

Pre-Service Appeals and Concurrent Appeal Process

What is a pre-service or concurrent appeal?

Providers may file an appeal of an adverse determination prior to rendering the service (pre-service) or during an ongoing course of treatment (concurrent) if they are appealing on behalf of the member. For urgent pre-service appeals, the provider will be automatically deemed the authorized representative of the member. For all other appeals, authorization must be obtained from the member in writing.

Examples of Pre-Service Appeals include, but are not limited to:

- Pre-Admission Certifications
- Pre-Certification of Therapy Services for preferred care contracts
- Pre-Certification of Radiology Services
- Pre-procedure Review

Following are examples of what is not considered a Pre-Service Appeal:

- Pre-Determinations (Predetermination is a courtesy pre-review of physician services not requiring pre-certification under the member's contract, but that are possibly non-covered because they are considered investigational or cosmetic and for durable medical equipment (DME) over \$3,000).
- Referrals by a Primary Care Physician (PCP) for recommended specialist or treatment

What Is the Timeline for Conducting an Appeal?

The below timelines generally apply for most Members:

- **Urgent pre-service or concurrent appeals** will be completed within 72 hours.
- **Standard pre-service or concurrent appeals** will be completed within 30 days (some groups may have other specific requirements).

How Do I Request an Appeal?

Pre-Service or Concurrent Appeals

The phone numbers to call in order to request a **pre-service appeal or extension of care** are as follows:

- For inpatient hospital care, call 205 988-2245 (in Birmingham) or 1 800 248-2342 (toll-free).
- For Preferred Physical Therapy or Occupational Therapy or care from a Participating Chiropractor call 205 220-7202.
- For Preferred Radiology Services call 1 866 803-8002

Preferred Radiology Services:

CareCore National, LLC
Attention: Appeals
169 Myers Corners Road

Mail Stop 600
Wappingers Falls, NY 12590
Fax: 845 298-1490

What if I disagree with an initial appeal determination?

If the appeal continues to uphold the original adverse determination, the Member's appeal rights will be defined in their SPD.

Can I Appeal a Courtesy Predetermination?

Predeterminations are provided by Blue Cross and Blue Shield of Alabama as a courtesy to our physicians and members for certain physician services which may or may not meet our Medical Policy criteria. These predeterminations are not a requirement of the member's or physicians' contract, so they do not carry any formal pre-service appeal rights.

In those instances where a predetermination decision has been provided, the provider or member may submit additional documentation for reconsideration. This additional information should include a letter asking for reconsideration which includes any and all information needed to make a decision. Only one reconsideration will be allowed per case. The contacts for predeterminations are as follows:

Fax

Courtesy Predetermination Reconsiderations
205-220-9560

Mail

Courtesy Predetermination Reconsiderations
PO Box 362025
Birmingham, AL 35236