

INDEPENDENT CARE HEALTH PLAN POLICY/PROCEDURE

Department: General & Administration	Policy: Provider Clinical Practice Guidelines
Policy Number: G&A-005	Page 1 of 5
Cross Reference:	

POLICY:

Independent Care Health Plan (*iCare*) contracts with individual and group providers of health care products and services for Medicare and Medicaid recipients. Each line of business functions under its own contract guidelines for which benefit and reimbursement requirements vary. Specific contract benefits, guidelines, and/or policies supersede information outlined in this policy. Independent Care is dedicated to enriching the quality of clinical care provided to our members by our staff and contracted providers. Clinical Practice Guidelines support providers in treating chronic disease, providing preventative care, and facilitating provider-member interactions.

All Clinical Practice Guidelines recommended by *iCare* are based on national medical association and health organization recommendations. While not all inclusive for all possible clinical guidelines they are aligned with national STAR initiative metrics for MCOs . Information provided in this policy applies to all providers of care to *iCare* members and is reviewed annually and updated no less than every two years, or as national guidelines change. Updates to the Clinical Practice Guidelines in policy form are reviewed by the Credentials Review Committee at the quarterly meeting immediately preceding any policy revision.

PROCESS:

A Clinical Practice Guideline (CPG) is created by national medical associations and/or health organizations for the explicit purpose of disseminating peer-reviewed, evidence-based practice recommendations to enhance the quality and consistency of care delivered to all patients, regardless of payor source. The CPGs guide decisions and provide criteria regarding diagnosis, management, and treatment in specific areas of healthcare based on published evidenced-based medical literature. The CPGs reflect a current evidence in the literature for large groups of individuals with specific health diagnoses; at all times, a licensed and boarded practitioner is encouraged to practice patient-centered care, developing care plans with each individual patient's needs and conditions in mind, utilizing medical justifications for exceptions when deviating from the CPGs, based on the provider's expertise and clinical judgment and patient specific situation

The CPGs address the following conditions:

- Osteoporosis Management in Women who had a Fracture

Effective Date: June 30, 2015	Responsible Department: General & Administration
Revision Number: 6	Last Review Date: August, 2019
Last Revision Date: August, 2019	Next Review Date: August 31, 2021
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Department: General & Administration	Policy: Provider Clinical Practice Guidelines
Policy Number: G&A-005	Page 2 of 5
Cross Reference:	

- Diabetes Care – Eye Exam
- Diabetes Care – Kidney Disease Monitoring
- Diabetes Care – Blood Sugar Controlled
- HTN - Controlling Blood Pressure
- Rheumatoid Arthritis Management
- Reducing the Risk of Falling
- Behavioral Health
 - Depression
- Improving Bladder Control
- Care of older adults – pain assessments
- Asthma
- Cancer screening
 - Breast
 - Colon

Guidelines and Information regarding Clinical Practice Guidelines and their updates are posted on *iCare's* Provider Website. As part of the contract process, providers give signed attestation they will conform to *iCare's* policies as posted on *iCare's* provider website. Providers who receive *iCare* training with our Provider Educator also receive information regarding *iCare's* expectation that providers follow CPGs as well as where on the *iCare* website to access the policy and internet links to disease-specific guidelines. Electronic-based provider newsletters and other forms of web-based provider information outlets are additional resources that *iCare* may use at its discretion to inform providers of new or updated policies on an as-needed basis.

CLINICAL PRACTICE GUIDELINES

Osteoporosis Management in Women who had a Fracture

- Treatment of Low Bone Density or Osteoporosis to Prevent Fractures in Men and Women: A Clinical Practice Guideline Update From the American College of Physicians.

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Department: General & Administration	Policy: Provider Clinical Practice Guidelines
Policy Number: G&A-005	Page 3 of 5
Cross Reference:	

- Amir Qaseem, MD, PhD, MHA; Mary Ann Forciea, MD; Robert M. McLean, MD; Thomas D. Denberg, MD, PhD; for the Clinical Guidelines Committee of the American College of Physicians; *Ann Intern Med.* 2017;166(11):818-839.

Diabetes Mellitus

- Frequency of Evidence-Based Screening for Retinopathy in Type 1 Diabetes DCCT/EDIC Research Group, Nathan DM, Bebu I, Hainsworth D, Klein R, Tamborlane W, Lorenzi G, Gubitosi-Klug R, Lachin Journal N Engl J Med. 2017;376(16):1507
- *Standards of Medical Care in Diabetes—2019* Abridged for Primary Care Providers American Diabetes Association ; *Clinical Diabetes* 2019 Jan; 37(1): 11-34.
- Summary of Revisions: Standards of Medical Care in Diabetes d2019 *Diabetes Care* 2019;42(Suppl. 1):S4–S6
- USPTF guidelines currently under revision – will reassess at next review cycle

Hypertension

- American Heart Association Hypertension Tool Kit
- Baknis G .et al ; *Journal of American College of Cardiology* . 2019;73(23):3018-26

Rheumatoid Arthritis Management

- 2015 American College of Rheumatology Guideline for the Treatment of Rheumatoid Arthritis; Arthritis Care & Research; DOI 10.1002/acr.22783 ; VC 2015, American College of Rheumatology

Reducing the Risk of Falling

- Shared risk factors for falls, incontinence, and functional dependence. Unifying the approach to geriatric syndromes Tinetti ME, Inouye SK, Gill TM, Doucette ; *JAMA.* 1995;273(17):1348.
- CDC STEADI Stopping Elderly Accidents , Death and Injury resource
- Preventing Falls in Elderly _LAINIE VAN VOAST MONCADA, MD, and L. GLEN MIRE, MD, Louisiana State University School of Medicine, University Hospital and Clinics, Lafayette, Louisiana; *Am Fam Physician.* 2017 Aug 15;96(4):240-24;

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Department: General & Administration	Policy: Provider Clinical Practice Guidelines
Policy Number: G&A-005	Page 4 of 5
Cross Reference:	

Behavioral Health -Depression

- Screening for Depression in Adults: US Preventive Services Task Force Recommendation Statement
Siu AL, US Preventive Services Task Force (USPSTF), Bibbins-Domingo K, Grossman DC, Baumann LC, Davidson KW, Ebell M, García FA, Gillman M, Herzstein J, Kemper AR, Krist AH, Kurth AE, Owens DK, Phillips WR, Phipps MG, Pignone MP ;*JAMA*. 2016;315(4):380

Improving Bladder Control

- Shared risk factors for falls, incontinence, and functional dependence. Unifying the approach to geriatric syndromes Tinetti ME, Inouye SK, Gill TM, Doucette ;*JAMA*. 1995;273(17):134

Care of older adults - Pain assessment

- An interdisciplinary expert consensus statement on assessment of pain in older persons. Hadjistavropoulos T, Herr K, Turk DC, Fine PG, Dworkin RH, Helme R, Jackson K, Parmelee PA, Rudy TE, Lynn Beattie B, Chibnall JT, Craig KD, Ferrell B, Ferrell B, Fillingim RB, Gagliese L, Gallagher R, Gibson SJ, Harrison EL, Katz B, Keefe FJ, Lieber SJ, Lussier D, Schmader KE, Tait RC, Weiner DK, Williams J ;*Clin J Pain*. 2007;23(1 Suppl):S1.
- Oregon Pain Guidance (OPG) Pain Treatment Guidelines 2016 ; p 32-35

Asthma

- GOLD Global Initiative for Chronic Obstructive Lung Disease 2019 report
- Global Initiative for Asthma. 2015 Asthma, COPD and asthma – COPD Overlap Syndrome (ACOS). 2015

Cancer Screening

Breast

- US Preventive Services Task Force. Screening for Breast Cancer: US Preventive Services Task Force recommendation statement. *Ann Intern Med* 2016; 164:279.
- Final Update Summary: Breast Cancer: Screening*. U.S. Preventive Services Task Force. February 2018

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Department: General & Administration	Policy: Provider Clinical Practice Guidelines
Policy Number: G&A-005	Page 5 of 5
Cross Reference:	

Colon

- Screening for Colorectal Cancer: US Preventive Services Task Force Recommendation Statement. US Preventive Services Task Force, Bibbins-Domingo K, Grossman DC, Curry SJ, Davidson KW, Epling JW Jr, García FA, Gillman MW, Harper DM, Kemper AR, Krist AH, Kurth AE, Landefeld CS, Mangione CM, Owens DK, Phillips WR, Phipps MG, Pignone MP, Siu AL ;*JAMA*. 2016 Jun;315(23):2564-75.

Responsible Department: General and Administration

Responsible Party: Medical Director

Reviewing Department(s): General and Administration

References: As listed, above

Recommended Distribution: All staff via iCare intranet site

Approval:

Thomas Lutzow, President/CEO

Date

Mary Ellen Benzik, MD Medical Director

Date

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