

# INFORmed newsBRIEF

November 29, 2022

# Prior Authorization Changes to Support NCQA Accreditation

In 2023, *i*Care will pursue NCQA accreditation. To align with NCQA standards, the *i*Care Prior Authorization department will implement several changes to our Prior Authorization (PA) processes.

These changes, which are described below, will occur no earlier than February 1, 2023. Further updates with an exact launch date will be forthcoming.

### Concurrent Review

- Current process: iCare requires concurrent review only for subacute (Skilled Nursing Facility, Inpatient Rehabilitation Facility, Long Term Acute Care facility) admissions.
- New process effective February 1, 2023: In addition to the facility types listed above, iCare will also require concurrent review for all inpatient medical and behavioral admissions.

To begin the concurrent review process, provider systems should fax an <u>Inpatient Prior</u>
<u>Authorization Request form</u> (fillable PDF) to *i*Care within one business day of the admission.

*i*Care's Inpatient Prior Authorization team will review the request and reply by fax with an approved date range. Requests for additional days of care must be accompanied by clinical documentation substantiating the need for care at the inpatient level. Our Inpatient PA team will continue to communicate with staff at your facility regarding any clinical questions or requests for additional information.

### **Prior Authorization Notifications**

- Current process: iCare currently sends copies of determination letters to the member and the provider who is administering the requested service.
- New process effective February 1, 2023: iCare will send copies of all
  determination letters to the member, the practitioner who orders the service, as
  well as the provider who is administering the service.

Please ensure that all outpatient prior authorization requests you submit contain the name, address, and fax number of the requesting practitioner.

Facilities requesting an inpatient stay will receive a copy of the authorization determination at each point during concurrent review process, routed to your Pre-Auth/UR department. The attending/treating provider and the member will also receive a copy of these determination letters.

# **Availability of Criteria used for Authorization Determinations**

- Current process: iCare does not have a standard process to supply members or providers with a copy of clinical criteria used to review PA requests.
- New process effective February 1, 2023: iCare will provide a copy of all clinical criteria used in PA determinations to members and providers, upon request.

Please contact the PA Department at 414-299-5539 or 855-839-1032 to obtain a copy of the clinical criteria relevant to a particular service or procedure. The PA Department can provide these criteria by email, fax, or mail.

For general questions related to these requirements, please contact Customer Service at 800-777-4376 or reply to this email. Please allow up to two business days for a reply.

Help spread the word! Please forward this e-mail to others in your organization that need this information. Thank you!



## Corporate Headquarters

1555 North RiverCenter Drive, Suite 206 Milwaukee, Wisconsin 53212 www.iCareHealthPlan.org 1-800-777-4376 (TTY: 1-800-947-3529)

Office hours: Monday - Friday, 8:30 a.m. - 5:00 p.m.

iCare is a wholly-owned subsidiary of Humana.