

## Procedure for IHCAP applications

- Claim denial or pre-authorization denial is issued
- Patient, representative or provider files 1<sup>st</sup> appeal with the company within 180 days
- 1<sup>st</sup> appeal letter maintaining the denial is issued
- Patient, representative or provider files a request with the carrier for an External Review within 4 months from the date of the 1<sup>st</sup> appeal denial letter (not received date but letter date)

**\*\*\*Consumers enrolled in Multi-State Plan (MSP) coverage are entitled to request an external review from Office Personnel Management (OPM). MPS enrollees may request an external review by calling (855) 318-0714, or e-mailing OPM at [mspp@opm.gov](mailto:mspp@opm.gov). Additional information may be found on the OPM website: <http://www.opm.gov/healthcare-insurance/multi-state-plan-program/external-review/>**

- Company submits an email outlining plan type within 3 days of receipt indicating filed within 4 months and the reason for denial
  - If pre-existing denial, confirmation no prior HIPAA coverage and effective date of coverage with date of first medical documentation
  - If contractual denial, will provide specific policy language
  - If exclusion requested, will provide full findings of carrier investigation of determination; to include complete plan information, last date of prior coverage, complete claim information
- DOI will send specific emailed directions for carrier and IURO authorizing referral within 5 days of receipt per code (usually done same day)
  - If exclusion requested/approved, DOI will reply via email listing code authorizing exclusion and company will provide a copy of the member letter advising exclusion
- Carrier will gather all medical records and such used to make their determination and forward to the IURO to begin appeal
- IURO will assign and send an acknowledgement letter. IURO will also contact the member or representative to confirm received and provide contact information if they had additional information to submit for the appeal
- IURO will select three independent medical providers to review the appeal. The majority decision will be the final decision.
- IURO will fax a copy of the file to the DOI listing the findings, biography of each reviewer with their independent comments regarding the appeal