

Criteria Name or Identifier	Service Name
<b>Example 1</b> - I2024-1	CT Scans (all types)
<b>Example 2</b> - Chest Imaging	MRI (includes chest, breast, heart, lungs), CT scan (includes chest, breast, heart, lungs)
<b>Example 3</b> - A-0054 - Neck, Orbit, and Face MRI	MRI (face and neck)
<b>Example 4</b> - Medically Complex	Long-Term Acute Care Hospital Admissions (all causes)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is OMB 0938-New. This information collection will allow CMS to conduct a comprehensive review of Sponsoring organizations' compliance with Medicare Part C utilization management (UM) requirements. The time required to complete this information collection is estimated at 410 hours per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection is mandatory per CMS's authority under Section 1857(d) of the Social Security Act and implementing regulations at 42 CFR § 422.503 and § 422.504, which state that CMS must oversee a Medicare Advantage (MA) organization's continued compliance with the requirements for a MA organization. Additionally, per § 422.516(a), MA organizations are required to compile and report to CMS information related to the utilization of services, and other matters as CMS may require. If you have comments concerning the accuracy of the time estimate or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Date of Most Recent Approval	Medicare Administrative Contractor (MAC) Jurisdictions
11/01/2024	All
11/01/2024	All
08/31/2024	J-5, J-6
06/01/2024	J-15, J-J

States	Contracts
All	All
All	All
IA, IL, KS, MN, MO, NE, WI	Hxxx1, Hxxx2
AL, KY, OH	Hxxx4

FDR	Organization or Vendor
Sample1 FDR, Sample2 FDR, Sample3 FDR	Sample Medicare Advantage Organization
Sample1 FDR, Sample2 FDR, Sample3 FDR	Sample Medicare Advantage Organization
Sample1 FDR, Sample5 FDR, Sample13 FDR	MCG
Sample6 FDR, Sample8 FDR	InterQual

Website Link
<a href="http://www.sampleMAO.com/coveragecriteria/CT">www.sampleMAO.com/coveragecriteria/CT</a>
<a href="http://www.sampleMAO.com/coveragecriteria/MRI">www.sampleMAO.com/coveragecriteria/MRI</a>
<a href="http://www.sampleMAO.com/coveragecriteria/MRI">www.sampleMAO.com/coveragecriteria/MRI</a>
<a href="http://www.sampleMAO.com/coveragecriteria/LTACH">www.sampleMAO.com/coveragecriteria/LTACH</a>