteria, is adopted as credible by an ASH clinical peer review committee and has been published in an acceptable peer-reviewed clinical science resource.

Medical Literature:

Medical Literature is clinically relevant clinical science information published in an acceptable peer-reviewed clinical science resource.

Healthcare Provider Specialty Society:

A Healthcare Provider Specialty Society is a society of specialty practitioners that represents a significant number of practicing practitioners or academic or clinical research institutions for that specialty.

ASH maintains a clinical services program and a quality improvement program in accordance with nationally recognized healthcare accreditation organization standards, client delegation requirements, and applicable state and federal laws and regulations. ASH verifies that covered services are medically necessary services through its clinical services program. ASH evaluates the quality of services through its quality improvement program to ensure the delivery of safe and clinically effective services to members. Practitioners participate in these programs by providing the necessary clinical information to support the medical necessity of services and by documenting and demonstrating clinical performance in accordance with professionally recognized standards of practice. Selected credentialed practitioners also participate on clinical peer review committees responsible for review and approval of clinical policy, as well as credentialing, quality management, and member grievance decisions.

Clinical decisions are made by ASH in support of its Clinical Services Program and Quality Improvement Program and in accordance with the guidelines and criteria described in its policies and Clinical Practice Guidelines (CPGs), including but not limited to:

Clinical Practice Guidelines	
CPG 1	X-Ray Guidelines
CPG 2	Practice Parameters and Review Criteria
CPG 3	Quality Patient Management
CPG 12	Medical Necessity Decision Assist Guideline for Rehabilitative Care
CPG 102	Radiographic Quality and Safety Parameters
CPG 110	Medical Record Maintenance and Documentation Practices

Clinical Practice Guidelines	
CPG 111	Patient Assessments: Medical Necessity Decision Assist Guideline for Evaluations, Re-evaluations, and Consultations
CPG 121	Passive Physiotherapy (Therapeutic) Modalities
CPG 135	Physical Therapy Medical Policy/Guidelines
CPG 155	Occupational Therapy Medical Policy/Guidelines
CPG 156	Wound Care
CPG 157	Lymphedema
CPG 165	Autism Spectrum Disorder (ASD) – Outpatient Rehabilitation Services (Speech, Physical, and Occupational Therapy)
CPG 166	Speech-Language Pathology/Speech Therapy Guidelines
CPG 264	Acupuncture Services Medical Policy/Guidelines
CPG 278	Chiropractic Services Medical Policy/Guidelines
CPG 285	Spinal Manipulative Therapy (SMT) for Musculoskeletal and Related Disorders

1

Clinical Policies	
UM 2	Medical Necessity Review
UM 8	Medical Necessity Definition
UM 9	Clinical Performance System
UM 9 PTOT	Clinical Performance System – Physical Therapy/Occupational Therapy
UM 10	Use of Industry Standard Code Sets
QM 1	Quality Improvement (QI) Program
QM 7	Patient Safety - The Prevention, Recognition, and Management of Adverse Outcomes
QM 10	Management of Urgent Clinical Concerns
QM 11	Management of Suspected Abuse/Neglect Cases
QM 32	Evidence Based Health Information Evaluation/Technology Assessment

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ASH has also developed individual Clinical Practice Guidelines (CPGs) related to specific techniques, procedures, and technologies. These CPGs, as well as the policies and CPGs listed above, are available for review on the ASHLink.com website and/or available upon request.