



Procedure

DEPARTMENT: Utilization Management	TITLE: Administrative Denial Procedure
DATE: 7/26/2022	VERSION: 1.0

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Purpose

This procedure outlines the steps for an administrative denial and the process for conducting an administrative plea.

Procedure

The Utilization Management Department will make an administrative adverse determination for late notifications or lack of information received and will issue an adverse determination letter to the provider, which has no appeal capabilities. The provider will be able to make a plea consideration only.

Administrative denials are based on the provider manual and contractual guidelines that the provider has agreed to.

The Utilization Management Department will determine if supporting clinical documentation is necessary to make a determination once the request for authorization is received.

1. Within 24 calendar hours of receipt of the request, the Utilization Management Department will contact the provider by telephone and by facsimile to make a request for supporting clinical documentation.
2. If no clinical information is received within 24 business hours of the initial request, the Utilization Management department will make another request for supporting clinical documentation via facsimile.
3. If no clinical information is received within 24 business hours of the second request for supporting clinical documentation, a third and final request will be sent via facsimile.
4. If no supporting clinical documentation is submitted within 24 business hours of the third request for supporting clinical documentation, the Utilization Management Department will make an administrative adverse determination and notify the provider in writing of the determination.

Change Log

Document Version	Major or Minor Revision?	Date	Name	Comments
1.0	New	7/26/2022	Courtney Gonzales	Initial creation

Appendices



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 Manual_FINAL_v2.0.Authorization_2022. hRequest (3).pdf -for-OON_newfax.p

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