

No. UM-001	Access to Information About UM Processes and Authorizations	
Effective Date: 01/1/2022 Committee Approval: 1/11/23 Previous Versions: see revision history on last page	POLICY AND PROCEDURE	сапору неагтн
DMHC TAG: Utilization Management NCQA Standard: UM 3		C

ACCESS TO INFORMATION ABOUT UM PROCESSES AND AUTHORIZATIONS POLICY

Canopy Health, through its delegated medical groups/IPAs, hospitals and health plans and/or internal processes, provides access for members and practitioners seeking information about the following Utilization Management (UM) process and the authorization of care.

Canopy Health requires that delegated medical groups/IPAs shall receive inbound communication from Canopy Health enrollees and providers via toll-free customer service telephone line, fax, provider portal or electronic messaging 24 hours a day, 7 days a week. These customer service staff are responsible for triaging calls regarding UM issues. No individual, other than a licensed physician or licensed health care professional who is competent to evaluate the specific clinical issues involved in the health care services requested by the provider, may deny or modify requests for authorization of health care services for an enrollee for reasons of medical necessity.

Canopy Health requires that delegated medical groups/IPAs respond to all issues related to the utilization management (UM) process for enrollees or persons designated by the enrollee, or to any other person or organization.

Issues regarding the UM process may include any process used to authorize, modify, or deny healthcare services under the benefits provided by Canopy Health and the network of delegated and contracted providers.

These UM customer service staff identify themselves by name, title and organization name when initiating or returning calls regarding UM issues.

These UM customer service staff offer TDD/TTY services for deaf, hard of hearing or speech-impaired enrollees. Language assistance is available for enrollees to discuss UM issues. Refer to Canopy Health's Policy "UM LA-001 Language Assistance and Culturally Sensitive Accessible Services" for more details.

Hospitalists providing care at all Canopy Health contracted hospitals have staff that are available to receive inbound communication after normal business hours for calls regarding



UM issues.

The healthcare services here refer to utilization review and utilization management functions in the following care settings: outpatient, sub-acute facilities, transitional inpatient care, and skilled nursing facilities.

UM criteria used by all delegated medical groups/IPAs are available to the public upon request, which may include the availability through electronic communication means. Disclosure of UM criteria to the public is accompanied by the following notice:

"The materials provided to you are guidelines used to authorize, modify or deny care for persons with similar illnesses or conditions. Specific care and treatment may vary depending on individual need and the benefits covered under your contract."



Revision History:

Version Date	Edited By	Reason for Change
1/29/16	M. Stevens	Creation date
7/26/16	M. Durbin	Consolidated sections of Exhibit J-9 pertaining to disclosure of the UM process to members into a single, standalone policy; adds supplemental details regarding
2/15/18	A. Kmetz	Removed the "Network" and replaced with Canopy Health per WHA's pre-delegation audit comments. Distinguished the difference been Canopy Health and the delegates/contractors and contracted entii
5/10/19	R. Scott	Added DMHC required language.
1/1/21	R. Scott	Removed references to Canopy Health Customer Service (call center) which was closed as of 4/1/21. Removed references to contracted PBM as risk for self-injectables is now the responsibility of the upstream health plans and PBM contract was terminated as of 1/1/22.
01/1/23	L. Sasaki	Updated to include reference to Canopy Health's Language Assistance and Culturally Sensitive Accessible Services policy.