Attachment A

TIMFRAMES FOR MEDI-CAL DECISIONS AND NOTIFICATIONS

		Notification Timeframes Member Notices: postmark will be used to confirm required timeframes.	
Type of Request	Decision	Electronic/Written Notification of **Practitioner Approvals**	Electronic/Written Notification of **Adverse Determinations** to Practitioner and Member
Routine (Non-urgent) Pre-Service Prospective or outpatient service requests. All necessary information is received at time of initial request.	Approve, Modify, or Deny as expeditiously as the member's health condition requires not to exceed 7 calendar days from date of receipt of the request	**Practitioner: Electronic/Written** Within 24 hours of making the decision not to exceed 7 calendar days from date of receipt of the request.	**Practitioner: Electronic/Written** Within 24 hours of making the decision not to exceed 7 calendar days from date of receipt of the request. (includes weekends and holidays) **Member: Written** Within 2 business days of the decision not to exceed 7 calendar days from date of receipt of the request. (includes weekends and holidays)
Routine (Non-urgent) Pre-Service – Extension Needed • Member request • Provider request • If CalOptima Health or the Health Network justifies a need for additional clinical information and how the extension is in the member's interest.	**Additional Clinical Information Required:** The decision may be deferred, and the time limit extended up to 14 calendar days from original date of receipt of the request.	**Practitioner: Electronic/Written** Written notice of "Delay" must be sent within 24 hours of making the decision to delay, not to exceed 7 calendar days from receipt of request. **Member: Written** Written notice of "Delay" must be sent within 2 business days of making the decision to delay, not to exceed 7 calendar days from receipt of the request.	**Practitioner: Electronic/Written** Written notice of "Delay" must be sent within 24 hours of making the decision to delay, not to exceed 7 calendar days from date of receipt of initial request for services. **Member: Written** Written notice of "Delay" must be sent within 2 business days of making the decision to delay, not to exceed 7 calendar days from date of receipt of the initial request for services.
	Additional information received: If requested information is received, decision must be made within 2 calendar days of receipt of information, not to exceed 14 calendar days from the date of receipt of the request for service. **Additional information incomplete or not received** If the provider does not comply with the request for additional information the decision must be made no later than 14 calendar days from the date of receipt of the initial request with the information that is available.	**Practitioner:** Within 24 hours of making the decision, not to exceed 14 calendar days from date of receipt of the request.	**Practitioner:** Within 24 hours of making the decision, not to exceed 14 calendar days from date of receipt of the request. **Member:** Within 2 business days of making the decision, not to exceed 14 calendar days from date of receipt of the request

Attachment A

TIMFRAMES FOR MEDI-CAL DECISIONS AND NOTIFICATIONS

		Notification Timeframes Member Notices: postmark will be used to confirm required timeframes.	
Type of Request	Decision	Electronic/Written Notification of **Practitioner Approvals**	Electronic/Written Notification of **Adverse Determinations** to Practitioner and Member
Expedited Authorization (Pre-Service) Provider or CalOptima Health determines that the standard timeframe could seriously jeopardize the member's life or health or ability to attain, maintain or regain maximum function. All necessary information is received at time of initial request.	Approve, Deny, or Modify as expeditiously as the member's health condition requires not to exceed 72 hours from receipt of the request.	**Practitioner: Electronic/Written** Within 24 hours of making the decision, not to exceed 72 hours from receipt of request.	**Practitioner: Electronic/Written** Within 24 hours of making the decision, not to exceed 72 hours from receipt of request. **Member: Written** Within 2 business days of making the decision, not to exceed 72 hours of receipt of the request.
Concurrent (Inpatient) Facility or CalOptima Health determines that the standard timeframe could seriously jeopardize the member's life or health or ability to attain, maintain or regain maximum function. Concurrent review of treatment regimen already in place. All necessary information is received at time of initial request.	Approve, Deny, or Modify as expeditiously as the member's health condition requires not to exceed 72 hours from receipt of the request.	**Facility: Electronic/Written** Within 24 hours of making the decision not to exceed 72 hours from date of receipt of the clinical information	**Facility: Electronic/Written** Within 24 hours of making the decision not to exceed 72 hours from receipt of request. **Member: Written** Within 2 business days of making the decision, not to exceed 72 hours of receipt of request

Attachment A

TIMFRAMES FOR MEDI-CAL DECISIONS AND NOTIFICATIONS

		Notification Timeframes Member Notices: postmark will be used to confirm required timeframes.	
Type of Request	Decision	Electronic/Written Notification of **Practitioner Approvals**	Electronic/Written Notification of **Adverse Determinations** to Practitioner and Member
Concurrent (Inpatient) - **Extension Needed** Concurrent review of treatment regimen already in place • Additional clinical information required. • Require consultation by an Expert Reviewer. • If CalOptima Health or the Health Network justifies a need for additional clinical information and how the extension is in the member's best interest	**Additional Clinical Information Required:** The decision may be deferred, and the time limit extended an additional 14 calendar days from date of receipt of request when: • Member or facility requests the extension, or • CalOptima Health or the Health Network justifies a need for additional information and can demonstrate how the extension is in the member's best interest. • There is reasonable likelihood that receipt of such information would lead to approval of the request.	**Facility: Electronic/Written** Written notice of "Delay" must be sent to the facility within 24 hours of the making the decision to delay, not to exceed 72 hours from date of receipt of request **Member: Written** Written notice of "Delay" must be sent within 2 business days of making the decision to delay, not to exceed 72 hours from receipt of the initial request	**Facility: Electronic/Written** Written notice of "Delay" must be sent to the treating facility within 24 hours of the decision to delay, not to exceed 72 hours from date of receipt of request. **Member: Written** Written notice of "Delay" must be sent within 2 business days of making the decision to delay, not to exceed 72 hours from date of receipt of the initial request.
	Additional Information Received: If requested information is received, a decision must be made within 1 business day of receipt of additional information not to exceed 14 calendar days from date of receipt of request **Additional Information Incomplete or Not Received:** If the facility does not comply with the request for additional information, the decision must be made no later than 14 calendar days from date receipt of the initial request with the information that is available.	**Facility: Electronic/Written** Notification must be provided to the facility within 24 hours of making the decision not to exceed 14 calendar days from date of receipt of request.	**Facility: Electronic/Written** Notification must be provided to the facility within 24 hours of making the decision not to exceed 14 calendar days from date of receipt of request. **Member: Written** Within 2 business days of making the decision, not to exceed 14 calendar days of date of receipt of request.

Attachment A

TIMFRAMES FOR MEDI-CAL DECISIONS AND NOTIFICATIONS

		Notification Timeframes Member Notices: postmark will be used to confirm required timeframes.	
Type of Request	Decision	Electronic/Written Notification of **Practitioner Approvals**	Electronic/Written Notification of **Adverse Determinations** to Practitioner and Member
Post Service/Retrospective Review	Within 30 calendar days from receipt of request	**Practitioner:** Within 24 hours of making the decision not to exceed 30 calendar days from date of receipt of the request.	**Practitioner:** Within 24 hours of making the decision not to exceed 30 calendar days from receipt of request. **Member: Written** Within 30 calendar days of receipt of request.