


UTILIZATION MANAGEMENT	 ASPIRE HEALTH PLAN	<u>Effective Date</u>	
		01/01/2008	
		<u>Policy #</u>	
		AHP-HS071	
	RESCINDING AUTHORIZATIONS	<u>Review Date</u>	<u>Applicable to:</u>
		6/16/2022	<input type="checkbox"/> Medicare Advantage <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Anthem HMO <input checked="" type="checkbox"/> Blue Shield Trio
	<u>Approver's Name & Title</u>		
	Eva Balint, MD – Chief Medical Officer		

1.0 PURPOSE

- 1.1 The purpose of this policy is to comply with Section 1371.8 of the California Health and Safety Code.

2.0 POLICY

- 2.1 Aspire Health Plan (AHP) shall not rescind or modify this authorization after the provider renders the health care service in good faith and pursuant to the authorization for any reason, including, but not limited to, the plan's subsequent rescission, cancellation, or modification of the enrollee's or subscriber's contract or the plan's subsequent determination that it did not make an accurate determination of the enrollee's or subscriber's eligibility.
- 2.2 Payment shall be made for such authorized covered services even if the member is later determined to not be eligible.
- 2.3 The following clients of AHP reserve the right to revoke this authorization prior to services being rendered based on cancellation of the member's eligibility
 - 2.3.1 Anthem Blue Cross of California
 - 2.3.2 Blue Shield of California

3.0 DEFINITIONS

- 3.1 Refer to the AHP Definitions Manual

4.0 PROCEDURE

- 4.1 Eligibility is checked prior to reviewing and making a determination for preauthorized services.
- 4.2 AHP UM Reviewers will not rescind or modify an authorization after the provider renders the health care service in good faith and pursuant to the authorization for any reason, including, but not limited to, the plan's subsequent rescission, cancellation, or modification of the enrollee's or subscriber's contract or subsequent determination if AHP did not make an accurate determination of the enrollee's or subscriber's eligibility.

5.0 TRAINING

5.1 Training for employees will occur within 90 days of hire, and upon updates to the policy.

6.0 REVIEW PERIOD

Regulatory and compliance policies are reviewed by the Policy Owner annually at a minimum (more frequently if a change, regulatory or otherwise, that causes a change to the policy)

7.0 REGULATORY REQUIREMENTS AND REFERENCES

7.1 CA Health & Safety Code § 1371.8

8.0 POLICY VIOLATION

Any AHP associate or contractor who fails to abide by this policy may be subject to disciplinary action, up to, and including termination. Please refer to AHP's Disciplinary Guidelines and Enforcement Policy for further details.