

Effective Date: 7/1/2019

Review Date: 5/3/2022

Revised Date: 4/8/2022

North Sound Behavioral Health Administrative Services Organization, LLC

Section 1000 - Administrative: Notice Requirements

Authorizing Source: HCA Contract

Approved by: Executive Director

Date: 5/3/2022

Signature:

POLICY # 1005.00

SUBJECT: NOTICE REQUIREMENTS

PURPOSE

To ensure notices regarding individuals' services are provided in a manner that gives timely, clear, and easily understood information to individuals' seeking and receiving behavioral health services.

DEFINITIONS

Notice of Action means a written notice that must be provided to Individuals to inform them that a requested service was denied or received only a limited authorization based on medical necessity.

POLICY

North Sound Behavioral Health Administrative Services Organization (North Sound BH-ASO) provides notification of coverage determinations for authorization requests. North Sound BH-ASO is responsible for sending notices of a denial, reduction, termination, or suspension of services. This policy and procedure delineate the timeframes for authorization decisions and the information that must be included in the notice. North Sound BH-ASO adheres to the requirements set forth in this document under Notification of Coverage and Authorization Determination.

PROCEDURES

Timeframes for Authorization Decisions

1. North Sound BH-ASO must provide a written Notice of Action to the individual, or their legal representative, if a denial, reduction, termination, or suspension occurs.
2. North Sound BH-ASO is required to acknowledge receipt of a standard authorization request for behavioral health inpatient services within two (2) hours and provide a decision within twelve (12) hours of receipt of the request.
3. North Sound BH-ASO shall provide for the following timeframes for authorization decisions and notices:
 - a. For denial of payment that may result in payment liability for the individual, at the time of any action or Adverse Authorization Determination affecting the claim.
 - b. For termination, suspension, or reduction of previously contracted services, ten (10) calendar days prior to such termination, suspension, or reduction, unless the criteria stated in 42 Code of Federal Regulation (CFR) § 431.213 and 431.214 are met.
 - c. Standard authorizations for planned or elective service determinations: The authorization decisions are to be made and notices of Adverse Authorization Determinations are to be provided as expeditiously as the individual's condition requires. North Sound BH-ASO will make a decision to approve, deny, or request additional information from the provider within five (5)

calendar days of the original receipt of the request. If additional information is required and requested, North Sound BH-ASO will give the provider five (5) calendar days to submit the information and then approve or deny the request within four (4) calendar days of the receipt of the additional information.

- i. An extension of up to fourteen (14) additional calendar days (not to exceed twenty-eight (28) calendar days total) is allowed under the following circumstances:
 1. The individual or the provider requests the extension; or
 2. North Sound BH-ASO justifies and documents a need for additional information and how the extension is in the individual's interest.
 - ii. If North Sound BH-ASO extends the timeframe past fourteen (14) calendar days of the receipt of the request for service:
 1. North Sound BH-ASO will provide the individual written notice within three (3) business days of the decision to extend the timeframe. The notice shall include the reason for the decision to extend the timeframe and inform the individual of the right to file a grievance if he or she disagrees with that decision.
 2. North Sound BH-ASO shall issue and carry out its determination as expeditiously as the individual's condition requires, and no later than the date the extension expires.
- d. Expedited Authorization Decisions: For timeframes for authorization decisions not described in inpatient authorizations or standard authorizations, or cases in which a provider indicates, or the North Sound BH-ASO determines, that following the timeframe for standard authorization decisions could seriously jeopardize the individual's life or health, or ability to attain, maintain, or regain maximum function, North Sound BH-ASO will make an expedited authorization decision and provide notice as expeditiously as the Individual's condition requires.
- i. North Sound BH-ASO will make the decision within two (2) calendar days if the information provided is sufficient; or request additional information within one (1) calendar day, if the information provided is not sufficient to approve or deny the request. North Sound BH-ASO must give the provider two (2) calendar days to submit the requested information and then approve or deny the request within two (2) calendar days.
 - ii. North Sound BH-ASO may extend the expedited time period by up to ten (10) calendar days under the following circumstances:
 1. The individual requests the extension; or
 2. North Sound BH-ASO justifies and documents a need for additional information and how the extension is in the individual's interest.

- e. Concurrent Review Authorizations: North Sound BH-ASO must make its determination within one (1) business day of receipt of the request for authorization.
 - i. Requests to extend concurrent care review authorization determinations may be extended to within three (3) business days of the request of the authorization, if North Sound BH-ASO has made at least one (1) attempt to obtain needed clinical information within the initial one (1) business day after the request for authorization of additional days or services.
 - ii. Notification of the Concurrent Review determination shall be made within one (1) business day of North Sound BH-ASO's decision.
 - iii. Expedited appeal timeframes apply to Concurrent Review requests.
- f. For post-service authorizations, North Sound BH-ASO shall make its determination within thirty (30) calendar days of receipt of the authorization request.
 - i. North Sound BH-ASO shall notify the individual and the requesting provider within three (3) business days of North Sound BH-ASO's determination.
 - ii. Standard Appeal timeframes apply to post-service denials.
 - iii. When post-service authorizations are approved, they become effective the date the service was first administered.

Notification of Coverage and Authorization Determinations

For all Authorization Determinations North Sound BH-ASO shall:

1. Notify the Individual, the requesting facility, and ordering provider in writing. North Sound BH-ASO must notify all parties, other than the Individual, in advance whether notification will be provided by mail, fax, or other means.
2. For an authorization determination involving an expedited authorization request, North Sound BH-ASO must notify the Individual in writing of the decision. The Contractor may initially provide notice orally to the Individual or the requesting provider. The Contractor shall send the written notice within one (1) Business Day of the decision.
3. For all authorization decisions, the notice shall be mailed as expeditiously as the individual's health condition requires and within three (3) Business days of the decision.
4. Provide notice at least ten (10) calendar days before the date of action or Adverse Authorization Determination when the action is a termination, suspension, or reduction of previously authorized services.
5. Notify the Individual, the requesting provider if applicable, and ordering provider in writing of any decision to deny a service authorization request, or to authorize a service in an amount, duration or scope that is less than requested. This includes Adverse Authorization Determinations that occur due to lack of Available Resources, Medicaid payer responsibility, and out of region service area (RSA) requests. The notice to the Individual and provider shall explain the following:
 - a. The decision North Sound BH-ASO has taken or intends to take and effective date if applicable.
 - b. The specific factual basis for the action, in easily understood language including citation to any North Sound BH-ASO guidelines, protocols, or other criteria that were used to make the decision and how to access the guidelines, protocols, or other criteria.

- c. Sufficient detail to enable the individual to learn why North Sound BH-ASO's determination was made, be able to prepare an appropriate response, and, if issuing an Action, determine what additional or different information might be provided to appeal the determination.
 - d. If applicable, the notice must include information about alternative alternative covered services/treatment that may be seen as a viable treatment option in lieu of denied services.
 - e. The Individual's and provider's right to request and receive free of charge a copy of the rule, guideline, protocol or other criterion that was the basis for the decision, as well as reasonable access to and copies of all documents, records, and other information relevant to the Adverse Authorization Determination.
 - f. A statement of whether the individual has any liability for payment.
 - g. A toll-free telephone number to call if the Individual is billed for services.
 - h. Information regarding whether and how the individual may Appeal the decision, including any deadlines applicable to the process.
 - i. The circumstances under which expedited resolution is available and how to request it.
 - j. The individual's right to receive North Sound BH-ASO's or regional Ombuds' assistance in filing a Grievance or an Appeal and how to request it.
 - k. The Individual's right to equal access to services for Individuals with communication barriers and disabilities.
 - l. When the reason for the Adverse Authorization Determination is that the Individual has Medicaid coverage for the requested service, the notice must redirect to the appropriate payer.
6. North Sound BH-ASO shall provide notification in accordance with the timeframes described in this section except in the following circumstances:
- a. The individual dies;
 - b. North Sound BH-ASO has a signed statement from the individual requesting service termination or giving information that makes the individual ineligible and requiring termination or reduction of services (where the individual understands that termination, reduction, or suspension of services is the result of supplying this information);
 - c. The individual is admitted to a facility where he or she is ineligible for services.
 - d. The individual's address is unknown and there is no forwarding address.
 - e. The individual has moved out of North Sound BH-ASO's service area.
 - f. The individual requests a change in the level of care.
7. Untimely Service Authorization Decisions: When North Sound BH-ASO does not reach service authorization decisions within the timeframes for either standard or expedited service authorizations it is considered a denial and thus, an Adverse Authorization Determination and must follow notification requirements.

ATTACHMENTS

None