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Milliman Care Guidelines For Residential Treatment

Milliman Care Guidelines® is a clinical software package utilized to screen and evaluate for medical necessity and appropriateness of services which includes requests for acute inpatient admissions, Partial Hospitalization programs, Intensive outpatient programs, Residential Treatment Centers, and outpatient professional office visits.

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2020 – 2021 Magellan Care Guidelines 5 Medical Necessity Definition Magellan reviews mental health and substance abuse treatment for medical necessity. Magellan defines medical necessity as: “Services by a provider to identify or treat an illness that has been diagnosed or suspected.

Magellan Care Guidelines 2020-2021

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The Milliman Care Guidelines span the continuum of patient care providing access to evidence-based knowledge and best practices relevant to patients in a broad range of care settings. This not only assists with decisions for each setting but also facilitates coordination of care and smooth patient transitions.

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Milliman Care Guidelines, or MCG, are clinical guidelines to help providers and health plans make decisions about patient care, according to MCG. These guidelines offer guidance for handling a variety of different medical conditions, including diabetes, heart failure, pneumonia, asthma and chronic obstructive pulmonary disease. Milliman Care Guidelines help support a qualified physician's clinical decisions, notes MCG.

What Are Milliman Care Guidelines? - Reference.com

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Guidelines Milliman Care Guidelines is a division of Milliman USA, and provides its clinical Care

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Guidelines to many of the firm's clients in the hospital and insurance industries. Milliman USA, Inc., headquartered in Seattle, serves the full spectrum of business, financial, government and union organizations. Milliman Care Guidelines Now Offered Without Charge To ... Milliman Care Guidelines, or MCG, are clinical

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Milliman Care Guidelines For Residential Care guidelines from MCG provide fast access to evidence-based best practices and care-planning tools across the continuum of care, supporting clinical decision-making and documentation as well as enabling efficient transitions between care settings.

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Care guidelines from MCG provide fast access to evidence-based best practices and care-planning tools across the continuum of care, supporting clinical decision-making and documentation as well as enabling efficient transitions between care settings. Data analysis provides insight into critical benchmarks such as length of stay, re-admissions, and skilled nursing facility/inpatient rehabilitation admission rates.

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Care Guidelines for Evidence-Based Medicine | MCG Health

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2. Customizations to MCG Care Guidelines (formerly Milliman Care Guidelines) clinical indications with changes to the original MCG (formerly Milliman) criteria which includes adding or revising appropriateness criteria. 3. Customizations to MCG Care Guidelines (formerly Milliman Care Guidelines) goal length of stay

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Milliman Health Trend Guidelines™ (HTG) give insurers, healthcare providers, and employers monthly information on healthcare expenditures and utilization for individuals enrolled in commercial insurance plans in the United States. The Trend Guidelines are updated with 12-month trailing data each month, serving as a vital tool and benchmark for negotiations for plan renewals, the setting of trend guarantees,

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forecasting, premium rate development, and many other applications.

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Glassdoor has 10 Milliman Care Guidelines reviews submitted anonymously by Milliman Care Guidelines employees. Read employee reviews and ratings on Glassdoor to decide if Milliman Care Guidelines is right for you.

Measuring patient outcomes has never been more complex or more essential. This is the first publication of its kind to present expert guidance and advice for use in all home health settings. Topics include: importance of appropriate data collection, how to analyze patient outcomes, a comparison of various outcome measures used in home health, monitoring patient satisfaction and quality care, and much more.

The Second Edition of this comprehensive "how to" text has been completely revised and updated. This text outlines the basics of case management and illustrates some of the pitfalls encountered in the field of case management. The book provides information on the new Case Management Standards, supplies standard definitions and guidelines of case management for the practicing case manager, and presents information on caring for clients in a wide variety of health care settings. New to this edition--chapters focusing on Quality Reviews and Risk Management with a strong emphasis on Continuous Quality

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Improvement (CQI), ethical and legal issues, and various case studies.

Advances in medical, biomedical and health services research have reduced the level of uncertainty in clinical practice. Clinical practice guidelines (CPGs) complement this progress by establishing standards of care backed by strong scientific evidence. CPGs are statements that include recommendations intended to optimize patient care. These statements are informed by a systematic review of evidence and an assessment of the benefits and costs of alternative care options. Clinical Practice Guidelines We Can Trust examines the current state of clinical practice guidelines and how they can be improved to enhance healthcare quality and patient outcomes. Clinical practice guidelines now are ubiquitous in our healthcare system. The Guidelines International Network (GIN) database currently lists more than 3,700 guidelines from 39 countries. Developing guidelines presents a number of challenges including lack of transparent methodological practices, difficulty reconciling conflicting guidelines, and conflicts of interest. Clinical Practice Guidelines We Can Trust explores questions surrounding the quality of CPG development processes and the establishment of standards. It proposes eight standards for developing trustworthy clinical practice guidelines emphasizing transparency; management of conflict of interest ; systematic review--guideline development intersection; establishing evidence foundations for and rating strength of guideline recommendations; articulation of recommendations; external review; and updating. Clinical Practice Guidelines We Can Trust shows how clinical practice guidelines can enhance clinician and patient decision-making by translating complex scientific research findings into recommendations for clinical practice that are relevant to the individual patient encounter, instead of implementing a one

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size fits all approach to patient care. This book contains information directly related to the work of the Agency for Healthcare Research and Quality (AHRQ), as well as various Congressional staff and policymakers. It is a vital resource for medical specialty societies, disease advocacy groups, health professionals, private and international organizations that develop or use clinical practice guidelines, consumers, clinicians, and payers.

With more than 8,000 nonmedical words, phrases, and acronyms related to the healthcare industry, *Slee's Health Care Terms* covers finance and reimbursement, managed care, government regulation, health professionals, legal issues, and more. Now in its fifth edition, *Slee's* is a reference for anyone who deals with the healthcare industry.

Today, as never before, healthcare has the ability to enhance the quality and duration of life. At the same time, healthcare has become so costly that it can easily bankrupt governments and impoverish individuals and families. Health services research is a highly multidisciplinary field, including such areas as health administration, health economics, medical sociology, medicine, , political science, public health, and public policy. The *Encyclopedia of Health Services Research* is the first single reference source to capture the diversity and complexity of the field. With more than 400 entries, these two volumes investigate the relationship between the factors of cost, quality, and access to healthcare and their impact upon medical outcomes such as death, disability, disease, discomfort, and dissatisfaction with care. *Key Features* Examines the growing healthcare crisis facing the United States Encompasses the structure, process, and outcomes of healthcare Aims to improve the equity, efficiency, effectiveness, and safety of healthcare by influencing and developing public policies Describes healthcare systems and

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issues from around the globe Key Themes Access to Care Accreditation, Associations, Foundations, and Research Organizations Biographies of Current and Past Leaders Cost of Care, Economics, Finance, and Payment Mechanisms Disease, Disability, Health, and Health Behavior Government and International Healthcare Organizations Health Insurance Health Professionals and Healthcare Organizations Health Services Research Laws, Regulations, and Ethics Measurement; Data Sources and Coding; and Research Methods Outcomes of Care Policy Issues, Healthcare Reform, and International Comparisons Public Health Quality and Safety of Care Special and Vulnerable Groups The Encyclopedia is designed to be an introduction to the various topics of health services research for an audience including undergraduate students, graduate students, and general readers seeking non-technical descriptions of the field and its practices. It is also useful for healthcare practitioners wishing to stay abreast of the changes and updates in the field.

Comprehensive and easy to read, this authoritative resource features the most up-to-date, research-based blend of practice and theory related to the issues that impact nursing management and leadership today. Key topics include the nursing professional's role in law and ethics, staffing and scheduling, delegation, cultural considerations, care management, human resources, outcomes management, safe work environments, preventing employee injury, and time and stress management. Research Notes in each chapter summarize relevant nursing leadership and management studies and show how research findings can be applied in practice. Leadership and Management Behavior boxes in each chapter highlight the performance and conduct expected of nurse leaders, managers, and executives. Leading and Managing Defined boxes in each chapter list key terminology related to leadership and management, and their definitions. Case Studies at the end of each chapter present real-world leadership and management

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situations and illustrate how key chapter concepts can be applied to actual practice. Critical Thinking Questions at the end of each chapter present clinical situations followed by critical thinking questions that allow you to reflect on chapter content, critically analyze the information, and apply it to the situation. A new Patient Acuity chapter uses evidence-based tools to discuss how patient acuity measurement can be done in ways that are specific to nursing. A reader-friendly format breaks key content into easy-to-scan bulleted lists. Chapters are divided according to the AONE competencies for nurse leaders, managers, and executives. Practical Tips boxes highlight useful strategies for applying leadership and management skills to practice.

Each year, more than 33 million Americans receive health care for mental or substance-use conditions, or both. Together, mental and substance-use illnesses are the leading cause of death and disability for women, the highest for men ages 15-44, and the second highest for all men. Effective treatments exist, but services are frequently fragmented and, as with general health care, there are barriers that prevent many from receiving these treatments as designed or at all. The consequences of this are seriousâ€"for these individuals and their families; their employers and the workforce; for the nationâ€™s economy; as well as the education, welfare, and justice systems. *Improving the Quality of Health Care for Mental and Substance-Use Conditions* examines the distinctive characteristics of health care for mental and substance-use conditions, including payment, benefit coverage, and regulatory issues, as well as health care organization and delivery issues. This new volume in the Quality Chasm series puts forth an agenda for improving the quality of this care based on this analysis. Patients and their families, primary health

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care providers, specialty mental health and substance-use treatment providers, health care organizations, health plans, purchasers of group health care, and all involved in health care for mental and substance use conditions will benefit from this guide to achieving better care.

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