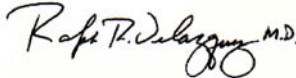




**Binder:** OSF HealthPlans HCM Department  
**Policy**  
**No./Title:** HCM.CML.008 Medical Director Referrals  
**Author:** Edward A. Hirsch, M.D. **Original**  
**Date:** 1/96  
**Revision/Review**  
**Date(s):** 1/99 3/01; 6/02; 10/02; 10/03; 10/04; 10/05; 10/06; 10/07  
**Approval:**  **Title:** Vice President and Chief Medical Officer

**POLICY:** All records sent to the Medical Director will have the Medical Director Review service form completed in full, plus all medical records will be attached.

**PURPOSE:** To ensure procedural continuity and maintain confidentiality of all records.

**PROCEDURE:**

- See HCM.SUR.034 Quick Authorization Policy for additional information

All cases that require Medical Director review must follow this procedure:

1. Enter case into MIS system and pend for Medical Director review. Physician Advisor note field required.
2. Complete Medical Director Review Service (SF) Form, including name, address, date of birth, and employer group as well as coordinators name and all other fields.
3. The electronic file will be sent to the Medical Director for review.
4. The Medical Director will determine upon review of file if all the necessary information is included.
5. Upon return of file electronically from the Medical Director to the appropriate coordinator, the date of return and decision will be noted on the service form. For non urgent care, decision and notification are made within 72 hours and not to exceed 15 calendar days of the request, taking into account the medical exigencies. For urgent care, decision and notification are made within 72 hours of receiving the request.
6. If additional information is requested, obtain the necessary material, indicate "additional information for review".
7. Enter decision into MIS system. Enter decision into note screen under "Claim Note."
8. If Medical Director consulted a clinical peer, indicate who was contacted in MIS system under "Physician Consultant."

9. On Medical Director Review form, note:
  - Auth Number
  - Number of letter requested
  - Additional comments/instructions as needed
10. Return file to secretary to prepare letter and file case as needed.
11. If additional information is received following a denial decision, and an appeal has not been requested, the information will be re-reviewed by the Medical Director.
  - a. If approved, the status of the preauth request will be updated to reconsideration, approved with additional information.
  - b. If denied decision still stands, documentation will be completed in the member file that additional information was received and reviewed, and the decision remain denied.