Skilled nursing facility QIO appeal documentation reminder – OH only

Anthem Blue Cross and Blue Shield (Anthem) would like to remind skilled nursing facilities (SNF) of the importance of timely responses and complete documentation when a member appeals an SNF service termination.

When a member appeals a decision to terminate SNF services, some SNFs do not consistently provide sufficient information (medical records and a valid, signed Notice of Medicare Non-Coverage [NOMNC]) to the U.S. Department of Health and Human Services’ Quality Improvement Organization (QIO). Anthem issues an NOMNC, and the contracted SNF is responsible for obtaining the signature of the member or the member’s representative no later than two days before the member’s covered services end. If an appeal is made to the QIO, the SNF is also responsible for delivering a copy of the signed NOMNC and medical records to the QIO by the close of business on the day the facility receives the QIO’s documentation request (including weekends). Please refer to your provider agreement for provisions requiring compliance with Anthem’s Utilization Management program. Your cooperation is appreciated.