

FAQ

Peer-to-Peer Review

Question: How does a treating provider request a peer-to-peer discussion about a denied authorization?

Answer: The provider can request a peer-to-peer discussion within 48 hours of receiving the denial notification, by either:

1. Calling CalOptima's Utilization Management (UM) staff at 714-246-8686, or
2. Calling the CalOptima medical director at the number listed on the cover page of the denial letter. If the medical director who made the initial determination is unavailable, another CalOptima medical director will complete the peer-to-peer discussion.

Please be prepared to provide the following information:

- Name of the physician requesting peer review discussion
- Best available phone number and time to return call
- Member name and ID number (CIN)
- Tracking/referral number

After review of the information, the CalOptima medical director will make up to two contact attempts within 48 hours, to complete the peer-to-peer discussion.

The CalOptima medical director will communicate the outcome of the discussion to UM staff in writing to ensure any necessary notifications are sent to the requesting provider.

Question: What if the provider and CalOptima medical director are unable to complete the peer-to-peer discussion (unable to make contact)?

Answer: The denial notification will remain, and the provider may follow the appeals process as outlined in the notification letter.

Question: What if CalOptima's medical director doesn't change the original decision?

Answer: The provider may choose to file an appeal, following the process included in the original Notice of Action (denial letter).



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