

SDMI Waiver Request Training

MAY 9, 2023

**Mountain
Pacific**

INNOVATING BETTER HEALTH



Agenda

- Common Errors when Entering Requests
- Checklist for Submitting Requests
- Outcome Letters
- Acumen Cases

Common Errors when Entering Requests

- Timing in QT
 - Indicates when you are notifying us of the request
 - ALL cases should be submitted as a Prospective, not concurrent
 - Prospective = BEFORE services/item has been provided
 - Concurrent = CURRENTLY receiving the service/item
- Provider – Ordering vs Treating
 - **The Treating Facility is Aware**
 - **The Ordering Provider** is the provider (HCP) that ordered the item/service.
 - The Treating Facility and Ordering Provider will **never** be the same, so please do not use the Copy Treating Provider to Ordering Provider feature when adding the Ordering Provider.

Checklist for Submitting Requests

- Supporting documentation must include the following:
 - ❑ Signed prescription or DWO (Detailed Written Order) that includes:
 - ✓ Patient name
 - ✓ Order Date
 - ✓ General Description of the item
 - ✓ Quantity to be dispensed
 - ✓ Frequency required
 - ✓ Treating Practitioner Name/NPI
 - ✓ Treating Practitioner signature

Checklist for Submitting Requests (cont)

- Supporting documentation must include the following:
 - ❑ Narrative Summary from the **prescribing authority** detailing the need for the item
 - ✓ Sufficient documentation of the patient's medical condition to substantiate the necessity for the type and quantity of item requested and the frequency of use.
 - For example, labs should be included if member is having high blood sugar levels and the provider is prescribing Glucerna to help manage or reduce the blood sugar levels
 - ❑ A manufacturers retail price sheet/product warranty information
 - ❑ Quantity of item/per unit

Checklist for Submitting Requests (cont)

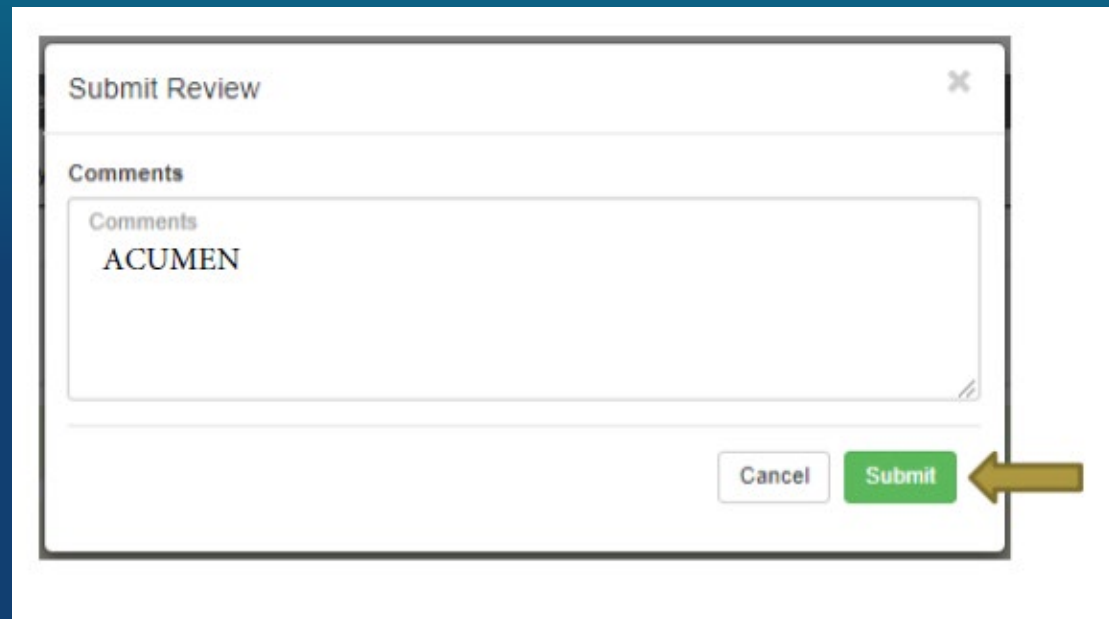
- Supporting documentation must include the following:
 - SDMI Prior Authorization Request of Services form
 - ✓ This must have all questions completed/answered that relates to the ordered service
- Many times, the only thing we receive with a request is the signed order
 - These will **ALWAYS** come back to you via an RFI asking for the clinical documentation to support the request
 - Per BHDD we can send up to 3 RFI's to get the necessary information

Outcome Letters

- Approved
 - All items requested were approved
- Partial Denial
 - Will have fair hearing rights listed on the letter
- Denial
 - Will have fair hearing rights listed on the letter
- Outcome not Rendered
 - Item did not need PA or needs to be submitted via State Plan
 - NOT a denial
- Technical/Administrative Denial
 - NOT a Medical Necessity denial
 - 3 days to respond to RFI, if you don't respond case will auto-close
 - Can reopen within 30 days
 - Do NOT start a new case if you can reopen the original case

Acumen Cases

- Newer process, recently implemented
- After completing the attestation section, must enter the word **ACUMEN** in the comments modal that opens
- Once entered, hit submit



The image shows a screenshot of a web application modal titled "Submit Review". The modal has a close button (an 'x' icon) in the top right corner. Below the title, there is a section labeled "Comments" with a text input field. The word "ACUMEN" is entered into this field. At the bottom right of the modal, there are two buttons: a white "Cancel" button and a green "Submit" button. A yellow arrow points to the "Submit" button, indicating the next step in the process.

Questions?

800-219-7035

THANK YOU!

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