

## **Pennsylvania Peer-To-Peer Process Health Partners Plan/Jefferson Health Plan**

### **A. Peer-to-peer review available as per 40 P.S. § 991.2155[e]:**

1. In the case of a denied prior authorization request other than an administrative denial, Magellan shall make available to the requesting provider, a licensed health care professional for a peer-to-peer review discussion. The peer-to-peer reviewer provided by Magellan shall meet the standards for clinical reviewers (same or similar specialty and PA licensed) and have authority to modify or overturn the prior authorization decision.
2. Magellan offers the opportunity for a peer-to-peer discussion prior to issuing an adverse determination.
3. Magellan asks to conduct the peer-to-peer with the attending physician, rendering provider, or a Peer-to-Peer Proxy (See Section D: Peer-to-Peer Proxy). If none of these are available for a peer-to-peer discussion prior to potentially issuing an adverse determination, Magellan will proceed with that peer-to-peer review with whomever is designated and render the medical necessity determination.
4. If an adverse determination is issued after the discussion with either the attending physician, rendering provider, or a Peer-to-Peer Proxy, a peer-to-peer is still available; however, this is per accreditation requirements. This is a discussion of why Magellan concluded that medical necessity was not met.
5. If the peer-to-peer discussion with one of the identified persons noted above did not occur prior to issuing the adverse determination, Magellan will make itself available for a peer-to-peer discussion after the adverse determination was issued.
6. A provider may request a peer-to-peer review discussion:
  - a. During normal business hours; or
  - b. Outside normal business hours, subject to reasonable limitations on the availability of qualified Magellan staff. As Magellan cannot guarantee that an in-state licensed clinical reviewer, as noted above, will be available, we would need to connect with the requestor during normal business hours. The After-Hours staff will need to connect with the UM Support Team for them to reach out to the requestor to schedule the peer-to-peer discussion during normal business hours.
7. Magellan will request that the peer-to-peer review discussion be conducted with either the attending physician, rendering provider or the Peer-to-Peer Proxy.

### **B. Peer-to-peer timeline as per 40 P.S. § 991.2155[g]:**

1. A peer-to-peer review discussion is available prior to Magellan making a decision on the prior authorization request, the peer-to-peer review discussion shall be offered within the timelines noted for a standard or urgent prior authorization request.
2. If the peer-to-peer review discussion did not occur prior to issuing an adverse determination, the peer-to-peer review discussion shall be available to a requesting health care provider from the time of a prior authorization denial until the internal grievance process or internal adverse benefit determination process commences.

**C. Peer-to-Peer Request Process:**

1. If, during the peer-to-peer review discussion, Magellan’s clinical reviewer determines that medical necessity was met given the information presented, Magellan will overturn the initial adverse determination.
  - a. If overturned, Magellan will send written notification (standard Magellan Authorization letter) to the provider and member indicating the service authorized, number of units and date span.
  - b. Magellan will request that the provider verbally inform the member that the requested services were authorized.
2. If, during the peer-to-peer review discussion, Magellan’s clinical reviewer determines that medical necessity was not met given the information presented, Magellan will inform the provider of this decision.
  - a. Magellan will request that the provider verbally inform the member that the requested services were not authorized.
  - b. The state law does not require written notification and the health plan does not either.
  - c. Magellan will ask if the requestor wants to formally appeal the initial adverse determination.
    - i. If an appeal is requested, Magellan will reach out to the respective health plan to inform them of the appeal request.
    - ii. Magellan will forward all necessary documentation and correspondence.

**D. Peer-to-Peer Proxy as per 40 P.S. § 991.2155[f]:**

1. A health care provider may designate, and Magellan shall accept, another licensed member of the provider’s affiliated or employed clinical staff with knowledge of the covered person’s or enrollee’s condition and requested procedure as a qualified proxy for purposes of completing a peer-to-peer discussion.
2. Individuals eligible to receive a proxy designation shall be limited to licensed health care providers whose actual authority and scope of practice is inclusive of performing or prescribing the requested health care service.
3. Authority may be established through a supervising health care provider consistent with applicable State law for nonphysician practitioners.
4. Magellan must accept and review the information submitted by other members of a health care provider’s affiliated or employed staff in support of a prior authorization request.
5. Magellan will ask the Peer-to-Peer Proxy if they warrant and represent that they have met the criteria to be a Peer-to-Peer Proxy as required under PA law, Act 146 (40 P.S. § 991.2155). This will be documented in the member’s clinical record. Magellan staff do not need to define or describe the criteria for one to be a Peer-to-Peer Proxy, just document that the person agrees or disagrees that they have met the criteria.
6. Magellan may not limit interactions with Magellan’s clinical staff solely to the requesting health care provider.

**To request a peer-to-peer consultation, contact Magellan’s Utilization Management Support Team at: 1-800-741-2304, option 3, then option 2.**