We have added two new features to our on-line referral system which you will see when you sign on as usual on MARCH 14, 2016.

The on-line system will now have an option to request a retroactive referral for services. Retroactive referrals are approved on a very limited basis for special circumstances. Providers must follow all current prior authorization procedures to avoid denials of retroactive requests.

We have also added a new field to the on-line system to show the member’s current assigned hospital status. This informational field will help our providers better understand where members are assigned for their hospital based care and services.

These additions to our on-line system are designed to be as user friendly as possible, this bulletin describes the new options and process in detail for your reference.

**RETRO ACTIVE REFERRAL REQUESTS**

Initiate a retro referral request by clicking on the “RETRO” Radio Button. Note the system automatically sets the referral type to – “DIRECT”. All other options must be selected using the radio buttons.
When selecting the Retro Referral Request Type, you must also enter the Date of Service. Click on Calendar Icon to enter a Date of Service.

Select the actual Date of Service from the “Pop Up” Calendar.

The date selected will appear in the Date of Service field.

The remaining steps follow the current referral authorization request process. Continue with your referral request by completing the remaining fields and submitting the referral.

Upon submission your request is submitted to the Utilization Management Department for review and decision.
The system has also been updated to add a new field called “Assigned Hospital”. This field shows the member’s current assigned hospital affiliation where they must receive all hospital based services such as outpatient surgeries and inpatient admissions. This information is provided to help referring providers select an appropriate specialist that provides care at the member's assigned hospital facility.

If the member has an assigned hospital, the hospital name will appear in this field. A sample is below.

Capped Hospital

If the member does not have an assigned hospital, they access services at the health plan contracted facilities. This is indicated by “Shared Risk” in the hospital assignment field as shown below.

Shared Risk

Please retain this bulletin for future reference, it is also available on the Referral Authorization portal for your convenience.

If you have any questions about these changes, please call Provider Relations at 818-265-0800.

Medical Management Department Contact Numbers:
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