

Behavioral Health Utilization Management Peer-to-Peers



FEBRUARY 2021

ILLINOIS

Dear Provider,

In an effort to streamline our peer-to-peer process, improve the provider experience during the peer-to-peer process, and align our processes with industry best standards, we are implementing a new peer review/peer-to-peer process.

Behavioral Health Utilization Management (UM) peer-to-peer requests will be offered prior to a formal denial in an effort to expedite the process for our members and providers. If the provider chooses this option, the peer-to-peer will be scheduled within 24 hours. This scheduling will occur directly through their MeridianHealth (Meridian) facility assigned Utilization Manager. If the provider chooses to schedule the peer-to-peer following a formal denial, they can utilize the peer-to-peer information on the denial letter or contact the Utilization Manager directly. If the option of a peer-to-peer before a denial does not occur, the provider still has the option to schedule a reconsideration in the form of a peer-to-peer conversation within ten calendar days of an adverse determination. Meridian will respond to this request within one business day. If the provider is not reached at time of peer-to-peer call, additional attempts will be made to connect. If the provider is not reached after additional attempts, the case will be closed. Any clinical information sent in following a denial, will only be considered as part of the peer-to-peer conversation. The completion of a live peer-to-peer conversation and subsequent determination will be the final step in the peer review process; any additional consideration would be part of the formal appeal process.

This change is effective March 1, 2021. A webinar and Q&A will be offered in the month of February to answer additional questions.

Sincerely,

MeridianHealth