

NETWORK Notification

Notice Date:	September 17, 2024
To:	Michigan MI Health Link Providers
From:	HAP CareSource™ MI Health Link (Medicare-Medicaid Plan)
Subject:	Prior Authorization Updates
Effective Date:	January 1, 2025

Summary

Effective January 1, 2025, HAP CareSource™ MI Health Link will have several updates and reminders for this plan year.

- This is a reminder that if a provider is not part of the HAP CareSource MI Health Link network, prior authorization must be obtained before any service is rendered to the member.
- Changes to retrospective authorization submission time period:
 - HAP CareSource MI Health Link will conduct a retrospective review of medical services received by members when a request is received within 90 days of the date of service or discharge. HAP CareSource MI Health Link considers retrospective authorization review appropriate when **ANY** of the following circumstances have occurred:
 - A HAP CareSource MI Health Link member is unable to advise the provider of plan enrollment due to a condition that renders the member unresponsive or incapacitated.
 - The member is retrospectively enrolled which covers the date of service.
 - Urgent service(s) requiring authorization was/were performed, and it would have been to the member's detriment to take the time to request authorization.
 - The new service was not known to be needed at the time that the original prior authorized service was performed.
 - The need for the new service was revealed at the time the original authorized service was performed.
 - The service was directly related to another service for which prior approval has already been obtained and that has already been performed.

Impact

Retrospective requests must be received within 90 days from the date of service or discharge and meet one of the criteria items listed above. Non-participating providers must submit a prior authorization request for any service.

Questions?

Please contact Provider Services at 1-833-230-2159 with any questions.

H9712_MI-MMP-P-3232489