

Governing Body: MARION COUNTY COMMUNITY AND PROVIDER SERVICES (CAPS)	Function: INTEGRATED DELIVERY SYSTEM (IDS) HANDBOOK	
Subject: Retro Authorization Process	Prepared By: CAPS	Original Date: 10/01/2007 Revised Date:

PURPOSE AND SIGNIFICANCE:

It is critical to the reimbursement process that authorizations are entered into the Mid-Valley Independent Physician’s Association (MVIPA) website upon opening a Member into an agency. An authorization must be established prior to submitting claims and receiving reimbursement for services.

Authorizations are required to have a begin date within 45 days of the date the authorization is submitted in the MVIPA website. Authorizations that have a begin date greater than 45 days from the date the authorization is submitted in the website are called Retro Authorizations and require approval from the Community and Provider Services (CAPS) designee prior to being submitted.

PROCESS AND/OR PROCEDURE:

IDS Providers are required to enter an authorization into the MVIPA website for Members served at their agencies. Authorizations should be submitted in the website as part of the opening/enrollment process within an agency or as soon as an agency becomes aware of a client’s Oregon Health Plan (OHP) coverage. Members must have current coverage in order for the authorization to be entered.

Authorizations must be submitted within 45 days of the date they are to begin. Authorizations entered into the MVIPA website with a beginning date greater than 45 days from the date they are submitted are Retro Authorizations and require approval from CAPS.

Legitimate situations occur which justify Retro Authorizations.

Agency Data Managers are required to contact the CAPS Management Analyst when a Retro Authorization needs to be entered in the MVIPA website for a Member and the beginning date for the authorization will be 45 days prior to the date it will be submitted in the Website.

Data Managers need to supply the following information to the CAPS Management Analyst when requesting approval for a Retro Authorization:

- the Member’s recipient ID number,
- the date being requested as the begin date for the authorization,

- an approximate dollar amount for any claims that are waiting to be submitted for reimbursement,
- a brief explanation describing why a retro authorization is needed for the Member.

The CAPS Management Analyst will review each case on an individual basis and notify the agency data manager of the outcome.

The CAPS Management Analyst is responsible for notifying MVIPA of approved Retro Authorizations and providing MVIPA with:

- the Member's recipient ID number,
- the date the being requested as the begin date for the authorization,
- the name of the agency entering the authorization.

The IDS Provider is responsible for entering the Retro Authorization into the MVIPA website.