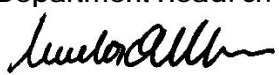
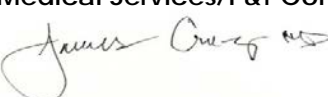


<b>Policy Title: Returned Member Notification Letter</b>		<b>POLICY #: 10.2.23</b>	
		<b>Line of business: Medi-Cal</b>	
<b>Department Name:</b> Utilization Management	<b>Original Date</b> 1/02	<b>Effective Date</b> 5/19	<b>Revision Date</b> 12/18
<b>Department Head: Sr. Director, UM</b> 			<b>Date: 3/21</b>
<b>Medical Services/P&amp;T Committee: (If Applicable) PHP CMO</b> 			<b>Date: 3/21</b>

**PURPOSE**

To identify the Blue Shield of California Promise Health Plan's (Blue Shield Promise) process for handling the receipt of returned Notice of Action (NOA) for Medi-Cal and/or Notice of Denial of Medical Coverage and Payment (NDMCP) for all CMS product letters sent to members.

**POLICY**

Upon receipt of a NOA or NDMCP letter which has been returned to Blue Shield Promise from the US Postal Office, the designated Blue Shield Promise staff shall make every effort to determine the member's correct residence address and update the information contained in the MHC database for accuracy. If corrected information is obtained, members will be notified verbally and a letter will be resent to the corrected contact information obtained. (a weekly basis)

**PROCEDURE**

The UM Department shall designate a staff person who will be responsible and accountable to collect returned mail from the mailroom on a daily basis.

The designee shall open all returned mail and sort into the following categories:

- UM Authorization/Referral
- UM NOA/NDMCP
- Complex Care Management (CCM)
- California Children Services (CCS)

The designee shall distribute as follows:

- UM NOA/NCMCP – UM Coordinator
- CCM Manager of Case Management (Los Angeles or San Diego)
- CCS Designated Liaison (Los Angeles or San Diego)
- Mail for department(s) other than Medical Management shall be forwarded to the appropriate Department(s).

The UM Coordinator/Manager/Designated Liaison, upon receiving the returned NOA/NDMCP letters, shall follow the following procedure:

- Ensure the returned member notification letter is date stamped.
- Note in the comments section of the referral in the Medical Management system that the member notification letter was returned to Blue Shield Promise with the return date.
- Confirm the member's eligibility status in the MHC database.

- Confirm all demographic member information in MHC.
- Contact the PCP or referral requestor for correct member demographic data if the information in the Blue Shield Promise system is inaccurate.
- Contact member – make at least 3 attempts at different times/days – document all attempts in the Blue Shield Promise Medical Management system – if unsuccessful and unable to contact member directly.
- Contact the requestor’s office and ask them to notify member of status of request and the fact that Blue Shield Promise has been unable to make contact with the member.
- Resend member notification letter with corrected demographic information.
- Keep a list of members not found, log and forward to member service on a weekly basis.

## REFERENCES