Comagine Health

# Alaska Medicaid 2025 Fall Provider Outreach – Outpatient Session

**Teresa Kirn, RN, IQCI**
**Sr. Clinical Manager**
**November 2025**

# Objectives

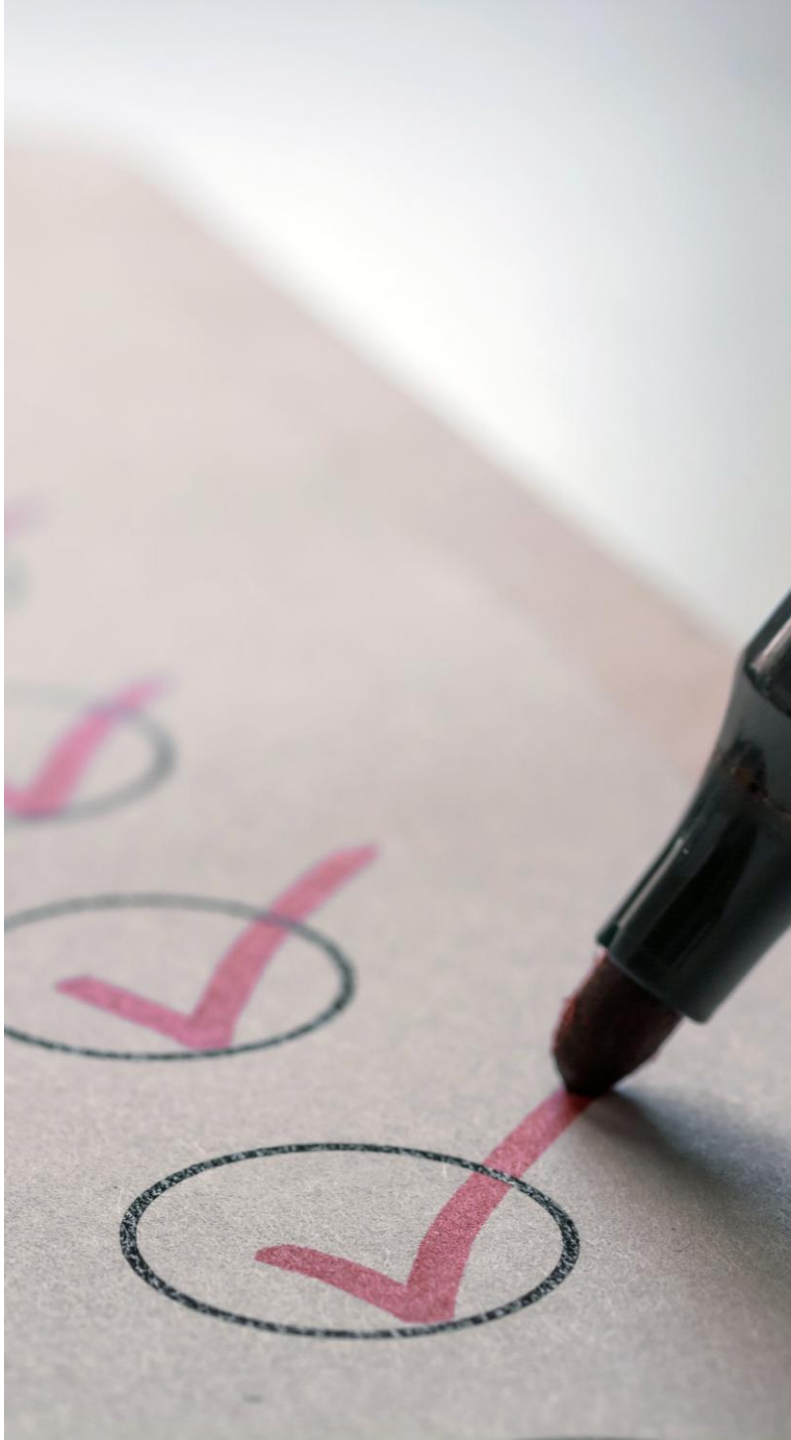
Comagine Health Provider Portal (CHPP) and Home Page

Overview of Review Types

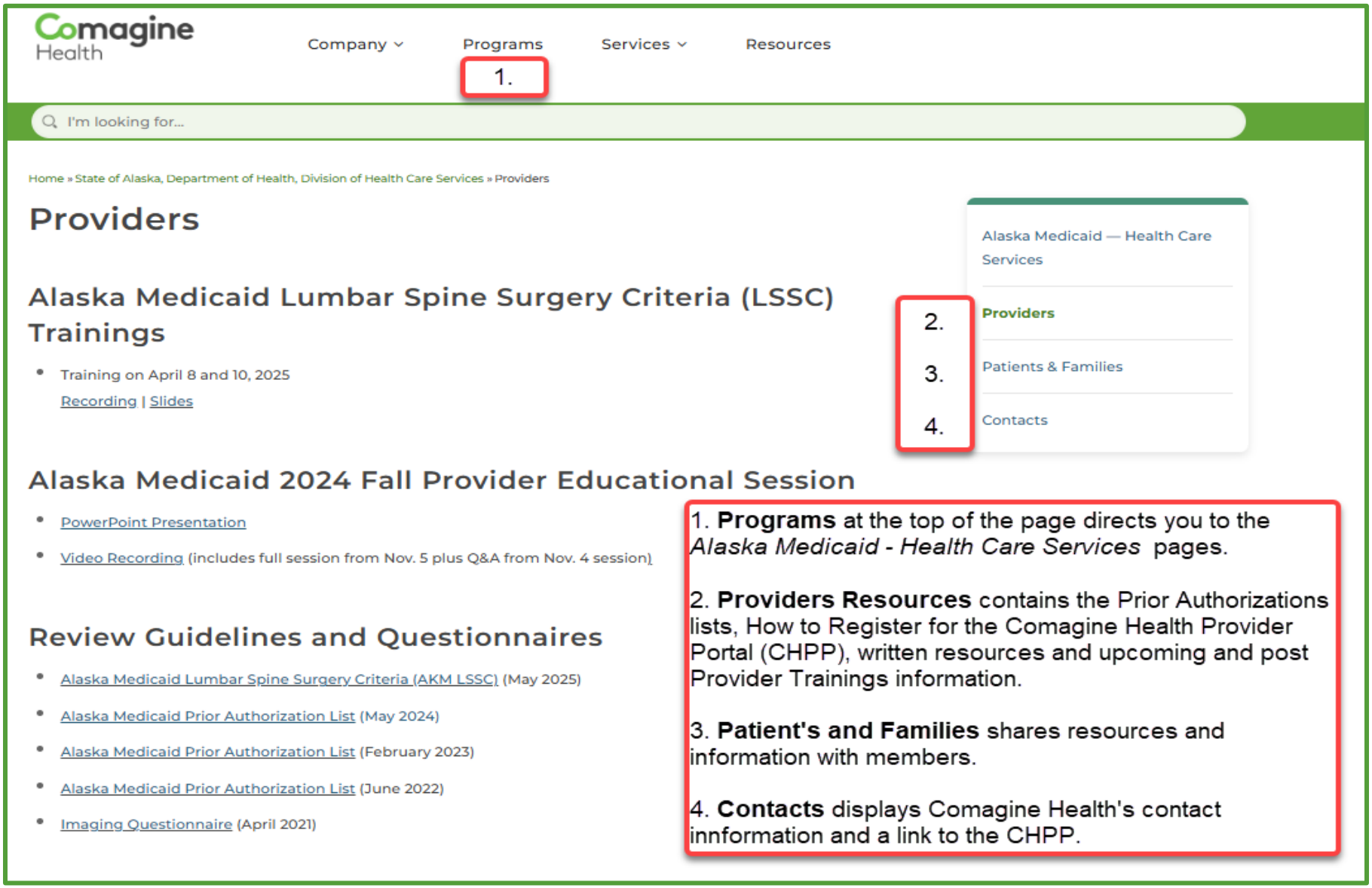
- Alaska Medicaid Lumbar Spine Surgery Criteria Imaging
- Imaging
- Retrospective
- Surgical
- Transplant

Reminders and Tips

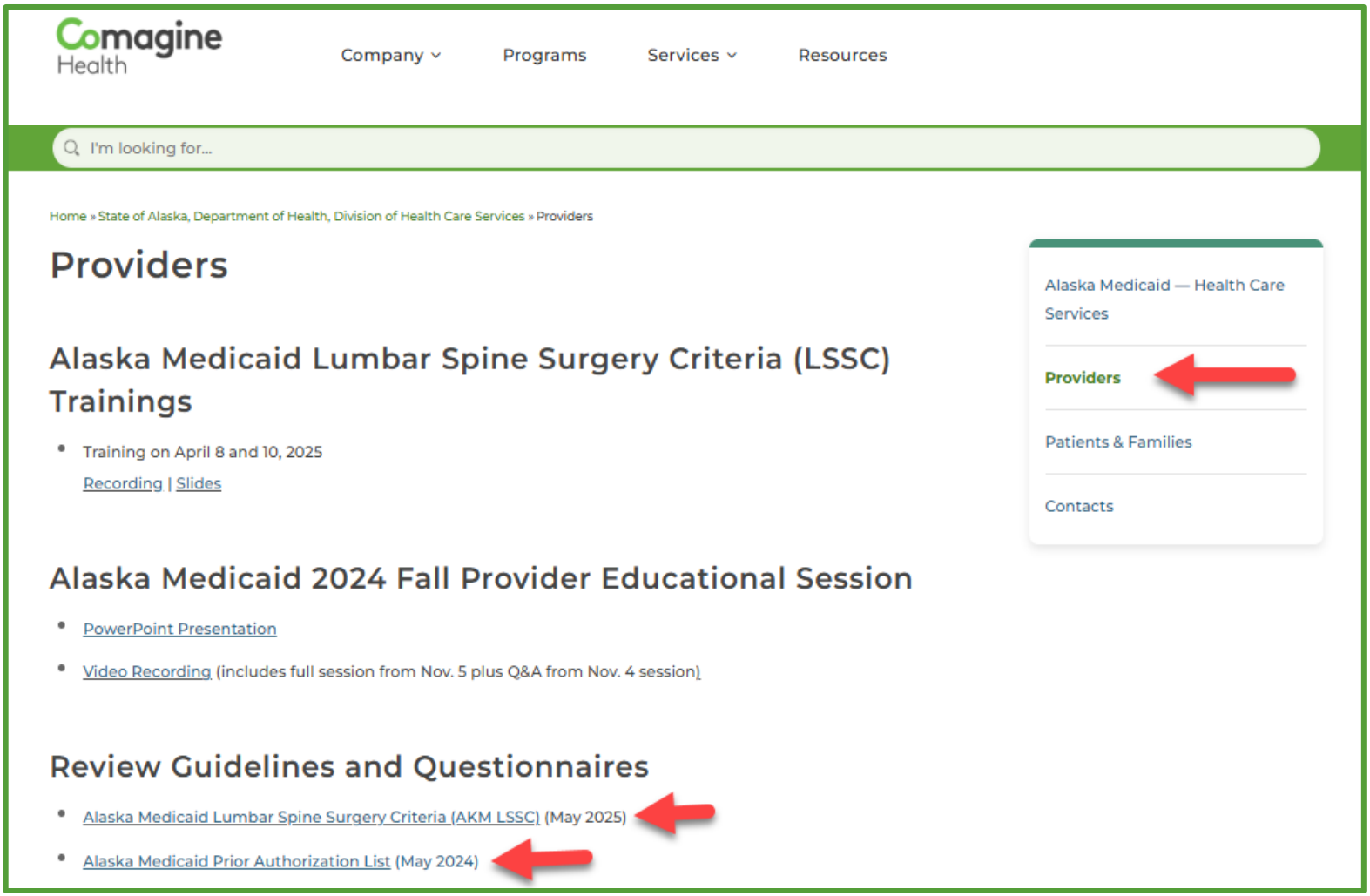
Next Steps Following Decertification



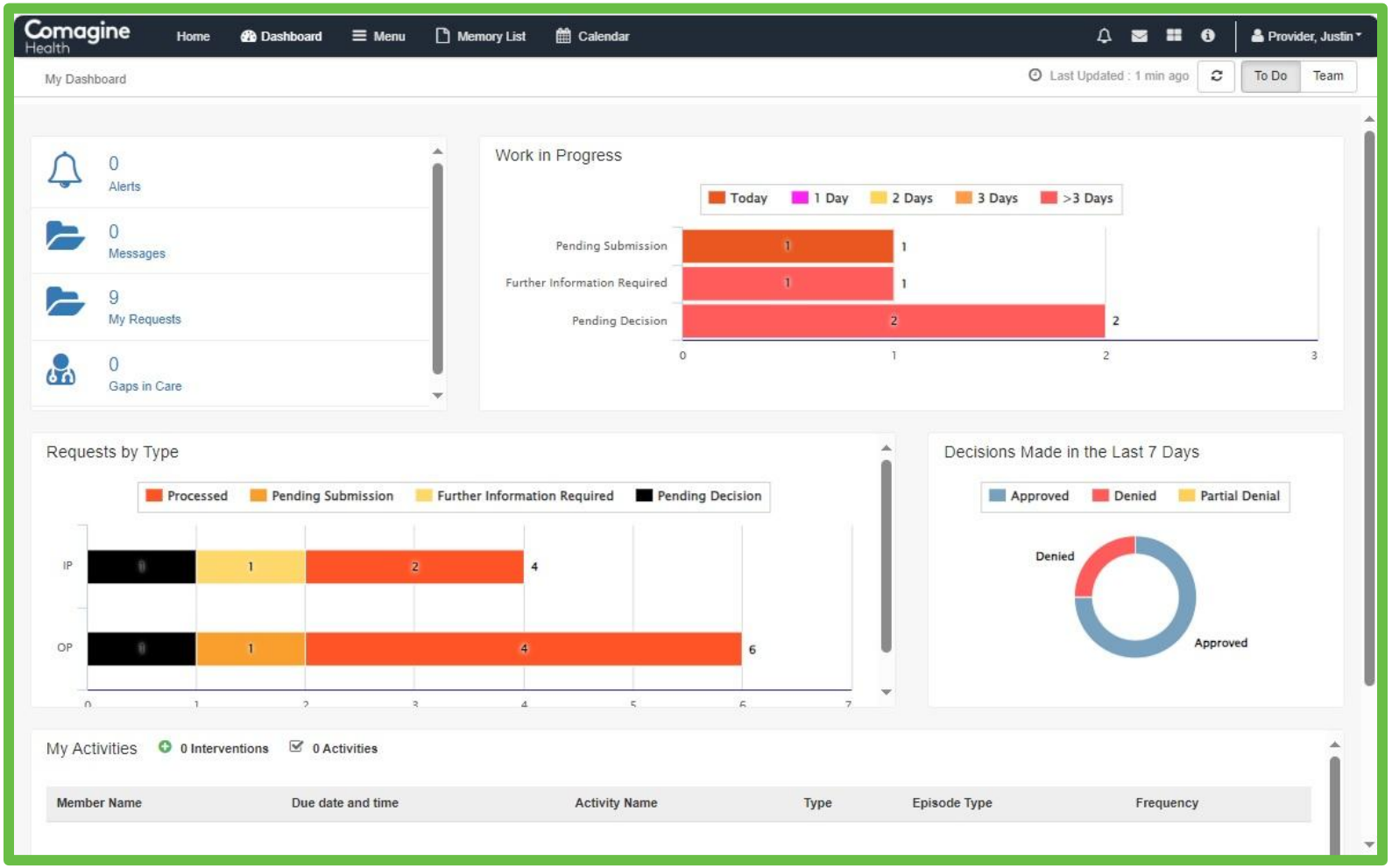
# Provider Resources



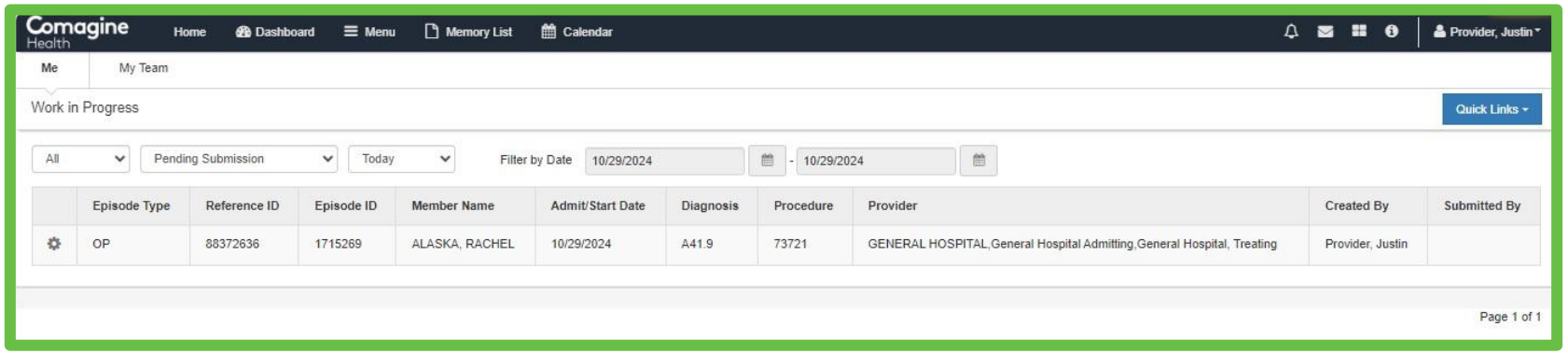
# Locating Prior Authorization List

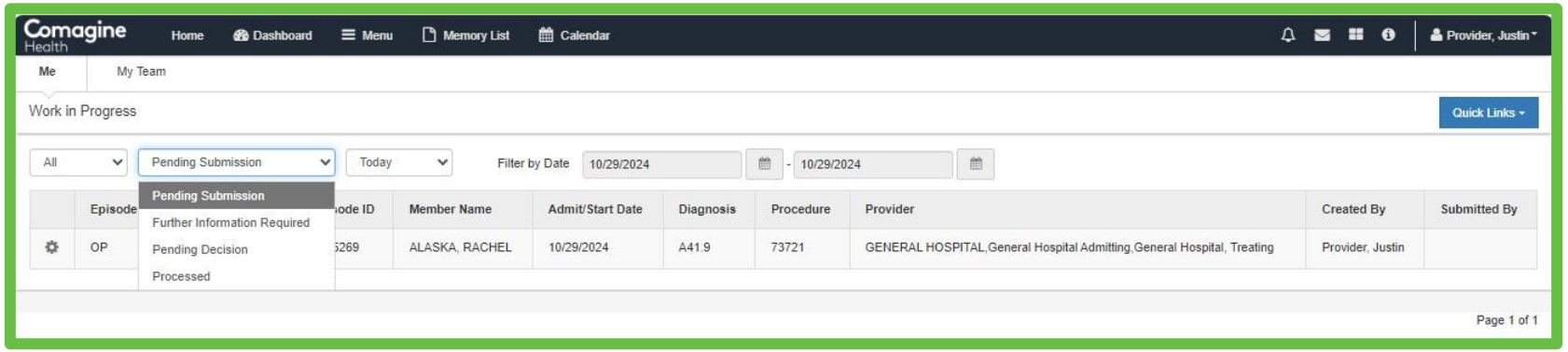


# Provider Dashboard - To Do

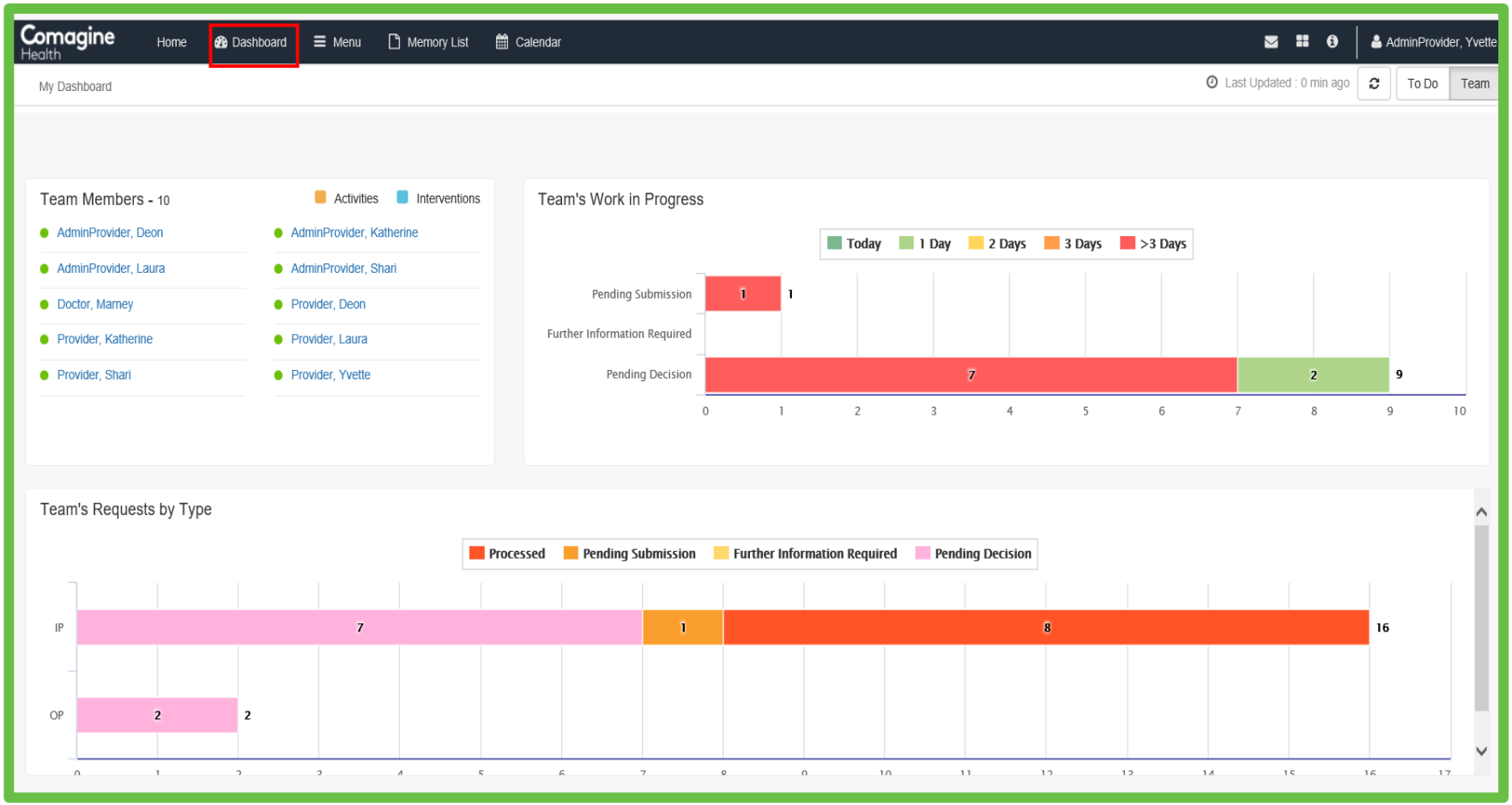


# Provider Dashboard Links



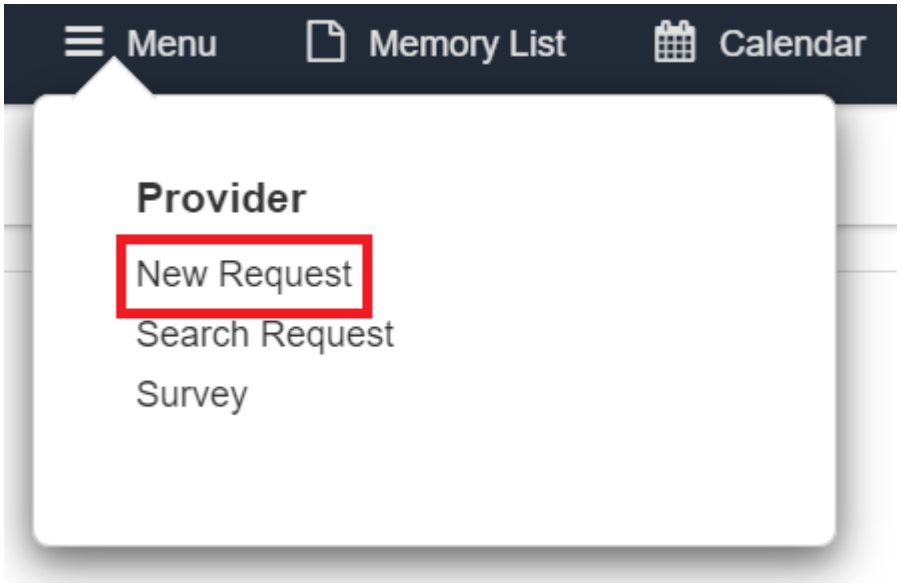



# Provider Dashboard - Teams

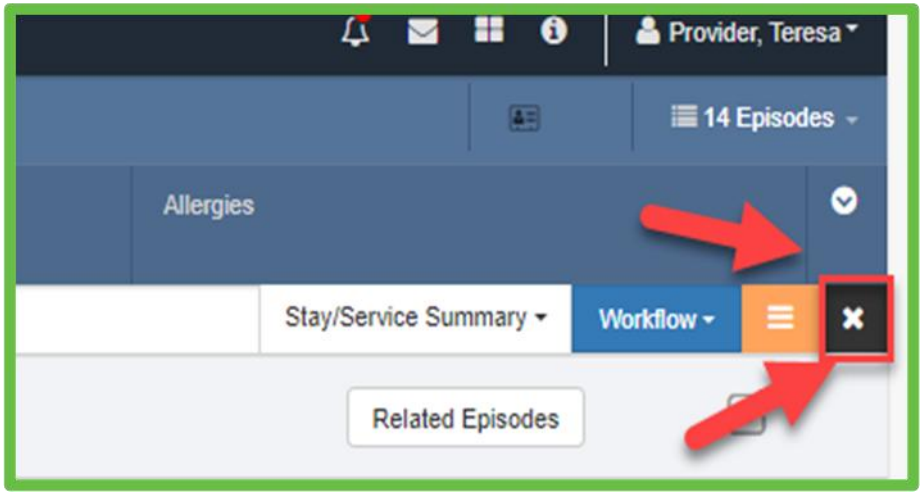


# Provider Portal - Creating a New Request

- Note: The "Search Request" feature allows users to search for existing requests in Jiva, to determine duplicate status.
- If no results return during a Search Request, it may appear the patient is not in Jiva since there are no search results.
- If this happens, search for the patient using the "New Request" feature . Patients with no existing requests are only viewable by using the "New Request" feature.

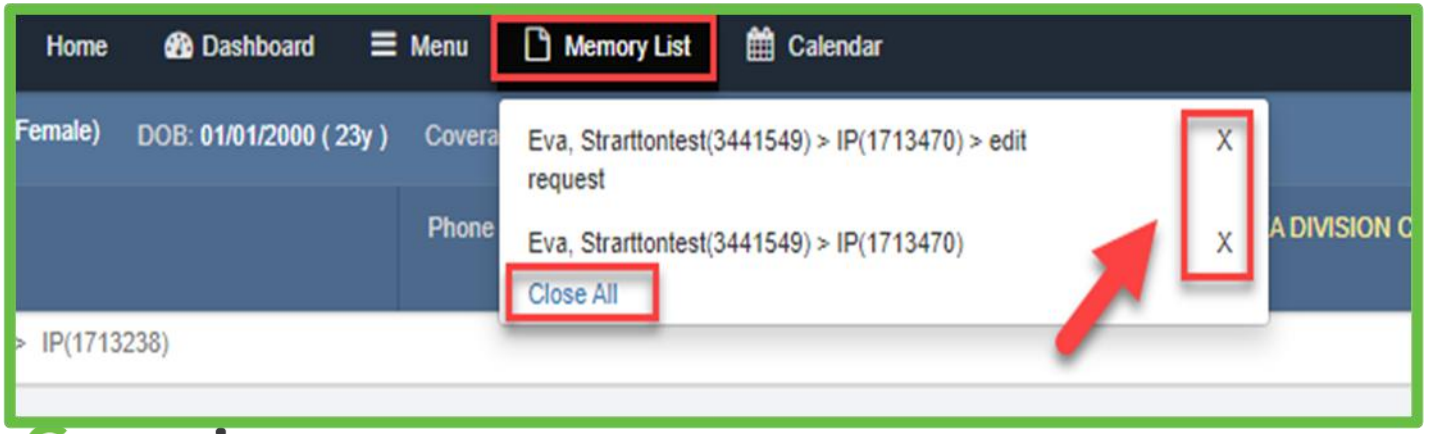


# Provider Portal – Exiting a Case




Two steps to ensure you have exited a request

1. Click the BLACK 'X' in upper right corner of the case
2. Click your *Memory List* to see if the request is open in the background. Click the 'X' to completely exit the case




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# Review Types

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# Submission Resources

Alaska Medicaid Prior Authorization (PA) list

- Contains procedures and services requiring PA
- Available at www.comagine.org
- Revision date located on PA list

Alaska Medicaid Lumbar Spine Surgery Criteria (AKM LSSC)

- Contains required documentation submission list
- Available at www.comagine.org

# Alaska Medicaid Lumbar Spine Surgery Criteria (AKM LSSC)

Authorizations

- Prior authorizations or retrospective requests
- Inpatient and outpatient requests

Criteria

- Located on Comagine.org
- Transparent and forward-facing
- Format provides a useful conceptual framework for review
- Review pathways or subsets:
  - 4 pathways for decompression
  - 5 pathways for fusion
- They provide clearer and more solid criteria for fusion

Streamlined required documentation:

- Clinical note from requesting surgeon within 6 months of surgery date
- Clear surgical plan
- Full radiologist's report within 12 months
  - MRI (preferred)
  - CT-myelogram
- Initial physical therapy (PT) evaluation note

Lumbar fusion requests, both are required:

- Flexion-extension x-rays within 12 months of surgery
- Urine cotinine test results within 3 months of surgery

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# Imaging Requests

Imaging Assessments

- Complete all Assessments with clinical details
- Fillable assessment form on Comagine.org
- One imaging request per assessment questionnaire
- Multiple imaging procedures on same date of service (DOS)

Repeat imaging requests

Authorizations

- Provider sets the timeframe on each request up to four months
- Valid for up to four months from the requested date once decisioned and approved

Retrospective requests for additional imaging completed on DOS

# Surgical Requests

- No surgical assessment required
- Detailed surgical plan required with all requests
- Staged surgeries on same surgery vs separate surgery
- Observation vs inpatient status
- Code changes and adjustments post-surgery with operative report
- Surgeries at DRG facilities
- Adding providers to authorizations
  - Treating
  - Admitting
- Valid for 4 months once decisioned and approved

# Retrospective Reviews

- Submit after services provided or after discharged from inpatient admission
- Within timely filing status
- Impacts screening for Case Management referrals
- Pertinent clinical to support the request
- Entire chart is not to be submitted

# Transplant Requests

- No transplant assessment required
- Outpatient authorization
  - Valid for 12 months
  - CPT code used for waitlist
- Renewal requests require updated clinical
- Inpatient authorization
  - Valid for actual transplants
  - ICD-10 code

# Helpful Information for Request Submissions

- Submit targeted clinical information with date, current interventions, changes in plan of care, expected length of stay (LOS) and discharge date
- Entire chart is not required for any request
- Word documents, PDFs and JPGs are acceptable attachment formats
  - Image format files (.tiff) are not accepted
- Prevent decertification due to insufficient clinical information by responding to web requests for additional information



# Utilization Management & Case Management Integration

- Most Case Management referrals are initiated internally
  - Medically complex patients
  - Support the discharge plan
  - Long acute inpatient stays
- Potential non-certifications are referred to case management
- Case management referrals come from any source, i.e., discharge planners, LCSW, etc.



# Options After Non-Certification

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# Options Following Non-Certification

| All options | |
|---|---|
| **Doctor-to-Doctor (DTD) Consultations**<br>• Within 60 days of notice letter<br>• Does not affect appeal rights | **Additional Information after Decertification**<br>• Ideal for a lack of information<br>• Within 60 days of notice letter |
| **Expedited Appeal**<br>• Only urgent inpatient care<br>• Decision within 72 hours<br>• Entire record is not to be submitted | **Standard Appeal**<br>• Completed via internal and external peer matched reviewer<br>• Decision within 30 calendar days<br>• Entire record is not to be submitted |

# Options Following Non-Certification, cont.

| Options | Details and Information |
| --- | --- |
| **Second-level appeal to the Division of Health Care Services (DHCS)** | • Written and postmarked to the State of Alaska within 60 days of the date of the first level appeal decision by Comagine Health |
| **Fair Hearings** | • Recipients' responsibility to submit a request<br>• Submission information mailed to member’s non-certification letter |

# Comagine Health Website Provider Resources

1. Go to http://www.comagine.org
2. Click on Programs
3. Scroll to Alaska Medicaid-Division of Health Care Services and click *Learn more* for specific information
4. Additional resource available via the right navigation box

State of Alaska, Department of Health, Division of Health Care Services | Comagine Health

# Comagine Health Provider Portal Web-Based Utilization Management

Registration and CHPP support

- CHPP registration packet located on our website
  - Fax to (800) 826-3630 or email address below
- CHPP support contact

| **Comagine Health Contacts**<br>**Phone: (888) 240-0437** | **Email** |
|---|---|
| **Teresa Kirn RN IQCI**<br>Sr. Clinical Nurse Manager | TKirn@comagine.org |
| **Justin Ordonez**<br>Intake Representative Supervisor, Care Management | Jordonez@comagine.org |

# Comagine Health Contact Information

**Utilization Review**

- Toll-free phone
  (888) 240-0437
- Toll-free fax
  (800) 826-3630

**Utilization Review Hours**

- 6:30 am to 5:00 pm Alaska Time
- Monday through Friday



# Utilization Management Questions

