Department:	Medical Management	**Original Approval:**	12/12/2007
Policy & Procedure No:	MM124	**Last Approval:**	01/27/2026
Policy and Procedure Title:	Discussing a Denial (Adverse Benefit Determination) with a Reviewer Policy and Procedure		
Approved By:	Clinical Services Leadership Team		
Dependencies:	None		

Purpose

This policy outlines Community Health Plan of Washington's (CHPW) practices related to discussions of denial decisions for UM requests for all lines of business.

Policy & Procedure

CHPW shall afford providers and practitioners the opportunity to discuss any physical health or behavioral health Utilization Management (UM) denial in a scheduled Peer-to-Peer call. Providers are encouraged to speak directly with the original reviewer who rendered the determination in order to answer their questions. If the original reviewer is not available, the provider will be given the option to speak with another reviewer with similar credentials.

Expectations for Peer-to-Peer Calls:

1. The request to schedule a Peer-to-Peer must be made within 10 calendar days of the original denial determination.
2. These are expected to be brief calls, no more than 15 minutes each
3. The purpose is to discuss criteria and provider documentation to help determine if the criteria are met based on the medical records
4. The requesting provider should be prepared to discuss criteria and medical records
    a. All CHPW and MCG criteria are available on CHPW.org under Prior Authorization on the Provider Center tab
5. Verbal information must be corroborated and confirmed with actual medical progress notes and/or clinic documentation by the treating provider
6. Standard service requests in which an Adverse Benefit Determination has been rendered may result in an overturn of the original denial determination when the criteria are clearly shown to be met.

Data contained in this document is considered confidential and proprietary information and its duplication, use, or disclosure is prohibited without prior approval of Community Health Plan of Washington.

7. A decision may not be made during the call and might require review of additional documentation.
8. The discussions are expected to be cordial and collegial. Abuse of CHPW employees will not be tolerated.
9. To avoid delays, urgent/emergent service requests that have resulted in a denial determination should go through the expedited appeal process when reconsideration of the original denial determination is requested.

UM denial notifications shall inform the requesting provider of the opportunity to discuss the denial with the appropriate reviewer. The following types of providers may participate in a peer-to-peer process:

A. Attending/treating/ordering provider (physician, podiatrist, nurse practitioner, physician assistant, CNM, pharmacist, doctor of chiropractic, naturopathic physician, audiologist)
B. A covering provider or physician advisor substituting for the attending/treating/ordering provider
C. The facility medical director or chief medical officer
D. A behavioral health clinician providing care for the member or representing a facility that provided care

The following types of providers cannot participate in a peer-to-peer process:

A. A vendor or physician or provider who is not employed by or working at the treating facility Service providers who are not the ordering provider or substituting for the ordering provider.
B. A member, an account manager, an employer, or other individual who is not the provider or substituting for the provider.

External calls can be received by the peer-to-peer schedulers or through the CHPW Customer Service department, which will route calls to the peer-to-peer schedulers. The call will be scheduled with the original reviewer who rendered the determination decision if the reviewer is available. If the original reviewer is not available, the call will be scheduled with another available reviewer. Peer to Peer calls will be scheduled as quickly as possible to prevent delays in care.

List of Appendices

A. Detailed Revision History

Citations & References

CFR	

Data contained in this document is considered confidential and proprietary information and its duplication, use, or disclosure is prohibited without prior approval of Community Health Plan of Washington.

WAC		
RCW		
LOB & Contract Citation	☒ **WAHIMC** ☒ **BHSO** ☐ **Wraparound** ☐ **SMAC** ☐ **HH**	IMC Section 1.200: Medically Necessary; IMC Section 11.1: Utilization Management General Requirements; IMC Section 11.3: Medical Necessity Determination
		WrapAround Section 13.1: Scope of Services
	☒ **AHE**	AHE Section 1.151: Medically Necessary Services; AHE Section 11.1: Utilization Management General Requirements; AHE Section 11.3: Medical Necessity Determination
	☒ **MA/DSNP**	P&P supports all LOB requirements
	☒ **CS**	P&P supports all LOB requirements
Other Requirements		
NCQA Elements	UM 7	
References		

Revision History

SME Review:	12/12/2007; 05/05/2008; 08/14/2009; 09/29/2009; 10/14/2009; 11/10/2009; 07/26/2012; 07/12/2013; 08/06/2014; 10/20/2015; 10/23/2015; 07/05/2016; 09/13/2016; 12/19/2016; 11/28/2017; 12/05/2017; 01/02/2019; 11/05/2019; 11/21/2019; 01/22/2020; 02/12/2020; 09/16/2020; 08/06/2021; 05/27/2022; 12/06/2022; 09/19/2023; 04/19/2024; 03/04/2025; 01/27/2026
Approval:	10/27/2010; 10/26/2011; 08/08/2012; 07/24/2013; 08/13/2014; 11/05/2015; 09/27/2016; 12/05/2017; 02/09/2018; 01/10/2019; 11/25/2019; 09/21/2020; 09/07/2021; 05/31/2022; 12/07/2022; 10/19/2023; 04/26/2024; 03/05/2025; 01/27/2026

Data contained in this document is considered confidential and proprietary information and its duplication, use, or disclosure is prohibited without prior approval of Community Health Plan of Washington.

Appendix A: Detailed Revision History

Revision Date	Revision Description	Revision Made By
12/12/2007	Original	Georgette Cortel
05/05/2008	Formatting	Care Management
08/14/2009	Revised for NCQA Compliance	Marcia Bush; Mike Hays; Christa Lilienthal
09/29/2009	Added additional information for NCQA Compliance	Mike Hays Marcia Bush
10/14/2009	No change	Verni Jogaratnam
11/10/2009	Moved to new template; edited for style & clarity	Jennifer Carlisle
10/27/2010	Approval	MMLT
10/26/2011	Approval	MMLT
07/26/2012	Reviewed; no change	Lucy Sutphen, MD
08/08/2012	Approval	MMLT
07/12/2013	Added language to clarify the purpose of the peer-to-peer discussion is to answer any questions from the provider and not to overturn a denial decision. This aligns with State and Medicare guidance.	Jane Daughenbaugh
07/24/2013	Approval	MMLT
08/06/2014	Updated Contract Citation section and peer to peer phone number.	Andrew Boe
08/13/2014	Approval	MMLT
10/20/2015	Removed “fax cover sheet”- Denial letter contains information about provider may contact decision rendering provider for peer-to-peer discussion.	Kelly Force
10/23/2015	Reviewed policy and made minor edits	Jane Daughenbaugh
11/05/2015	Approval	MMLT
07/05/2016	Added language to allow overturn of a denial determination for Medicaid enrollees only and only for standard service requests via a peer-to-peer discussion requested within 10 days of the denial decision.	Jane Daughenbaugh, Director, Delegated Healthcare Services

Data contained in this document is considered confidential and proprietary information and its duplication, use, or disclosure is prohibited without prior approval of Community Health Plan of Washington.

09/13/2016	Minor formatting changes	Cyndi Stilson, RN
09/27/2016	Approved	MMLT
12/19/2016	Changed peer-to-peer language to allow peer-to-peer review for all inpatient care denials for AH members	Cyndi Stilson, RN
11/28/2017	Updated verbiage to adverse benefit determination. Updated approver of Policy	Justin Fowler
12/05/2017	Approval	Patty Jones
12/05/2017	Updated header to move this policy to Medical Management and designated MMLT as approving body	Yusuf Rashid
02/09/2018	Approval	MMLT
01/02/2019	Removed exclusion for requesting providers for Medicare members to participate in peer-to-peer calls. Corrected Phone number for scheduling peer to peer calls. Added types of providers who may or may not participate in peer-to-peer calls.	LuAnn Chen, MD
01/10/2019	Approval	MMLT
11/05/2019	Clarified that a pharmacist can request a peer-to-peer call. Clarified that any physical health and/or behavioral health Utilization Management (UM) or Appeals denial decision is eligible for a scheduled peer to peer discussion if requested within 10 calendar days of the decision. Urgent requests that have been denied initially should go through the urgent/expedited appeals process to avoid delays.	LuAnn Chen, MD
11/21/2019	Corrected the department that owns the policy and the approval body to Clinical Services and Clinical Services Leadership Team.	LuAnn Chen, MD
11/25/2019	Approval	CSLT
01/22/2020	Appeals decisions are not eligible for peer-to-peer discussions, based on	LuAnn Chen, MD

Data contained in this document is considered confidential and proprietary information and its duplication, use, or disclosure is prohibited without prior approval of Community Health Plan of Washington.

	review of NCQA regulations and CHPW contracts.	
02/12/2020	WAH-IMC and MA Contract Citations updated (no citations). NCQA citation updated.	LuAnn Chen, MD
09/16/2020	Added BHSO and Cascade Select. Corrected contract and NCQA citations.	LuAnn Chen, MD
09/21/2020	Approval	CMO Cabinet
08/06/2021	Minor edits	LuAnn Chen, MD
09/07/2021	Approval	CMO Cabinet
05/27/2022	Clarified provider types eligible for peer-to-peer calls.	LuAnn Chen, MD
05/31/2022	Approval	CMO Cabinet
12/06/2022	Edited to include physician advisors as eligible for peer to peers.	LuAnn Chen, MD
12/07/2022	Approval	CMO Cabinet
09/19/2023	Added role of criteria and importance of professional behavior.	LuAnn Chen, MD
10/19/2023	Approval	Clinical Services Leadership Team
04/19/2024	Clarified expectations for Peer-to-Peer calls. Removed CHNW.	LuAnn Chen, MD
04/26/2024	Approval	Clinical Services Leadership Team
03/04/2025	Edits to types of providers who may participate in a peer-to-peer process	LuAnn Chen, MD
03/04/2025	Reviewed, no edits	Aparna Gadekar, MD; Terry Lee, MD
03/05/2025	Approval	Clinical Services Leadership Team
01/27/2026	Minor edits to call scheduling process	LuAnn Chen, MD
01/27/2026	Approval	Clinical Services Leadership Team

Data contained in this document is considered confidential and proprietary information and its duplication, use, or disclosure is prohibited without prior approval of Community Health Plan of Washington.