



Provider Watch

October 2010

PROVIDER BULLETIN - IMPORTANT UPDATES

VERBAL NOTIFICATION - POLICY CHANGE

Peach State Health Plan™ (Peach State) is making an important change in policy to improve the quality of care for our members. Effective immediately, Peach State will verbally notify the treating physician (if known) and the facility of prior authorization, admission or continued stay denials. The denying reviewer will be available to discuss the determination at 1-800-704-1483, option 7. Written notification of all prior authorization, admission and continued stay denials will be sent to the member, treating physician (if known), and facility (if applicable). This information is available on the Peach State website, www.pshp.com. Paper copies of the applicable Peach State policy addressing notifications and availability of reviewing providers for discussion are available upon request. Please call 1-800-704-1483, option 7, Monday - Friday, 7am - 7 pm and we will be happy to assist you.

REMINDER: Please remember to submit ALL relevant information with ALL authorization request(s) to avoid unnecessary denials that can occur due to lack of clinical support for the services being requested.

PEER TO PEER REVIEW

Peer to peer requests can be requested at any time, but a peer to peer request for reconsiderations of adverse determinations can be made by the requesting or treating providers or their designee only within specified time periods. A period of 5 calendar days from the date of the original adverse determination will be allowed for "reconsideration" of standard prior authorization requests. During this period, a peer to peer consultation can be requested by the provider, and a determination can be reversed without a formal appeal if medical necessity requirements are met. Peer to peer requests for reconsiderations regarding hospitalization denials can be conducted within one business day after an adverse determination is rendered. Outside of the timeframes listed above, a peer to peer discussion can be conducted at a provider's request, but the formal appeal process must be pursued. To initiate a peer to peer review, please contact the Peach State appeal coordinator at 1-866-704-1483, option 7. A response to your request will be made within 24 hours.

AFFIRMATIVE STATEMENT

Peach State Health Plan™ (Peach State) does not reward practitioners, providers or employees who perform utilization reviews, including those of the delegated entities, for issuing denials of coverage or care. UM decision making is based only on appropriateness of care and service and existence of coverage. Financial incentives for UM decision makers do not encourage decisions that result in underutilization. Utilization denials are based on lack of medical necessity, or lack of covered benefit.

Peach State and its delegated health plan partners have utilization and claims management systems in place in order to identify, track, and monitor the care provided and, to ensure appropriate healthcare is provided to the members.

Peach State has implemented the following to ensure appropriate utilization of health care:

- A process to monitor for under and over utilization of services and take the appropriate intervention when identified.
- A system in place to support the analysis of utilization statistics, identification of potential quality of care issues, implement intervention plans and evaluation of the effectiveness of the actions taken.
- A process to support continuity of care across the health care continuum.

MEMBER RIGHTS & RESPONSIBILITIES

Peach State provides covered services to all members without regard to:

- Age
- Disability
- Marital Status
- Race
- Sex
- Income
- Health Status
- Arrest or Conviction
- Religion
- Sexual Preference
- Color
- Birth Nation
- Military Participation
- Language

All services that are covered and medically necessary may be obtained. All services are provided in the same way to all members.

Peach State providers who refer members for care do so the same way for all.

Translation services are available if you need them. This includes sign language. This service is free.

The right to appeal any denied service according to state guidelines.

You have the right:

- To have all your personal information including your medical record kept private.
- To be given choices about your healthcare. To know all of your options.
- To never worry about someone forcing you to do something because it makes his or her job easier.
- To ask for and receive a copy of your medical record.
- To request your medical records.
- You have the right to request that your medical records be changed or corrected.

- The Quality Assessment Performance Improvement Program (QAPI) assures that all members receive quality care and appropriate care. The QAPI program focuses on improving clinical care and non-clinical care which will result in positive health outcomes.
- To file a complaint against a doctor, hospital, the service/care you received, or Peach State. If you file a complaint, no one can stop you from continuing to get services.
- To not pay if Peach State runs out of money to pay their bills.
- To not pay for healthcare even if Medicaid or PeachCare for Kids and Peach State does not pay the doctor who treated you.
- To never pay more than what Peach State would charge, if Peach State has to have someone else manage your care.
- To only have a small co-payment and/or deductible, as allowed by state laws and DCH regulations.
- To be treated with dignity, respect and privacy from Peach State staff, providers, physicians and their office staff.
- To choose a Peach State doctor (PCP) and be told which hospitals to use.
- To change your doctor without a reason.
- To know about other doctors who can help you with treatment.
- To know your rights and responsibilities with Peach State and to call if you have questions or comments or want to make changes to them.
- To get information about Peach State's organization and services, providers, physicians, and hospitals and your rights and responsibilities.
- To get a second opinion.
- To know about all the services you will get. This includes:
 - Hours of operation.
 - How to get emergency care after hours.
 - How to get services if you are out of town.
 - What may not be covered.
 - What has limited coverage.
- To be told if your services change. To be told if we cancel a service.
- To be told if your doctor is no longer available.
- To tell us and your doctor if you need help talking to your doctor. You will not have to pay if you are hearing impaired or if you do not speak English.
- To know all information about your doctor(s) so they can care for you.
- To tell your doctor what you like and don't like about your care.
- To speak with your physician about decisions related to your health care.
- To help set treatment plans with your physician, talk to your physician openly and understand your health care options: regardless of cost or benefit coverage.
- To understand your health problems and to speak with your physician about your treatment plans which you and your doctor agree.
- To be free from any form of restraint or seclusion as a means of force, discipline, convenience or revenge.
- To exercise these rights. Also, to know if you do, it will not change how you are treated by the plan, its doctors and providers.
- To file an appeal when you are unhappy about the outcome or a complaint or decision

Member Responsibilities

- To give information about yourself to the Peach State organization, providers, physicians, and hospitals in order to help set treatment goals.
- To give info about you and your health to your PCP.
- To understand your health problems and how to take your medicines the right way.
- To ask questions about your health care.
- To follow your instructions for care agreed upon by you and your physician or hospital.
- To help set treatment goals with your PCP.
- To read the Member Handbook to understand how [Peach State] works.
- To call Peach State and ask questions when you don't understand.
- To always carry your Peach State Member ID card.
- To always carry your Medicaid or PeachCare for Kids Member ID card.
- To show your ID cards to each provider.
- To schedule appointments for care with your doctor.
- To go to the emergency room when you have an emergency.
- To notify Peach State as soon as possible if you go to the emergency room.
- To get a referral from your PCP for specialty care.
- To cooperate with people providing your health care.
- To be on time for appointments.
- To notify the doctor's office if you need to cancel an appointment.
- To notify the doctor's office if you need to change your appointment time.
- To respect the rights of all providers.
- To respect the property of all providers.
- To respect the rights of other patients.
- To not be disruptive in your doctor's office.
- To keep all your appointments. To be on time and cancel within twenty-four (24) hours if you cannot make it.
- To treat your provider with dignity and respect.