

Network Health:

Reopening Process and Peer to Peer (P2P) Process

Reopening: A request sent to Network Health, that includes additional, relevant medical records that were not available at the time of the original determination, for review for potential authorization approval following a determination of denial of a pre-service or concurrent authorization request. Most often this process is exercised for services that are denied as experimental/investigational or not medically necessary. A Reopening may also be requested if a clerical error has been identified, which may affect a benefit determination. The time frame for submission of a request for Reopening is within one (1) year of the determination of denial, but prior to a denied claim on file.

Peer to Peer: A scheduled discussion prior to a determination to provide relevant clinical information or following a determination of denial for a pre-service or concurrent authorization request, that occurs between a Network Health Medical Director and the ordering/direct care Doctor, Nurse Practitioner or Physician's Assistant, to discuss and clarify the authorization for the potential of authorization approval. This is available for services that are denied as experimental/investigational or not medically necessary. A Peer to Peer must be requested within seven (7) days from the determination date of the authorization.

Important Notes:

- You have the right to perform both a Reopening request and Peer to Peer request for the same determination of denial. Often peer to peer requests are processed by Network Health as a reopening, the process is simultaneous.
- Neither a Reopening or a Peer to Peer are appropriate for authorizations denied for Exhaustion of Benefits or None Covered Benefits/Services. For these denial types, the next steps would be to pursue an appeal/grievance or provider dispute.
- If there is a denied claim on file associated with the denied authorization, the next step would be to file an appeal or provider dispute.
- Network Health Plan does not accept Peer to Peer requests from outside vendors (example: Optum) or with physician advisors who are not on staff or located at the facility.
- A readmission denial requires the review of the complete medical records for each hospital stay prior to a determination of approval regardless of a Peer 2 Peer or Reopening submission.

How To File A Peer to Peer or Reopening Request:

Peer to Peer: Please call Network Health Utilization Management department to schedule. NH UM can be reached Monday thru Friday 8:00 am to 5:00 pm by calling (920) 720-1602 or (866) 709-0019. Peer to Peer requests received on a weekend or holiday will be addressed on the next business day.

Please have:

- Member Identifying information (examples: Case #, Member Name, Date of Birth, Subscriber Number), **and**
- The name of the Provider or Advanced Practice Practitioner who is requesting the Peer to Peer, **and**
- A direct contact number for the requesting provider, **and**

- A selection of dates/times the requesting provider would be available for a Peer to Peer. (Please note that we are trying to coordinate a discussion between providers, and this can be difficult if only one date/time is provided).
- A Network Health Specialist will communicate the date/time of the Peer to Peer with you.
- If you are providing a pager number, please allow some time for the NH Medical Director to page you. The NH medical director will leave a 15 minute of availability once the page has been sent.

Reopening: Please call, fax, securely email or upload your request via iExchange. A clear statement of intent for Reopening is necessary to complete this request. (Example: I am requesting a Reopening for Member John Doe, Date of Birth 01/01/1900, for the Inpatient Hospital stay at [Insert Hospital] for dates of service [May 8, 2021 to May 10, 2021].)

You can request a Reopening by **calling** (920) 720-1602 or (866) 709-0019.

Fax at (920) 720-1916.

Securely **email** at pophealthutiliza@networkhealth.com.

A Reopening determination will be processed within 60 days however we often will process faster.

A Reopening request can be requested and processed on weekend or holiday in accordance to Network Health Plan Reopening determination time frames.

Additional, relevant clinical documentation is necessary for a Reopening request. Records are necessary for review, or additional information provided during a peer to peer. Failure to provide records, or failure to provide relevant records not previously reviewed, will result in a determination to uphold the previous adverse determination.

Determinations:

If an adverse determination is overturned (approved), you will be notified via call of the determination of approval as well as receive a faxed letter of approval.

If the adverse determination is maintained (denied), this will be communicated to the provider during the Peer to Peer and a notification call will be provided to your facility by a Registered Nurse.