

Contractors must minimally report Non-Quantitative Treatment Limits (NQTL) analysis results for prior authorization, concurrent review, medical necessity, outlier, documentation and out of area criteria, but must also assess and document for the presence of other potential NQTLs.

Examples of NQTLs can be found in the Medicaid/CHIP parity rule [42 CFR 438.910(d)(2)(ii) / 440.395(b)(4)(ii) / 457.496(d)(4)(ii)]. Note that the list is not exhaustive.

<b>FULLY INTEGRATED BENEFIT PACKAGE</b>					
<b>CONTRACTOR</b>	<b>APPLICABLE BENEFIT PACKAGES</b>	<b>NON-QUANTITATIVE TREATMENT LIMITATION (NQTL)</b>	<b>CLASSIFICATION(S)</b>	<b>PARITY COMPLIANCE ISSUE IDENTIFIED (YES/NO)</b>	<b>SUMMARY OF ACTIONS TAKEN TO ADDRESS PARITY COMPLIANCE ISSUE(S)</b>
		Utilization Management (UM)	Inpatient		
		Utilization Management (UM)	Outpatient		
		Utilization Management (UM)	Emergency Care		
		Medical Necessity Criteria	Inpatient		
		Medical Necessity Criteria	Outpatient		

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		Medical Necessity Criteria	Emergency Care		
		Medical Necessity Criteria	Prescription Drugs		
		Documentation Requirements	Inpatient		
		Documentation Requirements	Outpatient		
		Documentation Requirements	Emergency Care		
		Documentation Requirements	Prescription Drugs		
		Out-of-Network/ Geographic Area Coverage	Inpatient		
		Out-of-Network/ Geographic Area Coverage	Outpatient		
		Out-of-Network/ Geographic Area Coverage	Emergency Care		