



January, 2014

UNIFIED PROVIDERS NEWSBRIEF

Utilization Management Plan 2014 Communication Standards

- Communication Standards: UPN provides timely access to patients, providers and facilities during business hours (8:30 a.m.–5:00 p.m.) and non-business hours for inquiries, questions and utilization management issues. The UM staff provides quality service assistance to patients, hospitals, physicians and other health professionals; identifying themselves by name, title and organization name when initiating or returning calls. *After* business hours, UPN offers access to on-call Associate Medical Directors via a live answering service at **800-668-6439**.
- UM Coordinators Affirmation: All Professionals, and UR staff of UPN whose duties include coordination of decisions made by UPN physicians affirm that UM decision making is based on coordination of benefits, required medical care and services, in–plan referrals and health plan available benefits. UPN does not reward practitioners, health plan staff, or other individuals for issuing denials of coverage, care or service. UM coordinators do not encourage decisions that result in under-utilization and provide full disclosure of financial affiliations that may pose a conflict of interest in performance of certain duties or committee activities.
- Medical Criteria: **APOLLO Medical Review Criteria Guidelines 2014-** is the nationally recognized medical criteria that is utilized by our UM staff to support and coordinate the appropriate direction of care. Annually, UPN reviews this criteria as applicable to prospective, concurrent, and retrospective review and case management activities. For instances where a case may not be well represented by APOLLO, additional criteria is accessed. Case specific appropriate referral criteria is available by written request to our QA/UR Department via U.S. mail, email or fax.
- UPN offers a **Complex Case Management Program** that helps members with complex health care needs access care and services to regain optimal health or improved functional capability. Contact UPN if you feel your patient qualifies for referral to our Complex Case Management Program.
- Access to UM Staff: Unified Physicians Network practices an open access policy during the UM coordination process. Calls regarding UM decisions are returned within one business day of receipt. *During business hours*, UPN UM Coordinator Staff (including Physician Advisor, if applicable) are available at **847-763-1700** to discuss UM cases in review and cases resulting in denial decisions. *After normal business hours*, calls regarding UM decisions may be directed via the UPN live answering service prepared with instructions, available by calling **800-668-6439**. UPN offers TDD/TTY services to deaf, hard of hearing or speech impaired members and language assistance is available for members to discuss UM issues.
- Visit our website at upnus.com to easily navigate new features and useful tools and updates including staff contact information, newsletters and news-briefs (*like this one*), updated guidelines/project instructions with links to online services such as **QCPORTAL**.

To request a copy of the **UPN HMO UM Plan 2014** contact our Medical Management staff at **847-763-1700**

UPN is in compliance with all regional and state regulatory agencies, and adheres to HIPAA requirements. All material, clinical information and ambulatory care record excerpts collected for QA/UR purposes are and must remain strictly confidential.