# Frequently Asked Questions (9/4/14)



## WHAT IS THE PURPOSE OF THE RAPID ELIGIBILITY (RED) UNIT?

The RED UNIT's preliminary review enables us to more efficiently route eligible cases to our nurse case managers. The RED Unit provides a consistent and expedited procedure for rapidly triaging <u>referrals for New and Closed</u> <u>cases</u> and for notifying the referral source if the referral: (1) was incorrectly made for a condition that is not eligible for CCS; (2) is ineligible for case management; or (3) requires additional information.

### HOW DOES THE RED UNIT OPERATE?

All incoming referrals for New or Closed cases are reviewed by the RED UNIT. Documents appropriate for CCS case management are then forwarded and processed by a nurse case manager. Referrals determined to lack key information and/or are deemed inappropriate for CCS, will be mailed a rejection notice back to the referral source. Providers that are registered in the CMS Net Provider Electronic Data Interchange (CMS Net PEDI) have the ability to view their rejection notices electronically.



### WHY WAS THIS REFERRAL RETURNED?

Referrals are returned for a variety of reasons and in each case the reason will be indicated on the rejection notice. Possible reasons for a rejection include, but are not limited to: (1) referrals that do not contain any medical information; (2) documentation that clearly shows a condition not eligible for CCS (such as uncomplicated pneumonia, bronchiolitis, acute gastroenteritis, conjunctivitis, strep throat, and other common childhood infections); (3) duplication of a previously denied referral with no new relevant information; and/or (4) residence outside of Los Angeles County. Occasionally, referrals found to have full coverage by a commercial payer source, will be rejected and deferred to that payer.



#### I HAVE ADDITIONAL PAPERWORK, WHAT DO I DO NOW?

If there is new documentation that clearly establishes the presence or likelihood of a CCS-eligible condition, the new information may be submitted with a copy of the CCS rejection notice and SAR. The fax number used for this purpose is (855) 481-6821.

Please note that all other faxes should be directed to the general LA County CCS FAX number, to avoid delays in the processing of those requests: (855) 481-6821.



#### WILL YOU HONOR THE ORIGINAL STAMP DATE?

If the appropriate information is submitted that supports a CCS-eligible condition or a reasonable suspicion of one, the original stamp date will be considered as timely notification. If there is an inappropriate referral with no basis to assume that there is a CCS-eligible condition or if there is no established objective basis for the referral, then the rejected referral cannot be used to establish a "clock-in" date.



#### DO I HAVE TO RESUBMIT THE ORIGINAL REFERRAL?

The RED UNIT will hold onto the original referral documents for a limited period of time; to allow for submission of new information. However, when submitting new information for a previously rejected referral, you must include both the CCS Rejection Notice and a copy of the SAR. Please do not submit duplicate material or more information on a referral that was deemed inappropriate for CCS.



#### WHY HAVE YOU CHANGED THE WAY REFERRALS ARE PROCESSED?

Primarily, the RED UNIT is expected to guarantee rapid determination of eligibility and improve feedback to the referring providers on what is required to process a referral. We also believe that providers will learn from this experience and assist in reducing the number of referrals submitted for inappropriate conditions that are never CCS eligible or those with insufficient information. Providers can help expedite the process by submitting the appropriate form, either: a NEW REFERRAL CCS/GHPP SAR; for new referrals, or an ESTABLISHED CCS/GHPP SAR; with the CCS number for client's that currently or previously had an established case.



# NEW AND CLOSED CASE REFERRAL STATUS

Referral status for new and closed cases can be accessed through the CMS Net PEDI.