

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: Medical Management Physician Peer-To-Peer Delegation Policy
PAGE: 1 of 4	REPLACES DOCUMENT:
APPROVED DATE: 10/31/2013	RETIRED:
EFFECTIVE DATE: 10/31/2013	REVIEWED/REVISED: 10/14; 11/14; 3/15; 10/15; 4/16; 5/17; 4/18
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: SC.UM.50

SCOPE:

Absolute Total Care (ATC) Medical Management

PURPOSE:

To provide the Medical Management Department with a guideline for the peer-to-peer phone review process.

POLICY:

A peer-to-peer review can be conducted with the treating/attending/ordering practitioner. The treating/attending/ordering practitioner has the right to a peer-to-peer review with the appropriate Medical Director or appropriate Practitioner Reviewer (dentist, pharmacist, etc.) within five business days of the receipt of a verbal and/or fax notification of the denial. If it is more than five business days, the treating/attending/ordering practitioner will need to appeal the denial.

PROCEDURE:

Once a request has been denied by an ATC Medical Director, the following are performed:

1. Prior to setting up Peer-to-Peer: The Nurse notifies the requestor via fax that the request for medical services has been denied. (See Attachment) The denial fax will include the process to request a peer-to-peer review.

Note: All requesting providers must be notified via fax of his/her peer-to-peer rights within one business day from the time of denial decision made by the Medical Director. The fax must be in the member's record in the electronic documentation system.

2. The ATC designee will facilitate with the scheduling of the peer-to-peer review between the treating/attending/ordering practitioner and a Medical Director not previously involved in the denial determination. The ATC designee will advise the treating/attending/ordering practitioner when to be prepared for the peer-to-peer call.
3. The Medical Director will make a maximum of two documented phone call attempts to the requesting practitioner to conduct the peer-to-peer. If the Medical Director is unable to reach the requesting practitioner, the Medical Director will document the failed attempts in TruCare.
4. The Medical Director will make the decision to uphold or reverse the denial decision at the time of the peer-to-peer review with the provider.
5. If a denial is upheld, the Medical Director will document the decision in TruCare.

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6. If the Medical Director overturns/reverses the denial, the Medical Director will notify the UM Nurse and document the decision in TruCare. The UM Nurse will contact the provider via phone or fax to notify of the reversal. The UM Nurse will document the notification in TruCare.

***Note – Once the provider is notified of his/her peer-to-peer rights, the provider has five business days to request a peer-to-peer review. Special circumstances can be considered when scheduling the peer-to-peer, e.g. the provider is on vacation.**

REFERENCES: NCQA HP Standards and Guidelines: Utilization Management; UM 7: Element A: Discussing a Denial with a Reviewer

ATTACHMENTS:
Attachment 1-Peer-to-Peer Faxed Communication to Provider.

REVISION LOG

REVISION	DATE
Updated timeframe provider can initiate Peer to Peer from 2 business days to 5 days. Defined ancillary health care professional. Grammatical changes.	10/31/14
Updated reference section.	11/17/14
Updated page 2 “The Administrative Assistant or designee will facilitate the peer-to-peer activities by linking the requesting provider to a Medical Director, who did not facilitate the initial denial determination, for the completion of the peer-to-peer phone review.”	3/23/15
Changed <u>Policy first bullet point</u> from ‘A peer-to-peer can be conducted with Primary Care Physicians (Physicians, Nurse Practitioners, and Attending/Hospitalist Physicians) or Specialists. He/She may delegate their peer-to-peer rights to a Resident Physician (except standing contract with specific hospital(s) that allows Residents to have primary peer-to-peer rights), or a licensed ancillary health care professional. A licensed ancillary healthcare professional includes the following: Occupational Therapists, Physical Therapists, Speech Therapists, and Audiologists’ to ‘A peer-to-peer review can be conducted with the treating/attending/ordering practitioner. The treating/attending/ordering practitioner has the right to a peer-to-peer review with the appropriate Medical	10/15/15

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Director or appropriate Practitioner Reviewer (dentist, pharmacist, etc.) within five business days of the receipt of a verbal and/or fax notification of the denial. If it is more than five business days, the treating/attending/ordering practitioner will need to appeal the denial.’ Deleted second Policy bullet point ‘In the event that a physician chooses to delegate his/her peer-to-peer rights to a designate, he/she must do this in writing to the Manager, Prior Authorization. The types of designees are as follows: Resident Physician (except standing contract with specific hospital(s) that allows Residents to have primary peer-to-peer rights), or a licensed ancillary health care professional. A licensed ancillary healthcare professional includes the following: Occupational Therapists, Physical Therapists, Speech Therapists, and Audiologists (UM 7: Element A). The physician must affirm their understanding that once the peer-to-peer is done by his/her designate, his/her peer-to-peer rights are exhausted. For the purpose of relaying factual, documented information, such as lab results, office staff can read those results to the Medical Director during a Peer to Peer, followed by faxing those same results to ATC.’ Procedure 2. changed ‘The Administrative Assistant or designee will facilitate the peer-to-peer activities by linking the requesting provider to a Medical Director, who did not facilitate the initial denial determination, for the completion of the peer-to-peer phone review. The Administrative Assistant or designee will confirm the provider has received the denial letter and advise the provider to be prepared for the peer-to-peer call.’ To ‘2. The ATC designee will facilitate with the scheduling of the peer-to-peer review between the treating/attending/ordering practitioner and the Medical Director. The ATC designee will advise the treating/attending/ordering practitioner when to be prepared for the peer-to-peer call.’

Added language to clarify the Medical Director performing the Peer to Peer cannot have been previously involved in the denial determination.

Referenced “See Attachment” under Procedure 1 “Prior to setting up Peer-to-Peer.”

Annual Review-Minor grammatical changes

4/20/16

5/1/17

4/10/18

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POLICY AND PROCEDURE APPROVAL

The electronic approval retained in Compliance 360, Centene's P&P management software, is considered equivalent to an actual signature on paper.

VP, Medical Management: _____ Date: _____