

# IPRO's Retrospective Review Process

OASAS HOSPITAL BASED  
DETOXIFICATION REFORM

NOVEMBER 2008

# Retrospective Review Process

## Initial Reviews:

- Hospital given **2 Weeks** Notification for Onsite Review - Charts reviewed on date indicated on letter
- Hospital given **30 Days** to send in Offsite Chart Requests - Offsite charts put in queue for review

# Retrospective Review Process

## Nurse Reviewer identifies potential issue and refers the case for further review:

- Hospital has **30 Days** to send in the requested charts from the date of the notice
- Technical Denial will be sent if charts not received

## Received Chart is set up for Physician Review

- When case is approved by Physician it is closed
- When case has Potential Denial - Preliminary Notice of Potential Denial is sent

# Retrospective Review Process

## Hospital has **45 Days** to respond to the Potential Denial Notice

- Possible issues are: Utilization and Quality. (NYPORTS will be discussed separately.)
- If response is not received within 45 days a Final Notice is sent
- If response is received it is set up for physician review
- Final Notice is sent to Facility. Notice for both approvals and denials

# Retrospective Review Process

## Hospital has *30 Days* to send in an appeal to a Final Notice

- Response is set up for Physician Review and Appeal Determination will be sent
- This is the last level of appeal

# NYPORTS

- The New York State Department of Health notified facilities of changes in the NYPORTS review process in October 2006.
- This process now allows one level of appeal for Mandated NYPORTS codes.
- The DOH confirms the final decision on Mandated NYPORTS codes as the failure to have reported these events will result in a Statement of Deficiency.

# NYPORTS Trackable Codes

- When IPRO identifies a trackable code (401, 402, 604, 701 & 751) the hospital will receive a letter indicating a potential NYPORTS event has been identified. If the hospital agrees they should report the event. If the hospital disagrees **NO ACTION** is required and IPRO does not need to be contacted as to the decision.

# NYPORTS Mandated Codes

- IPRO has developed a rigorous review process for mandated codes (914, 921-923, 931-935, 937, 961-963) as well as category two codes (108-110, 911-913, 915-918 & 938).
- The hospital will have one opportunity to respond to the potential NYPORTS event.

# NYPORTS Mandated Codes

- When an IPRO reviewer identifies a mandated code the case is referred for senior review who can either approve or refer the case to physician consultant.
- The physician consultant will review and either approve or a Potential NYPORTS letter will be faxed to the hospital

# NYPORTS Mandated Codes

- The hospital has **10 days** to respond. All cases require a response, even if you agree with the issue. It is strongly recommended that the hospital fax back the response.

# NYPORTS Mandated Codes

- There are **4** types of responses:
  1. Hospital indicates the event/codes were previously reported to NYPORTS. IPRO will verify and close the case to further NYPORTS review. A final **“Previously Reported Letter”** will be sent to the hospital.
  2. Hospital agrees with the event/codes. IPRO will send a final **“Hospital Agrees”** letter and report the case to the DOH NYPORTS area office.
  3. Hospital fails to respond to the Preliminary Letter of NYPORTS event. IPRO will send a final **“Failure to Respond”** Letter and notify the DOH.

# NYPORTS Mandated Codes

4. Hospital disagrees with the event/codes.
  - Senior review staff will review the response and either approve or refer to physician consultant.
  - The physician consultant will either approve or refer to DOH for confirmation.
  - Case is sent to DOH to either approve or confirm the NYPORTS event.
  - The final DOH decision will be confirmed with a final letter either approving the case or instructing the hospital to report the case to the NYPORTS system within 10 days of the date of the letter.
  - The DOH area office is provided all the specifics of the confirmed case for issuance of a statement of deficiency.

# Technical Denials

- Chart requested and timeframe has elapsed and the chart has not been received. A Technical Denial is issued.
- Hospital has **1 year** from the date of the letter to send in the chart.
- Documentation requests result in a technical denial when the documentation requested is not received.

# Helpful Telephone Numbers

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Kathleen Fox	Senior Director	Medicaid Field	361
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Indroutie Singh	Sr. PSC	Cost Outlier & IPRA	212
Shaheen Khan	Sr. PSC	PASRR	306
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