



1110 PRIOR AUTHORIZATION, NOTIFICATION AND CONCURRENT AND RETROSPECTIVE REVIEW

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INITIAL

EFFECTIVE DATE: 10/01/1994

A. PRIOR AUTHORIZATION (PA)

A provider is not required to obtain PA for emergency services. However, a provider may elect to obtain PA for outpatient End Stage Renal Disease (ESRD) dialysis as described in this Chapter, Policy 1120. Prior authorization for outpatient dialysis is met when the treating physician has completed and signed a monthly certification for the month in which outpatient dialysis services are received. The certification must include the treating physician's opinion stating that the failure of the Federal Emergency Services (FES) member to receive dialysis at least three times per week would reasonably be expected to result in:

1. Placing the member's health in serious jeopardy, or
2. Serious impairment of bodily function, or
3. Serious dysfunction of a bodily organ or part.

B. NOTIFICATION

A provider is not required to provide notification for emergency services for FES members.

C. CONCURRENT AND RETROSPECTIVE REVIEW

All emergency services under the Federal Emergency Service Program (FESP), in whatever setting, are subject to concurrent and/or retrospective review to determine if an emergency did exist at the time of service. If AHCCCS determines that the service did not meet the definition of an emergency medical or behavioral health condition, then the following actions may occur:

1. Denial or recoupment of payments
2. Feedback and education to the provider, and/or
3. Referral for investigation, if there appears to be a pattern of inappropriate billing.