

Provider Notice

April 22, 2022

Urgent UM Request Process Change

As CountyCare continues to strive for ways to streamline and improve operations, we have discovered that many prior authorizations submitted as urgent should have been categorized as routine. Because of this, the CountyCare UM team is implementing a change to better align with the NCQA definition of urgent request. This change is effective 4/11/2022.

As defined by 2021, NCQA:

- **Urgent request** –A request for medical care or services where application of the time frame for making routine or non-life-threatening care determinations:
 - Could seriously jeopardize the life or health of the member or the member's ability to regain maximum function, based on a prudent layperson's judgment, **or**
 - Could seriously jeopardize the life, health or safety of the member or others, due to the member's psychological state, **or**
 - In the opinion of a practitioner with knowledge of the member's medical or behavioral condition, would subject the member to adverse health consequences without the care or treatment that is the subject of the request.

If UM receives an urgent request that does not fall under the above definition, then the provider will receive verbal notification and the request will be changed into a standard request, which allows a 4-calendar day turnaround time.

Below are examples of a UM request that may be considered as routine:

- Any procedure or service with a start date greater than 4 calendar days from request received date
- A diagnostic testing that is scheduled greater than 4 calendar days from request received date
- Any service requested and deemed that routine processing by the UM clinician (defined by NCQA definition of urgent), would not jeopardize the member's safety or ability to maintain maximum function
- Pre-surgical workup or testing for a surgery or a procedure that isn't scheduled within the next 2 weeks
- Outpatient lab draws
- DME equipment requested retrospectively and not dependent of pending discharge within 4 calendar days from received date
- J -code infusions scheduled to begin more than 5 calendar days from request received date

Those requests for which a provider has failed to obtain timely prior authorization shall not be deemed to be urgent. In addition, requests submitted as urgent solely for the convenience of the provider or the member will not be processed as urgent.

Contact us

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact CountyCare Provider Services at <u>ProviderServices@countycare.com</u> or your Provider Relations Representative.