



Things to Think About!



By Brandan Atkin

If you need to file an appeal, please refer to the April 2009 newsletter for helpful advice and links.

<http://www.snrproject.com/downloads/newsletter/v5n4-How to File an Appeal.pdf>

If there is anything that is not discussed in our newsletters and you would like to see it discussed, or you would like to be added to our newsletter mailing list, please contact us at snrproject@hotmail.com

Submitting a Preauthorization Request for a Power Wheelchair Purchase

By Linda Jorgensen

My daughter received her first power wheelchair at the ripe old age of five. Compared to her tiny frame it was a monster. She loved that chair! She could go places and do things she wasn't able to do before. It was wonderful! However, the process we went through to purchase that first power chair was a huge challenge.

Once the decision was made by physicians and therapists our daughter needed a power wheelchair we found ourselves afloat in a sea of paperwork. After 6 months of frequent calls for clarification and more information both to and from insurance company representatives, doctor's offices, therapists, equipment company representatives and others we were able to obtain the needed power chair. Our daughter gained her mobility and we, as family and providers, learned a vital lesson in what was needed to obtain the proper approvals for a power wheelchair purchase.

Since that time we have successfully gained approval through private insurers and Medicaid programs to purchase 4 successive power wheelchairs (replacement chairs every 5 years). Using the information we learned that first time around we have been able to decrease the amount of time needed to process a request and all but eliminated the need to file an appeal.

Building Your Pre-Authorization Request Packet

A preauthorization packet contains more information than many think. It is important each packet is as complete as possible. Missing information will cause an authorization request to be denied and the packet must be reviewed, updated and submitted through an appeal process in order to be reviewed again. Be aware you will be dealing with companies, agencies and individuals who do not know your child, the providers you use and sometimes even the equipment vendor you are working with. The more complete your information package is, the better your chances of an approval the first time around.

Packets should include the following information:

- A completed wheelchair evaluation. This evaluation should be completed by an occupational and physical therapist.

Be sure to use the proper ICD-codes for diagnosis and equipment items. Be sure to emphasize the child's health and safety when appropriate. It is important to match each feature of the wheelchair with a physiological need of the child making sure to communicate any negative repercussion to the child if the item is not used. Emphasize "prevention of...." where appropriate. (See [SNRPs Medical Equipment section~ Wheelchair Evaluation Format](#) for an example form)

- A physician's prescription or script for the specific make and model of wheelchair. Preferably LEGIBLE. Many physicians tend to scribble. If YOU can't read what the doctor has written the reviewer most likely won't be able to either. Ask for a CLEARLY WRITTEN prescription.
- Treatment notes supporting the need for the new equipment. These can be obtained from the individual's primary care physician (PCM), other medical specialists (such as an orthopedic surgeon or a physiatrist, etc.), a vocational rehabilitation specialist, physical therapist, or occupational therapist.
- Supporting letters of fact and treatment notes from school staff and other professionals who work with your child on a daily basis. These letters can speak to the need for safe and functional equipment. Letters should be brief but contain complete information as noted above. Treatment notes may also be helpful when addressing functionality needs.

Once a complete evaluation with recommendations has been made and all the information has been gathered your packet can be submitted for preauthorization to your insurance provider, state Medicaid program or Medicare program as the case may be. The next step is to wait.

If At First You Don't Succeed, File an Appeal!

Some months ago I had a conversation with the Utah Department of Health's Health Program Manager for the Bureau of Coverage and Reimbursement. This office is in charge of reviewing ALL preauthorization requests and appeals for denied services and benefits for the Medicaid system here in Utah.

Like their private insurance company counterparts Bureau staffs review all information sent to them. Complete packets are given a thorough review and as long as the information submitted shows a preponderance of medical necessity for a policy covered item the request is approved. Basically, a denial occurs when a preauthorization request is incomplete. It is important to submit a complete package!

Bureau staff also reviews requests for appeals. A large number of appeal requests are generally granted provided all required information has been provided. Unfortunately, here in the state of Utah, most denials for benefits and services go un-appealed! People simply walk away rather than resubmit needed paperwork.

Basically, don't accept a first denial as the final word. It isn't! Work with the equipment company representative assisting you with your request and review the denial letter for needed information that may not have been sent. Be sure to note the length of time you have to respond to the denial. If you can't identify what's missing, contact your insurance provider or Medicaid representative for insight. If need be, start the packet building process again making sure you cover all the bases. Include all necessary information from all involved individuals as noted above.

Once your packet has been gone over with all information reviewed and updated submit your packet along with a cover letter requesting a review on appeal. State what information has been included and updated and include contact information should they need it.

Proper documentation and follow through are important when requesting high dollar medical equipment and services. The key to success is building a factual record that shows your child's doctor and other treatment professionals determined the equipment is needed, and why.

If at first you don't succeed, file an appeal. You may just win.