



PROVIDER ALERT

REMINDER – REDUCING INPATIENT ADMINISTRATIVE DENIALS

JULY 3, 2012

Some providers are not requesting pre-certification and/or not requesting concurrent reviews in a timely manner. ValueOptions continues to receive a high number of requests for inpatient authorizations after the date(s) of service. This is creating a high number of administrative denials and appeals.

As stated in the January 25, 2012 provider alert:

All requests for authorization must be submitted on or before the date the service(s) will begin. If authorization is not requested before the start date of services, any requests for medically necessary services will be authorized by the Administrative Service Organization (ASO) from the date the request is made to the end date that is clinically indicated.

Retrospective reviews for medical necessity will only be considered in cases where the consumer received medical assistance after the service was provided or in rare cases where the authorization request could not be processed by the ASO in a timely manner.

The link below goes to the full alert:

<http://maryland.valueoptions.com/provider/alerts/2012/012512-Administrative and Retrospective Review Appeals.pdf>