



Important Update: Alameda Alliance for Health (Alliance) Upgrades to the 29th Edition of the MCG Care Guidelines

At Alameda Alliance for Health (Alliance), we value our dedicated provider partner community. We have an important update that we would like to share with you.

Effective Thursday, June 18, 2026, the Alliance will upgrade to the 29th edition of the MCG Care Guidelines for the following modules:

- Inpatient & Surgical Care (ISC)
 - 21 Guideline titles have content revisions with significant content changes
- General Recovery Care (GRC)
 - Six (6) Guideline titles have content revisions with significant content changes
- Ambulatory Care (AC)
 - 16 Guideline titles have content revisions with significant content changes

Please Note: The list above is a high-level summary of the updates and is not intended to be all-inclusive. For more information and to view the complete 29th edition of the MCG Care Guidelines, please see the attached document from MCG titled Job Aid: 29th Edition Summary of Changes.

Thank you for your continued partnership. We appreciate and thank you for the high quality care you provide your patients and our members. Together, we are creating a healthier community for all.

Questions? Please call the Alliance Provider Services Department
Monday – Friday, 7:30 am – 5 pm
Phone Number: **1.510.747.4510**
www.alamedaalliance.org



Job Aid: 29th Edition Summary of Changes

Introduction

The 29th edition is scheduled for release on February 28, 2025. In addition to the changes listed below, all clinical content has undergone a systematic evidence review by our editorial team. Based on this evidence review, new content has been added and many guidelines have undergone content revisions.

User Resources

- For full details related to the 29th edition, refer to the Summary of Changes (SOC) accessible from the MCG search page or the table of contents of any content solution. The SOC:
 - Summarizes general content and format changes as well as key content revisions.
 - Lists new guidelines and content resources, deleted guidelines and guideline name changes.
- For specific changes to individual guidelines, refer to the Detailed List of Changes (DLOC) accessible from the Table of Contents page for each content solution except Medicare Compliance and Patient Information.
- Comprehensive online training on MCG's 29th edition will be available March 14, 2025, within our learning management system. Please contact your account representative if you need assistance accessing this training resource.

General Content Enhancements and Changes

Number of Guidelines in the Content: The Summary of Changes identifies the number of guidelines and resources in each content solution. This list demonstrates the wealth of MCG evidence-based guidelines and provides a comparison between the number of guidelines in the 28th edition and the newly released 29th edition.

Content Changes Relevant to Medicare Populations: Updates have been made to a subset of guidelines in Behavioral Health Care, General Recovery Care (Long-Term Acute Care Hospital), Home Care, Inpatient & Surgical Care Hospital-at-Home, and Recovery Facility Care (Inpatient Rehabilitation Facility and Palliative Care). These updates address the evidence used to support medical necessity criteria, as well as insight into how the content aligns with published regulations such as CMS' 2024 Medicare Advantage Final Rule (CMS-4201-F). Please refer to the SOC document for additional content changes relevant to the Medicare population.

New Calculator Added – Mean Arterial Pressure (MAP): By entering the patient's data, the calculator converts the systolic and diastolic blood pressure (SBP, DBP) reading to a MAP value based on the formula of $SBP/3 + 2(DBP)/3$. The MAP calculator can be found under Care Management Tools and embedded within relevant guidelines.

Benchmarks and Data

Benchmarking Data Date Ranges: MCG's 29th edition benchmarking reflects data through December 31, 2023, for Commercial and Medicaid populations, and data through December 31, 2022, for the Medicare population.

Behavioral Health Care – Utilization Models and Level of Care Statistics: Now includes visit statistics for Testing Procedures guidelines (B-805-T, B-807-T, B-817-T). The data will be provided by procedure code

for commercial, Medicare, and Medicaid populations. Also, the Applied Behavioral Analysis (B-806-T) guideline includes visit statistics by procedure code for commercial and Medicaid populations.

Assistant Surgeon Guidelines: Now features data at the CPT® code level directly from the CMS Physicians' Fee Schedule and the American College of Surgeons' study "Physicians as Assistants at Surgery".

Potentially Ambulatory Procedures Analysis: Now summarizes Ambulatory Surgery Center, Hospital Outpatient, and Hospital 1-day stays into a single Potentially Ambulatory percentage.

Social Determinants of Health Section: The Social Vulnerability Index Dashboard links have been updated to correspond to each edition rather than by year.

Ambulatory Care – Statistical Companion and Benchmark Statistics Dashboard: Now includes the new Gene Therapy and Cellular Therapy Products category.

Home Care – Statistical Companion: Now includes Medicare claims data for each Home Care Optimal Recovery Guideline and categorizes CMS Patient-Driven Groupings Model (PDGM) to provide more granular details (e.g., functional score, comorbidity) that align with visit count percentiles.

Inpatient & Surgical Care

Readmission Risk Content Added: New and updated Readmission Risk Assessments added to the Optimal Recovery Course. There are now two types of Readmission Risk Assessments. 1) a general Readmission Risk Assessment, and 2) a second assessment, added to select guidelines, which is diagnosis- or procedure-specific.

Table of Contents Revised: The existing pediatric Optimal Recovery Guidelines and all Observation Care Guidelines have been reorganized from an alphabetical list to guidelines categorized into specific groups.

Guideline Format/Sections Changed: To streamline content and improve consistency, changes have been made to the format of some guideline types, including:

- *Care Planning Sections Removed*: Depending on the type of guideline, the Alternative Care Planning, Preoperative Care Planning, and Hospital Care Planning sections have been removed from their respective Optimal Recovery Guidelines and Hospital-at-Home guidelines. Hospital Care sections have been removed from Common Complications and Conditions guidelines.
- *Care Task List Removed*: The Care Task List that resided in some Optimal Recovery Guidelines has been removed.
- *Evaluation List Removed*: The Evaluation List included in the Discharge section of Observation Care Guidelines has been removed.

Multiple Condition Management

Changes to Multiple Condition Management content directly correlate to changes made in the Inpatient & Surgical Care solution.

General Recovery Care

Hospital-at-Home Guideline Added: A new Hospital-at-Home GRG has been added to the Problem Oriented General Recovery Guidelines section. This new general guideline is appropriate for patients who meet hospital-at-home status, but their condition is not addressed by any of the diagnosis-specific ISC guidelines.

Benchmark Length of Stay (BLOS) Codes Display Updated: In previous editions codes with low or insufficient length of stay data, a BLOS displayed as a blank space or as "CR" (Clinical Review). To improve consistency, the BLOS for codes with insufficient length of stay data will now display as "CR".

General Recovery Guidelines Tools Section Renamed: On the Table of Contents page, this content section has been renamed "Additional General Recovery Guideline Criteria".

Evaluation and Treatment Section Removed: Where it was present, the Evaluation and Treatment section has been removed from General Recovery Care guidelines.

Pediatrics/Multiple Trauma/Illness Guidelines Retired: This content has been removed. Users should focus on the patient's most critical condition or procedure and when needed augment the use of the

most applicable guideline with the General/Pediatric Admission and/or General/Pediatric Discharge Criteria.

Medicare Compliance

MCG updates its Medicare Compliance (MCR) content throughout the year to reflect the policy statements written by the Centers for Medicare & Medicaid Services (CMS) or Medicare Administrative Contractors. To view a list of the most recently published changes in the MCR content, refer to the Summary of Changes for Medicare Compliance page, which is accessible from the MCR Table of Contents. This page will be updated with each release and should serve as a reference listing of the changes published to MCR.

Ambulatory Care

New Content Section Added: Gene Therapy and Cellular Therapy Products was added as a new guideline section. This section includes fifteen authorization guidelines addressing gene and cellular therapies.
Specialty Medicine Administration Instructions – Footnotes Removed: The Footnotes with instructions for the administration of the guideline specific medication have been removed.

Behavioral Health Care

Alternative Care Planning Removed: This section of guideline content has been removed.
Substance-Related Disorders, Residential Care Guidelines: To improve ease of use, reference to the American Society of Addiction Medicine (ASAM) criteria, which was previously embedded in Footnotes, now displays in the body of the criteria.

Recovery Facility Care

Clinical Indications for Admission Expanded: Clinical Indications for Admission now include bulleted admission criteria to better support preadmission requirements. Also, the Clinical Indications for Admission to Inpatient Rehabilitation Facility (Acute Rehabilitation) have added or realigned bullets to include more specific requirements of intensive rehabilitation and therapy program.
Evaluation and Treatment Section Revised: Inpatient Rehabilitation Facility Clinical Status Stage 1 bullets within the General Treatment Course have been revised to focus on patient care assessments and now include the content previously located in the guideline’s Clinical Assessment section.
Discharge Planning Section Expanded: The Discharge Planning section of Inpatient Rehabilitation Facility guidelines now includes general and disease-specific information to help develop comprehensive discharge plans.
Evidence Summary Redesigned: The Evidence Summary section of the Inpatient Rehabilitation Facility guidelines has been redesigned for easier reference to topics of interest, aligning relevant diagnosis-specific evidence within the guideline to the corresponding bullet.

Home Care

Table of Contents Revised: The existing pediatric Optimal Recovery Guidelines have been reorganized from an alphabetical list to guidelines categorized into specific groups.
Clinical Indications for Admission Expanded: Clinical Indications for Admission have been expanded to provide greater detail on admission requirements (e.g., Medicare vs non-Medicare population groups). Additionally, criteria were added and realigned within this section for clarity around types of skilled care that may be indicated (e.g., rehabilitation/maintenance therapy program, rehabilitation nursing program).
General Treatment Course Revised: Interventions Stage 1 bullets have been revised for clarity around types of treatments, monitoring, and referrals that may be indicated (e.g., telehealth, case management program).

Extended Visits Updated: Clinical Indications in the Extended Visits section have been expanded to provide greater detail on continuation of care requirements (e.g., Medicare vs non-Medicare population groups).

Chronic Care

Reconcile Interventions Added: Reconcile interventions have been added to the Social Determinants of Health Screening Assessment (C-1139) to prompt the clinician to document closing the loop on a referral status.

New Enrollment Guideline Added: This new assessment guideline is intended to assist organizations with meeting standards that include a health equity component.

Transitions of Care

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Patient Information

Handout Changes: There have been several additions, deletions, and handout name changes in the 29th edition of Patient Information. Refer to the Summary of Changes for specific details.

Summary

- The care guidelines' 29th edition will be released on February 28, 2025.
- Your organization will decide when the transition to MCG's 29th edition will occur.
- Refer to the online Summary of Changes to review detailed information regarding the content and functionality changes included in the 29th edition.

29th Edition Guidelines with Significant Content Changes

While all MCG content has undergone an annual review and many guidelines include content revisions, we have flagged the following guidelines as having significant content changes:

Guideline Title	Guideline Code	Summary of Change
Inpatient & Surgical Care (ISC)		
Abdominal Trauma, Blunt	S-05	Clinical Indications revised due to addition of a new observation care companion guideline.
Asthma, Adult and Pediatric	M-60, P-60	Changes to PaCO ₂ Clinical Indication revised and new Footnotes added. .
Bowel Surgery	S-232, S-235, S-220, S-250	Several of guidelines include significant changes to admission criteria due reorganization and expansion of guideline content.
Cellulitis, Pediatric	P-112	Clinical Indications and Footnotes expanded due to relevant citations and external reviewer suggestions.
Cervical Discectomy or Microdiscectomy, Foraminotomy, Laminotomy and Cervical Fusion, Anterior	S-310, S-320	Trial of nonoperative treatment failure changed from a 3-month to a 6-week trial based on sources cited in the guidelines.
Cesarean Birth	S-350	Clinical Indications addressing active phase, second stage and induction of labor significantly revised; new or expanded Footnotes referencing evidence-based specialty society guidelines added.
Delirium and Delirium: Observation Care	M-590, OC-072	Criteria addressing non-withdrawal delirium warranting observation care and delirium due to withdrawal warranting inpatient admission clarified.

Diabetes Adult and Pediatric	M-130, P-140	pH and serum bicarb parameters removed from hyperglycemic hyperosmolar state (HHS) indications as a patient can be experiencing HHS and have mild non-ketotic acidosis.
Gastrointestinal Bleeding, Upper and Lower, Adult and Pediatric	M-180, M-182, P-200	Clinical Indications expanded to assess for acute bleeding with indications other than decreasing hematocrit as the HCT can fall due to administration of IV fluids. Pediatric guideline also includes clarification of inpatient vs. observation for control of bleeding and the addition of “serious cause” indications.
Mastectomy	S-860, S-862, S-864	Three guidelines now include significantly expanded indications related to risk-reducing procedures; all complete mastectomy guidelines include defined concepts within Clinical Indications; changes to content definitions appear consistently in all three guidelines.
Neonatal Intensity of Care Criteria 2 and Criteria 3	LOC-011, LOC-012	Criteria addressing monitoring daily IV or TPN fluids revised to better reflect scope of care requirements.
Nephrectomy and Nephrectomy by Laparoscopy	S-870, S-872	Clinical Indications added for pre- and post-transplant to address native kidney nephrectomy.
Nephrostomy, Percutaneous	S-890	Clinical Indications related to extracorporeal shock wave lithotripsy (ESWL) expanded.
Pancreatitis	M-250	Clinical Indications and Footnotes reflect the intent that most, but not all, patients with acute pancreatitis will need inpatient care.
Pelvic Inflammatory Disease (PID), Acute Adult and Pediatric	M-260, P-260	Criteria related to clinical presentation and intensity of treatment or patient monitoring added.
Pertussis (Under 12 Months)	P-320, OC-078	Clarification, expansion of indications and significant changes due to addition of new observation care companion guideline.
Transplant, Adult: Heart, Renal, Liver, Lung	S-535, S-1015, S-795, S-1300	Clinical Indications expanded to include repeat transplant criteria; Clinical Indications added for dual organ transplant, such as heart and liver, or heart and kidney.
Transplant, Pediatric: Heart, Renal, Liver, Lung	P-535, P-1015, P-795, P-1300	Repeat transplant criteria added.
Footnote: Hypotension Definition – New Footnote	Multiple	New Footnote addresses use of clinical judgement to accurately interpret blood pressure values; intent is to help the user separate erroneous or incidental findings from those that truly represent the patient’s clinical picture.
Definition: Inferior Vena Cava Filter Placement Appropriate – Revised Criteria	Multiple	Definition revised; previous “Other” criteria removed, and specific clinical criteria added.
Definition: Anticoagulation Needed – Revised Criteria	Multiple	Definition revised; contraindications for use of oral thrombin inhibitors separated into 2 bullets based on the drug type.
General Recovery Care (GRC)		
Cardiovascular Surgery or Procedure	SG-CVS	Transcatheter closure of ventricular septal defect criteria added for pediatrics and adults; criteria related to wireless pulmonary artery pressure monitoring added; and new heart failure related Footnote added.
Gender-Affirming Surgery or Procedure	GG-FMMF	Footnote providing some guidance regarding aesthetic procedures in adolescents added.
Respiratory Failure	PG-RF	New criteria and a new Footnote related to the interpretation of respiratory rates added.
Systemic or Infectious Condition	MG-SIC	Criteria and new Footnote related to syndrome of inappropriate antidiuretic hormone or SIADH added.
Urologic Surgery or Procedure	SG-US	Consolidated all enlarged prostate related procedures into one indication; added option of temporary implanted device; removed option of high-energy transurethral microwave thermotherapy.

Ventilator Management Long-Term Acute Care Hospital	GRG-049	Parameters and definition of unsuccessful breathing trial and respiratory stability significantly revised.
Ambulatory Care (AC)		
Alternating Electric Field Therapy	A-0930	Non-small cell lung cancer criteria added.
Assisted Reproductive Technology	A-0504	American Society for Reproductive Medicine changed the definition of infertility. While this did not impact the guideline's authorization criteria, the Background section of the Evidence Summary has been revised to reflect this society's definition.
Bilevel Positive Airway Pressure (BPAP) Device	A-0994	New COPD criteria added addressing patients being discharged with persistent hypercapnia and the need for reassessment 2-4 weeks after discharge.
Bisphosphonates, Intravenous	A-0294	Criteria for children and adolescents with long-term glucocorticoid-induced osteoporosis added.
Brain Positron Emission Tomography (PET) and PET- CT	A-0096	Autoimmune encephalitis and symptoms of Parkinson's disease criteria added; dementia or mild cognitive impairment indications revised.
Breast MRI	A-0048	Screening criteria to address indications for heterogeneous or extremely dense breasts on mammography expanded.
Cardiac MRI	A-0051	Per specialty guidelines (American College of Cardiology and the American Heart Association) ischemic heart disease criteria expanded; preoperative criteria for congenital heart disease known or suspected added.
Cochlear Implant	A-0177	Criteria for replacement of existing cochlear implant added.
Colonography, CT (Virtual Colonoscopy)	A-0030	Colon cancer staging criteria added; criteria also added for scenarios where original colonoscopy could not be performed due to physical limitations.
Contrast Enema: Single- Contrast, Double-Contrast or Therapeutic	A-0011	Colorectal cancer screening criteria removed, based on changes to the USPSTF guidelines (United States Preventive Services Task Force).
Dilation and Curettage (D and C)	A-0443	Criteria for termination of pregnancy added.
Lung, Single Photon Emission Computed Tomography (SPECT)	A-0091	Criteria specific to chronic thromboembolic pulmonary hypertension, suspected added.
Noninvasive Prenatal Testing (Cell-Free Fetal DNA)	A-0724	Criteria added for need to determine fetal RhD status.
Spine CT Scan, Cervical, Thoracic, Lumbar	A-0025, A-0026, A-0027	Cancer or neoplasm evaluation criteria expanded to address known or suspected bone neoplasm involving the spine.
Spine CT Scan, Cervical, Thoracic, Lumbar, Myelography	A-0025, A-0026, A-0027, A-0031	Criteria related to placement planning of a spinal cord stimulator added.
Durable Medical Equipment, Prosthetics, Orthotics and Supplies	Multiple	The "referenced the appropriate expertise of the provider" Clinical Indication removed.