



Clinical Appeals Procedure

In accordance with Act 68, Quality Health Care Accountability, providers may submit an appeal in writing to request retrospective review for days of service not authorized. Appeals can occur at two levels.

FIRST LEVEL APPEAL

Step 1: All First Level Appeal requests must be submitted no more than 90 days after the last day of the episode of care in question.

The appeal packet must include:

- **A cover with the following information:**
 - Name/contact information of the person submitting the appeal
 - Member's name and an identifier such as SSN, DOB, or MA#
 - Exact level of care being requested
 - Exact dates of service in question
 - Brief explanation of the reason for the appeal.

The cover letter should be addressed to:

**Appeals Specialist
Community Behavioral Health
801 Market Street
7th Floor
Philadelphia, PA 19107**

AND

- **All documentation related to the dates in question**, including evaluations, assessments, progress notes, laboratory tests, discharge summary, etc.

Step 2: The Appeals Specialist will determine if the case warrants:

- **Administrative Review** (meaning the provider did not adhere to CBH protocols or the case involves a clerical or procedural error)

OR

- **Physician Review** (meaning the dates in question were denied by a CBH physician and the case needs to be reviewed by another CBH physician)

Step 3: CBH will notify providers of the result of their appeal verbally and in writing. CBH will comply with the timeframes set forth in 28 Pa. Code. 9.753(c). If the dates in question are denied after a Physician Review, the provider may submit a Second Level Appeal. Instructions for submitting the Second Level Appeal will be provided in the response letter. Please keep in mind that a provider cannot seek a Second Level Appeal if the First Level Appeal was denied due to an Administrative Review.

SECOND LEVEL APPEAL

If the provider disagrees with the First Level Physician Review Appeal decision, the provider may request a Second Level Appeal.

Step 1: All Second Level Appeals must be submitted no more than 30 days from the receipt of the First Level Appeal response letter. Providers do not need to resubmit clinical information.

All Second Level Appeals should be addressed to:

**Appeals Specialist
Community Behavioral Health
801 Market Street
7th Floor
Philadelphia, PA 19107**

Step 2: A CBH physician who did not previously participate in any decision to deny payment for the service will review the clinical information and notify providers of the result of their appeal in writing. CBH will comply with the timeframes set forth in 28 Pa. Code. 9.753. (c).

The decision of the Second Level Appeal is final.