

# InterQual<sup>®</sup> Evidence-Based Clinical Decision Support for Hospitals



The power to access the best clinical evidence.  
The power to optimize care management.  
The power to align with healthcare payors.

You have the power to improve quality and efficiency.

# InterQual. Access a higher intelligence.

“What we've really done [with automated InterQual reviews] is safeguard the hospital's revenue integrity by getting patients classified in the right level of care at the moment we deliver that care.”

Dr. Thomas Pascuzzi  
Medical Director of Care  
Coordination  
Presbyterian Hospital  
Albuquerque, New Mexico

## Partner with a trusted leader

Today, InterQual products are relied on to support clinical appropriateness decisions by:

- 3,700 hospitals
- 300 health plans
- 1,500 behavioral health facilities
- Quality Improvement Organizations in most states
- 30 Medicaid programs
- The Centers for Medicare & Medicaid Services
- Military Health System
- The U.S. Department of Veterans Affairs (175 facilities)

For hospitals, doing what's best for your patients is one of many competing priorities, and constant financial pressures are a pervasive concern for all providers. Effectively addressing clinical and business needs means moving patients safely and efficiently through their courses of care, in compliance with regulatory requirements and in growing collaboration with other healthcare stakeholders.

McKesson knows that the only path to quality and efficiency is through solid medical evidence, applied consistently. That is why we base our InterQual appropriateness of care criteria on only the best well-researched scientific, evidence-based knowledge and real-world clinical experience. More than 3,700 hospitals, hundreds of other provider organizations, dozens of federal and state agencies, and leading payors too – use InterQual to assess the appropriateness of care for individual patients.

Today, InterQual is the undisputed leader and gold standard in evidence-based clinical decision support, for good reason:

**Credibility** – The intense rigor of the InterQual clinical development process results in unparalleled content integrity, inspiring confidence in clinical decision-making and paving the way for greater transparency and alignment between providers and payors.

**Flexibility** – You can access and use InterQual in the way that suits you best. You can easily combine InterQual with existing care management systems and workflows, customize criteria (e.g., with regional guidelines), share information and tailor a solution to your unique environment.

**Commitment** – The McKesson team is there every step of the way, dedicated to making the client experience a superior one with the best in content, technology and professional services.

### Independent Clinical Review Panel

#### Members represent:

- U.S. and Canada
- All major specialties
- Full continuum of care
- Active practitioners
- Academic and community-based medicine

#### Members are:

- Licensed
- Board-certified/credentialed

### InterQual Clinical Development Team

- Full-time physicians, registered nurses, allied health and other professionals
- Trained by the Delfini Group, world-renowned experts in the concepts, methods and skills of evidence-based clinical improvement to achieve better outcomes and value in clinical care
- Ongoing training and EBM methodology skills evaluation

## Unmatched credibility

Providers know and trust in the clinical integrity that is the hallmark of InterQual – integrity that creates a credible basis for interactions with your physician community.

The InterQual Clinical Development Team works year-round to update and develop the unmatched breadth of InterQual products. The team applies a rigorous, methodical approach to identifying and evaluating evidence – critical for efficiently sorting through the thousands of medical articles published each month. This meticulous and

consistent approach assures that the InterQual criteria are:

- **Evidence-based** – providing clinical knowledge based on the most current, scientifically valid sources
- **Comprehensive** – covering the medical and behavioral health continuums of care
- **Patient-centric** – enabling better management of individuals based on their presentation, including comorbidities or non-specific diagnoses

### Adding up to quality content

- 60 McKesson clinical developers
- 800-member Independent Clinical Review Panel
- 16,000 literature citations
- Over 30 years experience developing and refining clinical content
- 5 categories of evidence in our classification system

## InterQual clinical development process



## Audit solutions

InterQual Historical Criteria, offered within CareEnhance Review Manager, is important for clients facing Centers for Medicare & Medicaid Services' (CMS) RAC and other audits. This product allows clients to perform medical necessity reviews for admissions, continued stays or procedures using the InterQual Criteria in effect for the year services were delivered.

## InterQual hospital integration partners

Since 1996, McKesson has developed and maintained partnerships with prominent healthcare information technology companies to ensure that customers have a full range of launch points into InterQual content. With each new release, our partners undergo a well-refined certification process to validate their updated integration. They have full responsibility for installing, supporting and maintaining the validated integration for our 700+ mutual customers.

Partner	Product
3M	ClinTrac™ Care Planning Manager
ACS Midas+	MIDAS+
Allscripts	Allscripts Care Management, powered by Canopy and ECIN, Extended Care Professional™
Epic Systems Corporation	Referrals Module (EpicCare and Cadence)
Landacorp, Inc.	Maxsys II
Morrisey Associates, Inc.	Morrisey Concurrent Care Manager (MCCM)
PICIS, Inc.	medQM, QM Enterprise
Thomson Medstat	Ascent®

## Flexibility to fit your workflow

Users access InterQual clinical criteria through CareEnhance® Review Manager (Review Manager) software. This software automates clinical reviews, facilitates collection of critical data and enables analysis and comparisons to benchmarks. Review Manager can be used stand-alone, but is truly designed for integration with existing information systems and care management workflow processes. And McKesson offers a menu of additional solutions for customers to expand the integration, extend access to staff and ensure consistency.

The flexibility of deployment and user options has made InterQual the most widely used evidence-based clinical content, improving alignment between providers and payors in care management decisions and payments.

### Integration

- **Use with your existing system.**  
McKesson partners with more than 20 of the leading healthcare information technology companies, and more than 700 customers leverage these proven InterQual product integrations. For a complete list of these companies, please visit McKesson.com.
- **Create your own integrations.**  
Your software developers can build access to InterQual content within other applications when they use our Integration Toolkit, expanding your seamless workflow for easier adoption and efficiency.
- **Integrate your own content.**  
You can achieve a single foundation of clinical content for care management programs by using the Review Manager Custom Criteria Utility to incorporate regional, regulatory and organizational policies, and other content alongside the InterQual Criteria.
- **Exchange data in realtime.**  
Hospitals can reduce manual data entry and achieve faster access to information with our bidirectional HL7 interface. The feature enables Review Manager to accept data from ADT systems and use it to launch the

review process. When reviewers complete their tasks, our new outbound interface lets Review Manager feed results back to the HIS, closing the information loop.

### Access

- **Offer 'anywhere' access for staff.**  
When your staff needs a quick criteria reference – whether on the road, at home, or at an off-site facility – InterQual Online makes it easy to view your licensed InterQual content using any browser and Internet connection.
- **Share criteria with physicians.**  
The InterQual Transparency Solution can lead to more productive conversations about clinical appropriateness with any physician who has privileges at your facility.

### Reporting and testing

- **Generate actionable reports.**  
Users can run – or customize – the 40+ standard reports available within Review Manager whenever needed. Customers that license Crystal Reports® can import custom-developed reports for use within InterQual software products.
- **Drive interrater reliability.** Our online InterQual Interrater Reliability Suite allows you to measure how well and how consistently staff members apply InterQual Criteria. Plus we offer tools for modifying the portfolio of standard tests and case studies to meet your specific needs.
- **Manage discharge planning and necessity-based denials.**  
Hospitals can gain efficiency with Review Manager Plus Pak, which supports additional data collection and reporting, streamlining standards compliance and guiding more appropriate discharge planning. And Plus Pak's results-oriented reporting helps you identify actual and potential impacts on the bottom line – for example, through dollars recovered or identification of areas for improvement.

## Commitment to customer support

Everyone says it. We mean it: McKesson is dedicated to enabling your team to drive the greatest level of efficiency while using the full potential of our products.

Our 140-member Professional Services Team includes industry leading experts with experience in technology, strategic and operational best practices. The team is composed of clinicians and other professionals who have worked directly with the nation's top provider and payor organizations to develop best practices. These top-notch professionals identify issues that stand in the way of optimal performance and getting the most from InterQual; the team works to provide solutions that may include:

- Customized process improvements
- More efficient system interfaces and integrations
- Up-to-date care management strategies
- Comprehensive training

### Professional services include:

- **Implementation.** We have successfully guided hundreds of clients through the implementation process, customizing our mix of training, consulting and technical services for fast, efficient results.
- **Technology and integration support.** Through software customization, Web services development, interface construction, management services, we make sure that InterQual products deliver value quickly in your environment.
- **Training and education.** We help reviewers clearly understand the principles of effective utilization review and are able to apply the InterQual Criteria consistently. We offer Web-based modules, live training in your setting and

customized programs for users at all levels of experience. And for those who seek professional development, we also offer an accredited certification program in healthcare management.

- **Product support.** Our support team is available 12 hours a day, five days a week, via a toll-free hotline and email. We can access client desktops for quick technical troubleshooting. And our customer Web site enables users to search a database of questions and answers, report and keep track of issues, and link to related sites.

### Audit support

We offer a comprehensive suite of services plus software applications for hospitals to manage audits, including evaluation of target areas and audit findings using the InterQual Criteria. Audit Support Services assess processes to identify and address gaps in medical necessity review workflows and train individuals to maximize review effectiveness. These services provide process and educational improvement recommendations, mentoring and interrater reliability testing to support clients before, during and after audits.

“People should know that McKesson offers an enormous amount of support. For smaller hospitals, it would be a very easy, very inexpensive way to go about an implementation.”

Karen Dunning  
Director of Continuum Care Management  
Sacramento Sierra Region,  
Sutter Health  
Sacramento, California

We are proud to have achieved and maintain accreditation for CareEnhance Review Manager under URAC's Vendor Certification program in Healthcare Utilization Management. This certification assures you that the quality for which InterQual is known extends to our software development.



Underscoring our commitment to providing outstanding support for our customers, we earned Services Capabilities & Performance certification from the foremost customer support accreditation group, Service Strategies.

Year after year, almost 100% of our customers report they are satisfied with their product support experience.



## InterQual at work

### ■ Albert Einstein Medical Center

Challenge: Improve ED operating efficiencies.

Solution: Adopted InterQual admissions criteria as part of a multi-faceted capacity management program.

Outcome: ED hours on divert were reduced by 89%, LOS was reduced hospital-wide, and revenues increased by \$4.5 million in one year.<sup>1</sup>

### ■ Genesys Regional Medical Center

Challenge: Comply with Medicare requirement of three-day medically necessary hospital stay before skilled nursing facility admission.

Solution: Implemented an innovative strategy that included assigning medical record specialists to the ED to review records using InterQual admission criteria, then discussing issues with treating physicians.

Outcome: Admissions error rate went to zero, and physician documentation improved, which led to more accurate reimbursement.<sup>2</sup>

### ■ Christiana Care Health System

Challenge: Keep up with demand for intermediate care beds.

Solution: Developed intermediate care decision tree based on InterQual and additional specialty society guidelines for ED staff. Also modified billing method to allow a patient to stay in the same bed from admission to discharge but changed nurse-to-patient ratios as acuity changed.

Outcome: ED patients admitted to intermediate care who met admission criteria rose from 96 to 100%, wait time dropped from 5.5 to 2.5 hours, and daily average number of patients waiting in the ED for an intermediate care bed was reduced about 80%.<sup>3</sup>

## Alignment with Medicare guidelines


The Centers for Medicare & Medicaid Services (CMS) contracts with Quality Improvement Organizations (QIOs) for care management decisions. And because most QIOs rely on InterQual criteria, they are the most frequently used criteria for assessing the appropriateness of care for beneficiaries. InterQual products enable any provider organization serving Medicare beneficiaries to:

- **Access Medicare-related content.** InterQual includes notes outlining where Medicare guidelines differ or overlap with InterQual criteria. In addition, clients can add Medicare or other policies to be viewable within Review Manager, and can also use the Review Manager Custom Criteria Utility to add content to InterQual Care Planning Criteria.
- **Streamline patients' rehabilitation reviews.** InterQual Rehabilitation Criteria offers a single source for users to complete reviews, as they include content

that parallels Medicare guidelines. Our Acute Rehabilitation subsets address the 13 specified qualifying conditions – and match the CMS regulations.

## Quality Indicators since 2004

Spurred by concerns about the nation's quality of care raised by Institute of Medicine initiatives in the mid-1990s, the Joint Commission announced four core measurement areas for hospitals in 2001. CMS and the Joint Commission worked together and agreed on identical measures, with the goal to minimize data collection efforts and focus on the use of data to improve the care delivery process.

Since 2004, InterQual Criteria has included Quality Indicators so all the applicable measures are at your fingertips. In Acute Adult and Pediatric Criteria, just click the  icon and the entire measure for the criteria appears. This convenient access helps you more readily meet care standards for patient safety and hospital accreditation.



## InterQual Criteria: Spanning the Continuum of Care

Level of Care Criteria		
For assessing the clinical appropriateness of patient services across the continuum of care: retrospectively, concurrently or prospectively. Rich clinical detail allows organizations to consider severity of illness, comorbidities and complications, and the intensity of services being delivered in real time, guiding them to the most efficient, safest level of care.	Criteria Sets	Support payors/providers in determining the appropriateness of ...
	Acute	Admission, continued stay and discharge for patients receiving acute care, including admissions for procedures in the inpatient setting
	Long-Term Acute Care	Long-term acute care admission, continued stay and discharge for the top referral diagnoses requiring extended acute care services
	Rehabilitation	Admission, continued stay and discharge for the range of inpatient acute and subacute rehabilitation levels of care
	Subacute & SNF (Skilled Nursing Facility)	Admission, continued stay and discharge for those who have reached some level of stability yet require continued inpatient skilled services before home or outpatient settings are appropriate
	Home Care	Home care services; organized both by service ordered and initial or ongoing review types to maximize workflow efficiency
	Outpatient Rehabilitation & Chiropractic	Care for the top referral diagnoses
Behavioral Health Criteria		
For managing the delivery of mental health and substance use care, including initial and concurrent level-of-care decisions. The comprehensive range of level-of-care alternatives allows for movement up and down the continuum of care, and criteria content is tailored to the needs of seniors, adults, adolescents and children.	Criteria Sets	Supports payors in making care management decisions about ...
	Child Psychiatry (age 4–12)	Admission, continued stay, alternate levels of care, and procedures (neuropsychological and psychological testing)
	Adolescent Psychiatry, Adult Psychiatry, and Geriatric Psychiatry	Admission, continued stay, alternate levels of care, and procedures (ECT, neuropsychological and psychological testing)
	Chemical Dependency & Dual Diagnosis	Admission, continued stay, and alternate levels of care for adults and adolescents presenting with withdrawal, no withdrawal, and dual diagnoses
	Residential & Community-Based Treatment	Admission, continued stay, and alternate levels of care for adult, adolescent, and child psychiatric and substance use patients with severe and persistent symptoms
Care Planning Criteria		
For identifying when imaging studies, procedures, DME and specialty referral consultations are appropriate. The criteria can be applied prospectively or retrospectively to manage utilization and identify differences in practice patterns. Sharing this information can produce a sentinel effect that improves care quality.	Criteria Sets	Supports payors in making care management decisions about ...
	Molecular Diagnostics	Molecular and genetic diagnostic tests
	Imaging	Imaging studies for children and adults
	Procedures	Surgery and invasive procedures, providing recommended levels of care (inpatient and outpatient) and identifying urgent and controversial indications
	Durable Medical Equipment	High-cost and complex equipment listed in a “stair step” of cost and complexity
	Specialty Referral	When specialty care is appropriate and could remain in the hands of a generalist
Retrospective Monitoring Criteria: SIM <i>plus</i> <sup>™</sup>		Clinical Evidence Summaries
For assessing the appropriateness of surgical and non-surgical invasive procedures retrospectively. SIM <i>plus</i> provides criteria for checking pathology test results when applicable, as well as for documenting whether a procedure was performed adequately or whether evidence of significant pathology was present and expected.		These complement InterQual Criteria sets with relevant research on complex and controversial diagnoses and procedures, such as CT colonography, drug-eluting stents and uterine artery embolization. Available on 100 topics, these evidence-based white papers provide a common language for physician-to-physician discussions.

Classifying the evidence		
InterQual clinical content developers classify sources into five categories, and display this information for users. McKesson is committed to offering this level of detail and transparency in support of our customers' confidence in the InterQual criteria.	Classification	Type of Evidence
	I	Meta-analysis or systematic review
	II	Well-designed controlled clinical trial or experimental study
	III	Well-designed observational or epidemiologic study
	IV	Evidence-based guideline
	V	Expert opinion, panel consensus, literature review, reference book, descriptive study, case report, or case series

## InterQual® Suite of Products

### Clinical Content

#### InterQual Level of Care Criteria

- Acute
- Long-Term Acute Care
- Rehabilitation
- Subacute & SNF
- Home Care
- Outpatient Rehabilitation & Chiropractic

#### InterQual Care Planning Criteria

- Molecular Diagnostics
- Imaging
- Procedures
- Durable Medical Equipment
- Specialty Referral

#### InterQual Behavioral Health Criteria

- Child Psychiatry
- Adolescent Psychiatry
- Adult Psychiatry
- Geriatric Psychiatry
- Chemical Dependency & Dual Diagnosis
- Residential & Community-Based Treatment

#### InterQual Retrospective Monitoring Criteria

- SIM *plus*™

#### InterQual Clinical Evidence Summaries

### Software and Technology

- CareEnhance® Review Manager
- Auto Authorization Solutions
- InterQual Transparency Solution
- InterQual Distributed Workflow
- Custom Criteria Utility
- Enterprise Plus Pak
- InterQual Historical Criteria
- InterQual Online
- InterQual Online Anonymous Review
- InterQual Interrater Reliability Suite

### Business Services

- Audit Support Services
- Optimization Assessments
- Value Study Programs
- Technology and Integration Services
- Implementation Services
- Training and Education Services
- Professional Healthcare Management Certification (CPHM) Program

## McKesson Health Solutions

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## The power to bring it all together.

Listening to our customers, McKesson delivers collaborative solutions with unrivaled clinical integrity that enable payors, providers, consumers and employers to come together to transform the business and process of healthcare. Our comprehensive portfolio of medical management and claims performance solutions addresses every facet of your organization's efforts to enhance healthcare quality while improving resource management. With our exceptional people, our broad product and service offerings, and the largest customer base in the industry, McKesson can help elevate the overall performance of the health system, one partner at a time.

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1. Advisory.com, "Case study: Albert Einstein's ED management program reduces divert status, boosts revenues," February 18, 2005.  
2. Nina Youngstrom, "Admission Medical-Necessity Errors Abound; Hospitals Try New Compliance Strategies," Report on Medicare Compliance, Volume 14, Number 10, March 21, 2005.  
3. Joanne Matukaitis, RN, MSN, CNA, BC, et al. "Appropriate Admissions to the Appropriate Unit: A Decision Tree Approach," American Journal of Medical Quality, Vol. 20, No. 2, Mar/Apr 2005.