Contractors shall minimally report Non-Quantitative Treatment Limits (NQTL) analysis results for prior authorization, concurrent review, medical necessity, outlier, documentation and out of area criteria, but shall also assess and document for the presence of other potential NQTLs.
Examples of NQTLs can be found in the Medicaid/CHIP parity rule, including but not limited to: 42 CFR 438.910(d)(2)(ii), 440.395(b)(4)(ii), 457.496(d)(4)(ii).

FULLY INTEGRATED BENEFIT PACKAGE					
CONTRACTOR	**APPLICABLE BENEFIT PACKAGES**	**NON-QUANTITATIVE TREATMENT LIMITATION (NQTL)**	**CLASSIFICATION(S)**	**PARITY COMPLIANCE ISSUE IDENTIFIED (YES/NO)**	**SUMMARY OF ACTIONS TAKEN TO ADDRESS PARITY COMPLIANCE ISSUE(S)**
BANNER - UFC	ACC	Utilization Management (UM)	Inpatient	YES	• A Quantitative Treatment Limit (QTL) disparity is represented with a 15-day limit on days within an Institution for Mental Disease (IMD). This limit does not exist for members with physical health conditions. In order to mitigate this disparity, the Health Plan has elected to not use this limit as a decision-making factor for discharge and if the needs persist past the 15 days, admission will continue regardless of payment options.
BANNER - UFC	ACC	Utilization Management (UM)	Outpatient	YES	• The current intake process to receive behavioral health services. The intake process can be highly comprehensive requiring an extensive assessment to identify

Effective Dates: 04/03/19, 10/01/20, 05/04/23
Approval Dates: 11/15/18, 06/04/20, 04/06/23, 12/12/24

FULLY INTEGRATED BENEFIT PACKAGE					
CONTRACTOR	APPLICABLE BENEFIT PACKAGES	NON-QUANTITATIVE TREATMENT LIMITATION (NQTL)	CLASSIFICATION(S)	PARITY COMPLIANCE ISSUE IDENTIFIED (YES/NO)	SUMMARY OF ACTIONS TAKEN TO ADDRESS PARITY COMPLIANCE ISSUE(S)
					and establish appropriate care to meet the needs of the member. This assessment is important due to significantly more layers of care available in BH. This lengthy assessment does not exist for physical health services. However, BUHP works proactively to mitigate this issue and develop processes to provide services to our members in a timely manner. The Health Plan has emergent processes in place to meet members needs in emergent situations and to help mitigate this barrier. • Definitive Urine Drug Testing G0482 and G0483 was added to the prior authorization grid in March 2025 related to members utilizing SUD services. These codes were added to the prior authorization grid due to high utilization and for testing that did not meet criteria for this level of

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CONTRACTOR	APPLICABLE BENEFIT PACKAGES	NON-QUANTITATIVE TREATMENT LIMITATION (NQTL)	CLASSIFICATION(S)	PARITY COMPLIANCE ISSUE IDENTIFIED (YES/NO)	SUMMARY OF ACTIONS TAKEN TO ADDRESS PARITY COMPLIANCE ISSUE(S)
					testing. BUFC utilizes national criteria for all prior authorization requests to ensure we are consistently applying criteria for any prior authorization submitted.
BANNER - UFC	ACC	Utilization Management (UM)	Emergency Care	NO	
BANNER - UFC	ACC	Medical Necessity Criteria	Inpatient	NO	
BANNER - UFC	ACC	Medical Necessity Criteria	Outpatient	NO	
BANNER - UFC	ACC	Medical Necessity Criteria	Emergency Care	NO	
BANNER - UFC	ACC	Medical Necessity Criteria	Prescription Drugs	NO	
BANNER - UFC	ACC	Documentation Requirements	Inpatient	NO	
BANNER - UFC	ACC	Documentation Requirements	Outpatient	NO	

FULLY INTEGRATED BENEFIT PACKAGE					
CONTRACTOR	APPLICABLE BENEFIT PACKAGES	NON-QUANTITATIVE TREATMENT LIMITATION (NQTL)	CLASSIFICATION(S)	PARITY COMPLIANCE ISSUE IDENTIFIED (YES/NO)	SUMMARY OF ACTIONS TAKEN TO ADDRESS PARITY COMPLIANCE ISSUE(S)
BANNER - UFC	ACC	Documentation Requirements	Emergency Care	NO	
BANNER - UFC	ACC	Documentation Requirements	Prescription Drugs	NO	
BANNER - UFC	ACC	Out-of-Network/ Geographic Area Coverage	Inpatient	NO	
BANNER - UFC	ACC	Out-of-Network/ Geographic Area Coverage	Outpatient	NO	
BANNER - UFC	ACC	Out-of-Network/ Geographic Area Coverage	Emergency Care	NO	