



**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR MEDICAID SERVICES**

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Governor

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**Janie Miller**  
Secretary

**Elizabeth A. Johnson**  
Commissioner

March 18, 2010

To: Long Term Care Providers (12)  
Provider Letter A-243

Re: **Prior Authorization Process Changes – Initial and Continued Stay Reconsideration**

Dear Kentucky Medicaid Providers:

The Department for Medicaid Services (DMS) appreciates your service to the long term care residents in the Commonwealth of Kentucky. We are always striving to improve the services provided to Medicaid recipients. As a result, DMS is incorporating a reconsideration process within the initial and continued stay review prior authorization process. Reconsideration requests will be reviewed by a physician who did not make the initial denial decision. For individuals who have a certified level of care and who are receiving services, DMS will pay for continuation of those services through the date a final decision is made.

The addition of a reconsideration process will bring this process in line with other DMS programs. Members and providers in other Medicaid programs have found reconsideration to be a helpful intermediate step to follow up on a denial without needing to request a formal administrative hearing. Reconsideration is much simpler for the member and provider, and allows the provider to submit additional information supporting the request, so that SHPS fully understands the member's condition and needs.

The new process will be effective April 1, 2010.

**New Process**

1. The provider, recipient, his/her legal guardian, or his/her representative (authorized in writing) acting on behalf of the recipient may file a reconsideration request upon receipt of written notice of a denial of an initial review or a continued stay review.
2. A written request for reconsideration must be postmarked or submitted to SHPS via facsimile within ten (10) calendar days from the date of the written notice of denial. If the request is postmarked or dated and time-stamped by the SHPS' facsimile service more than ten (10) calendar days from the date of the denial, the request is invalid. As a result, an out of timeframe letter will be generated that indicates that the request for reconsideration was untimely and not valid.
3. SHPS will conduct the reconsideration and render a determination within three (3) calendar days of the request.
4. Within two (2) business days of the reconsideration determination, a letter communicating the decision will be mailed to the recipient (or his/her guardian), attending physician, and facility.

(please see reverse)

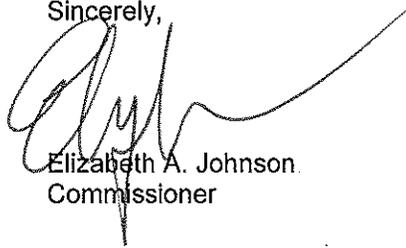


A denial may be overturned, upheld, or modified as a result of reconsideration.

- If the reconsideration determination upholds the original decision to deny level of care, the recipient, his/her legal guardian, or his/her representative (authorized in writing) may request an administrative hearing. Administrative hearings are handled by the Hearings and Appeals Branch of the Cabinet for Health and Family Services. For individuals who have a certified level of care and who are receiving services, DMS will pay for continuation of those services through the date a final decision is made, provided that the hearing request is submitted within the specified time frame.
- If the reconsideration determination overturns the original decision, a prior authorization will be issued.
- If the reconsideration determination modifies a portion of the original decision, the portion of the decision that remains denied may be further disputed by the recipient, his/her legal guardian, or his/her representative (authorized in writing) through an administrative hearing. For the portion of the decision that overturns the original decision, a prior authorization will be issued.

Again, thank you for your continued support of the Long Term Care program. If you have questions about this letter, please contact the Department for Medicaid Services, Long Term Care Branch at 502-564-5707.

Sincerely,

A handwritten signature in black ink, appearing to read 'Elizabeth A. Johnson', with a long, sweeping flourish extending to the right.

Elizabeth A. Johnson  
Commissioner