

Arizona Department of Health Services Office For Children With Special Health Care Needs Children's Rehabilitative Services Administration	Effective Date: 03/02/2009 Last Review Effective Date: 02/11/2009
SUBJECT: Medical and Utilization Management	SECTION: MM/UM 1.9

SUBTITLE: CRSA New Medical Technology Coverage

POLICY:

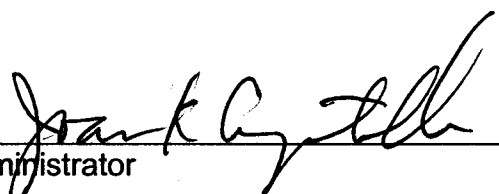
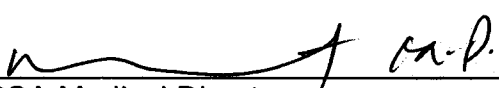
It is the policy of the Children's Rehabilitative Services Administration (CRSA) to review and approve new medical technologies when indicated.

Matters appropriate for technological review may include, but are not limited to, new medical procedures, new equipment, and/or new uses for equipment already approved for use and new drugs or drugs which have been approved for another use and have been approved by regulatory, licensing, and/or oversight agencies.

PROCEDURES:

- 1) Any Children's Rehabilitative Services (CRS) Contractor Medical Director/Administrator may present new medical technology proposals for CRS coverage to the CRSA Medical Director. The request must be in writing and include the appropriate support information.
- 2) Any coverage decisions made by Medicare intermediaries/carriers and/or Medicare, Federal, or State Medicaid authorities will be reviewed for determination of CRS coverage through the same process as a request for new medical technology.
- 3) CRSA has ninety (90) days to make a determination regarding the new medical technology requested. If a determination is required prior to ninety (90) days due to an urgent need, an expedited determination must be made within three (3) working days; with an extension option of an additional fourteen (14) calendar days. Expedited requests must be presented immediately to the CRSA Executive Committee for a determination.
- 4) The CRSA Medical Director will present the request at the next CRSA and CRS Contractor meeting or will call an ad hoc meeting in the case of an expedited request.
 - a) Resource persons may be invited to present.
 - b) Support information should be distributed at least one (1) week prior to the meeting.
- 5) The CRSA and CRS Contractor meeting may recommend to:

- a) Approve the request for coverage by all specialties;
 - b) Approve the request for coverage by selected specialties;
 - c) Deny the request;
 - d) Deny the request pending more information or evidence; or
 - e) Table the request.
- 6) The Medical Review Process may include, but is not limited to, the following sources:
- a) Review of peer-reviewed medical literature, e.g., meta-analysis that received positive endorsement of nationally recognized medical panels regarding scientific efficacy and rationale;
 - b) Opinion of medical experts recognized in relevant medical field(s),
 - c) Input from other CRS Medical Directors;
 - d) Input from the Arizona Health Care Cost Containment System (AHCCCS) Medical Director;
 - e) Regulatory and/or oversight agency endorsement and/or findings regarding the technology, procedure, or medication; and/or
 - f) Practitioner documented training and experience with the new technology.
- 7) The CRSA Medical Director will forward recommendations for coverage to the CRSA Chief Financial Officer for cost analysis.
- 8) Upon completion of the cost analysis, the request along with the recommendations from the CRSA and CRS Contractor meeting will be presented to the CRSA Executive Management Committee for administrative review and action.
- 9) CRSA will notify the CRS Contractor of the decision(s).
- 10) The Arizona Health Care Cost Containment System Administration (AHCCCSA) will be notified of CRSA's recommendation. A request will be submitted to AHCCCSA for approval of any procedural code(s) changes as required in the Prepaid Medical Management Information System (PMMIS).
- 11) CRSA will be responsible for administrative oversight of the new medical technology.
- 12) The CRSA Medical Management/Utilization Management (MM/UM) Committee will be notified of recommendations for new medical technologies at the next regularly scheduled meeting.
- 13) Denial of a request for new medical technology does not preclude resubmission when new information is available.

Approved:	Date:
 CRSA Administrator	3/5/09
 CRSA Medical Director	3/4/09