Authorization Experience Survey Summary & Recommendations

Community Behavioral Health Association of Maryland

August 27, 2021

Authorizations | Problem & Proposed Solution

- Optum has received 65,000 authorization requests since January.
- Optum reports that many auth requests are re-submitted multiple times.
- Optum doesn't have sufficient staff to process volume of authorizations received.
- For third time in its 18-month history, Optum is unable to process auths within contract-required timeframes.
- **Proposed change**: MDH has proposed limiting providers to 1 authorization resubmission.

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Authorizations | 32 Survey Respondents

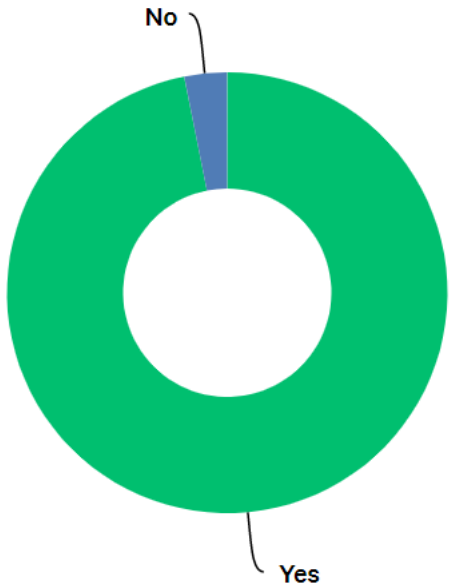
Average Responding Organization

38 years in business
$22 million annual revenue

Authorizations | Reducing Repeat Requests

In the last three months, my organization has submitted authorization requests more than once.

Answered: 32 Skipped: 0



97% of providers report submitting multiple authorization requests.

Authorizations | Top Reasons for Resubmits

Optum's technological and human failures are 3 top drivers of resubmissions

Understaffing

- 68% of respondents have requests denied because Optum overlooked information that was included in the authorization request.

"Optum staff have told me, 'We don't have enough staff to call everyone.'"

"When we call about an authorization, Optum claims a supervisor will call us back, but we don't get return calls even after giving them reference numbers (Optum staff say they don't have information to reference that number). We can't reach a supervisor to discuss further."

Broken Technology

- 39% of respondents had requests denied because Optum's system won't allow providers to modify units or dates requested.
- 42% of respondents had requests denied because Optum denies an auth request 14 days after submission, then corrects it after talking to a provider more than 6 days later, and the original auth now denies for violating the 20-day backdating rule.

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Authorizations | Training & QI Process

It's not clear if Optum has a QI process to track staff training needs for authorizations.

"**We resubmitted an authorization with a correction, and it was denied because Optum overlooked the correction**. We were told multiple times that the attachment with the correction would be reviewed but [our] attempts to follow up have received **no response from Optum**."

"Optum denies authorizations because they aren't signed by the appropriate person, which seems to change with each auth."

"Optum staff don't know which professionals can make a referral to PRP."

"Have a current issue where the denial was made on an RRP client who transitioned to community and in need of PRP services. Therapist referral clearly indicates need - but what happened to the anyone leaving RRP can get at least 6 months of PRP to assist with that transition?"

"[There are] inconsistencies with different care managers denying for different reasons when others are approved."

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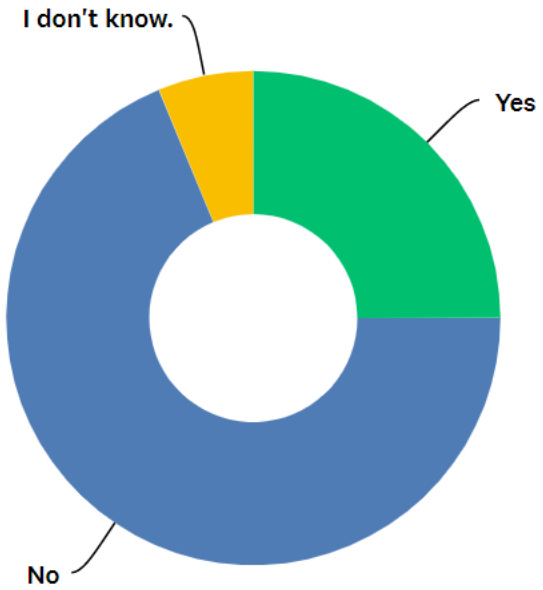
Authorizations | Getting It Right?

Improving the accuracy of authorization decisions will reduce volume

Optum makes consistent and correct authorization decisions almost all of the time.

Answered: 32 Skipped: 0



69% of providers do not feel that Optum makes consistent & correct authorization decisions almost all the time.

Authorizations | Reducing Resubmit Volume

Step 4: Focus attention where it's needed.

Once stabilizing fixes in place, ID agencies with poor patterns & subject their requests to higher level of review.

Step 3: Improve Optum staff training & quality improvement processes.

- Improve Optum staff training to address accuracy of decision-making
- Create a method to report erroneous denial in order to improve ability to ID causes of high error rate

Step 2: Ensure Optum is adequately staffed.

Improve Optum staffing levels for timely decisions, response, and clinician connection.

Step 1: Ensure technology works as needed.

- Modify Incedo to allow providers to request the units & dates required in their individual case.
- Modify Incedo to allow modification of backdating limitations.

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