

## SECURE TRANSPORTATION – POLICIES AND PROCEDURES

### DOCUMENT INFORMATION

| DOCUMENT TITLE | <b>CLAIMS APPEALS PROCEDURE</b> |                     |                |
|----------------|---------------------------------|---------------------|----------------|
| DOCUMENT OWNER | Sopheary Dee                    | DEPARTMENT          | Claims Appeals |
| VERSION        | 1.0                             | POLICY OR PROCEDURE | Procedure      |
| REVIEWED DATE  | Pilar Dobbs/Sara Hurtado        | EFFECTIVE DATE      | June 17, 2019  |

### PURPOSE

The purpose of this procedure is to provide a streamline process for tracking, reviewing and processing providers appeals on previously denied claims to meet the state regulation for redetermination.

### SCOPE

- Written request for an appeal received within ninety (90) calendar days from the date of claim determination.
- Written request for an appeal received within ten (10) calendar days after calling Secure Claims Department.
- Written request for an appeal received at:

**Secure Transportation**  
**Attn: Claims Appeal Department**  
 3780 Kilroy Airport Way Suite 220  
 Long Beach, CA 90806

### RESPONSIBILITIES

The Claims Appeal Department will be responsible for logging the appeal within seven (7) calendar days from the date of receipt. A decision is sent within sixty (60) calendar days of receipt of the request for reconsideration.

### DEFINITION

Appeal



A request from a provider to reconsider a decision about a disallowed claim for compensation.

## PROCEDURE

| If   | Then   |
|--|--|
| Appeal submitted is outside of timely filing                                       | Claims Appeal team will return Claims Dispute Request Form noting denial due to untimely filing.   |
| If   | Then   |
| Appeal received within timely filing requesting a reconsideration for compensation | <b>STEPS:</b> <ol style="list-style-type: none"> <li>1. Claim Appeals team will enter appeal into the system within seven (7) calendar days from the date of receipt.</li> <li>2. An acknowledgement will be sent to the requestor referencing the Appeal ID.</li> <li>3. The Claims Appeals Department will perform outreach with both internal departments and partners to investigate the appeal as needed.</li> <li>4. At the completion of the investigation any claims deemed as underpaid will need to be adjusted in the system with the corrected paid amount.</li> <li>5. All information will be recorded in the Itineris System for tracking purposes such as adjustment date, adjuster and finalization date.</li> <li>6. Update Claims Dispute Request Form with the resolution.</li> <li>7. Create Finalized Rate Correction Form and send to Finance for payment adjustment.</li> <li>8. Finance to include adjustment in weekly check run.</li> </ol> |

| VERSION NUMBER | DATE OF CHANGE | PURPOSE OF CHANGE | AUTHOR       |
|----------------|----------------|-------------------|--------------|
| 1.0            | 5/24/2019      | Baseline          | Sopheary Dee |

## REFERENCES

|                                |   |
|--------------------------------|---|
| Claims Dispute Request Form    | <br>Claims_Dispute_Request_Form_V1_2019052   |
| Finalized Rate Correction Form | <br>Finalized_Adjustment_Form_V1_20190529.dc |