MedPOINT MANAGEMENT	**Clinical Protocol:** Rheumatology – Specialty Referral	
	ORIGINAL EFFECTIVE DATE: 05/22/2019	**REVIEWED/REVISED DATE(S):** 06/18/2019 08/13/2019 08/08/2022 11/15/2023 01/26/2026
PREPARED BY: Ashley Gonzalez, Project Coordinator, UM; Diane Reyes, Outpatient UM Clinical Manager	**APPROVED BY:** Richard L. Powell, Chief Medical Officer	

PROTOCOL OVERVIEW

This Clinical Protocol advises on indications for Rheumatology Referral. “Most rheumatology diseases / disorders can be expertly evaluated and treated by primary care providers with specialty physician consultation as needed.”

INDICATIONS

Indications for consultation or referral:

- Ankylosing spondylitis
- Antiphospholipid syndrome
- Arthritis in patient with inflammatory bowel disease
- Behcet disease (eg, eye, skin, or mucous membrane involvement)
- Corticosteroid injection needed
- Dermatomyositis
- Diagnosis unclear despite performance of standard laboratory testing and imaging studies
- Disease-modifying antirheumatic drug needed (eg, tumor necrosis factor inhibitor, methotrexate)
- Giant cell arteritis
- Fibromyalgia
- Gout and Hyperuricemia
- Inflammatory arthritis in one or more joints
- Joint aspiration or injection needed and difficult to perform
- Juvenile idiopathic arthritis
- Multisystem involvement (eg, pericardial or pleural effusion)
- Nonradiographic axial spondyloarthritis
- Osteoarthritis
- Osteoporosis
- Polymyalgia rheumatica unresponsive to corticosteroids
- Polymyositis
- Psoriatic arthritis
- Reactive arthritis (Reiter syndrome)
- Rheumatoid arthritis
- Seronegative spondyloarthropathy
- Sjogren syndrome
- Systemic lupus erythematosus

- Systemic sclerosis (ie, scleroderma)
- Vasculitis

RECOMMENDED RECORDS

Please submit the relevant history and physical examination notes, progress notes, consult notes, and results from any diagnostic testing, including laboratory and radiology reports.

CITATION

1. Product Medical Review Criteria Guidelines for Managing Care Service Category RMT - Rheumatology Apollo Guideline No. RMT 100 Guideline Title Consultations and Referrals: Rheumatology Edition 20th Edition, 8th Online Edition, 2021 Revision Date: 11-24-2020 Notes: Annual review; updates © 2018 Apollo Managed Care, Inc. All Rights Reserved.
2. MCG Care Guidelines 29th edition, 3/4/2025 https://www.mcg.com/news-events/press-releases/29th-edition-mcg-care-guidelines/

CLINICAL PROTOCOL REVISION HISTORY

Revised By:	Ashley Gonzalez, Project Coordinator, UM; Diane Reyes, Outpatient UM Clinical Manager	**Date:** 01/26/26	
Approved By:	Richard L. Powell, Chief Medical Officer	**Date:** 2/4/2026	**Signature** DocuSigned by: Richard Powell EE8E6E6807B34D9...
Revised By:		**Date:**	
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