

Post-Acute Inpatient and Post-Discharge Services for Peoples Health Patients Authorization and Ordering Process

An order and supporting clinical information are required for patient services, as is authorization for any service requiring precertification. **The processes for providing this information are outlined below.**

Providing Post-Acute Inpatient Services

When preparing to provide services:

- Obtain a service order and supporting clinical information from the acute care facility.
- Ensure that you have any other details necessary to fulfill Medicare requirements for the provision of services.
- Confirm whether the acute care facility has submitted an authorization request for the service. If not, submit the request through the UnitedHealthcare Provider Portal at uhcprovider.com, under the **Prior Authorizations** tab.
 - Attach the order and supporting clinical information to the request.
 - For more about the information required on an authorization request, see Chapter 7 of the UnitedHealthcare Care Provider Administrative Guide for Commercial, Individual Exchange and Medicare Advantage.
 - For more about the Peoples Health review process, see the opposite side of this document.
- Alternately, fax the authorization request and supporting clinical information to the Peoples Health medical management department at 1-866-464-5709.
- Once authorization is provided via the UnitedHealthcare Provider Portal, services may be rendered. It may take up to 7 days for a decision to be made. Refer to the portal to check authorization status.

Ordering Post-Discharge Services

Sending orders to a provider in the Peoples Health network ensures the lowest patient cost.

When issuing an order for post-discharge services (DME, outpatient services, etc.):

- Send the order and supporting clinical information to the servicing provider or vendor of choice. **Do not send orders and supporting clinical information to Peoples Health.**
- If you give the order to the patient, you are still required to supply supporting information to the servicing provider or vendor once identified.
- The servicing provider or vendor is responsible for obtaining authorization for the service if authorization is required.

For more information, refer to the [UnitedHealthcare Care Provider Administrative Guide for Commercial, Individual Exchange and Medicare Advantage](#), available at uhcprovider.com/guides.

We appreciate your patience and cooperation during this transition. To submit an authorization request by phone, call the Peoples Health medical management department at 1-877-346-5707. If you have benefit questions or need other assistance, call Provider Services at 1-877-842-3210.

Peoples Health Post-Acute Authorization Review Process

Initial review

A Peoples Health inpatient authorization nurse reviews the request for medical necessity:

- If criteria are met and a facility has accepted, approval is communicated to the acute facility case manager
- If criteria are not met, the case is escalated to a Peoples Health medical director for additional review
- The case is either approved or forwarded to the medical review unit (MRU)

MRU

The nurse informs the acute facility case manager that the case is being sent to MRU and offers a pre-determination peer-to-peer discussion:

- The case may be approved after further review by a Peoples Health medical director, *or*
- Sent to an external review organization for like-specialty physician review
 - If requested, the pre-determination peer-to-peer discussion occurs with the external reviewer; this is the only opportunity for a peer-to-peer discussion prior to a decision being made

Final determination

The Peoples Health medical director makes the final determination, and the inpatient authorization nurse communicates the outcome to the acute facility case manager.

If the case is denied, the decision cannot be changed. A formal appeal must be filed for the decision to be reconsidered. Appeal rights can be found on the denial notice.