



First Health Services Corporation®

A Coventry Health Care Company

1835 S. Bragaw St., Suite 200
Anchorage, AK 99508-3469
1-800-770-5650
1-907-644-6800
<http://alaska.fhsc.com>



December 29, 2006

NEW APPEAL REGULATIONS

First Level Appeals

New regulations (7 AAC 43.083) will change the length of time a provider has to submit a first level appeal. Effective December 30, 2006, most first level appeals must be filed within **180 days** of the adverse decision. Providers may appeal a denied or reduced claim, non-certification of hospital admission or length of stay, denied or reduced prior authorization request, non-certification of a service that requires certification by a quality improvement organization, and denied enrollment or disenrollment. First level appeals relating to a disputed recoupment of an overpayment must be filed within **60 days** of the overpayment notice.

Type of First Level Appeal	Where Do I Send My First Level Appeal?
<ul style="list-style-type: none"> ▪ Denied or reduced claim ▪ *Recoupment of overpayment request ▪ Denied or reduced prior authorization request for the following services <ul style="list-style-type: none"> ○ Durable medical equipment; prosthetic and orthotics; and selected pharmaceutical drugs ○ All non-emergent, medically necessary transportation and accommodation services ○ Selected professional services as indicated in the fee schedules ○ Services in excess of annual or periodic service limitations (vision, mental health, etc.) ○ All respiratory therapy, home health care services, private duty nursing, and hospice care ○ All outpatient Magnetic Resonance Imaging (MRI), Positron Emission Tomography (PET) scans, and Emission Computerized Tomography (SPECT) scans. ○ Chronic and Acute Medical Assistance (CAMA) program recipients requiring outpatient radiation and chemotherapy ○ Certain maternal/newborn admissions. Please refer to the chart found at http://hss.state.ak.us/dhcs/authorization.htm. <p>*Must be filed within 60 days of the overpayment notice</p>	<p>First Health Services Corporation (FHSC) Attn: Appeals P.O. Box 240808 Anchorage, AK 99524-0808</p>
<p>Non-certification of selected inpatient and/or outpatient procedures and diagnoses, regardless of length of stay. The <i>Select Diagnoses and Procedures PRE-CERTIFICATION List</i> may be obtained at http://www.qualishealth.org/cm/alaska-medicaid/index.cfm.</p> <ul style="list-style-type: none"> ▪ Non-certification of an inpatient hospital stay that exceeded three (3) days <p>Denied or reduced prior authorization request for certain maternal/newborn admissions. Please refer to the chart found at http://hss.state.ak.us/dhcs/authorization.htm.</p>	<p>Qualis Health Attn: Care Management Department/Appeal Review 10700 Meridian Avenue North, Suite 100 P.O. Box 33400 Seattle, WA 98133-0400 Phone: (800) 783-7876 Fax: (800) 826-3630</p>

Type of First Level Appeal	Where Do I Send My First Level Appeal?
<ul style="list-style-type: none"> ▪ Psychiatric admissions and continued stays ▪ Residential Psychiatric Treatment Center (RPTC) admissions and continued stays 	First Health Services Corporation/Health Care Management (FHSC/HCM) 4300 Cox Rd. Glen Allen, VA 23060 Phone: (877) 561-6720 Fax: (877) 561-6721
<ul style="list-style-type: none"> ▪ Denied or reduced prior authorization request for substance abuse rehabilitation services in excess of annual or periodic service limitations 	Department of Health and Social Services Division of Behavioral Health Attn: Claims Appeal Section 3601 C Street, Suite 878 Anchorage, AK 99503
<ul style="list-style-type: none"> ▪ Denied or reduced prior authorization request for the following services <ul style="list-style-type: none"> ○ Administrative wait and swing bed stays at acute care facilities ○ All Long Term Care (LTC) facility admissions and continued stays ○ Home and Community-Based Waiver services ▪ Personal Care Attendant (PCA) services 	Department of Health and Social Services Division of Senior and Disabilities Services Attn: Claims Appeal Section 3601 C Street, Suite 310 Anchorage, AK 99503
<ul style="list-style-type: none"> ▪ Denied enrollment or disenrollment 	Refer to the address located on the <i>Department Addresses for Second Level Provider Appeals list</i> for the type of service you provide. Please refer to the link indicated below to obtain the list.

Second Level Appeals

New regulations (7 AAC 43.085) change where second level appeals are sent. Effective December 30, 2006, second level appeals must be filed within **60 days** of the first level appeal decision and sent to the Department of Health and Social Services Office or Division indicated in the *Department Addresses for Second Level Provider Appeals list* for the type of service you provide. Please refer to the link indicated below to obtain the list.

A complete copy of the adopted regulations is available at <http://www.hss.state.ak.us/publicnotice/regulations.cfm#LtGovernor> with the *Department's Addresses for Second Level Provider Appeals List* as an attachment.