

NOA FAQ's

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Q1: What is an NOA or NOE?

A1: Notice of Adverse Benefit Determination (NOA) - The denial or limited authorization of service request, or the reduction, suspension or termination of a previously approved service

Notice of Extension (NOE) - The written notice to a member to extend the timeframe for making either an expedited or standard authorization decision by up to fourteen days if criteria for a service authorization extension are met

- Q2: Does an NOE have to be sent to the member and provider if additional information is needed for a request involving medications?
- A2: No, an NOE or any type of notification does not need to be sent to the member or the provider. Often the additional information is obtained prior to the member receiving notification of the need for more information. The Contractor must make a decision regarding the medication, if additional information is needed no later than 7 days of the date of the initial request.

Q3: What are the timeframes in which an authorization request must be completed?

A3: Different timeframes apply depending upon whether or not the service authorization request is a standard request, an expedited request, and whether the service request relates to medications.

	Standard (does not apply to medications)	Expedited/BHRF (does not apply to medications)	Medications
Decision time frame	As expeditiously as the member's health condition requires but no later than 14 calendar days from receipt of the request. The count begins the day after receipt of request.	As expeditiously as the member's health condition requires but no later than 72 hours from receipt of the request. The count begins from the time of receipt of request. Must be date and time stamped.	No later than 24 hours from the date of receipt of the request. The count begins at the hour of receipt of the request. Must be date and time stamped.

If request lacks sufficient information to render a decision	If additional information is needed and the extension is in the interest of the member, the decision may be extended by an additional 14 calendar days not to exceed 28 calendar days. NOE shall be issued.	If additional information is needed and the extension is in the interest of the member, the decision may be extended by an additional 14 calendar days. NOE shall be issued.	A final decision shall be issued no later than seven days from the initial date of receipt of the request. No NOE or notice needs to be sent to member.
	NUE shall be issued.		

Q4: What happens if a decision date falls on a weekend or holiday?

A4: Decision shall be issued within the required timeframes regardless of whether the due date for the authorization decision falls on a weekend (Saturday and Sunday) or legal holiday as defined by the State of Arizona. For example, if a standard authorization decision date falls on a Sunday, the decision must be issued the Friday prior, unless the Contractor has staff available on the weekends to render decisions.

Q5: Can providers write and issue NOA's on behalf of the Contractor.

A5: No, Providers are not permitted to issue NOAs; it is the responsibility of the Contractor. If a Contractor has a delegated agreement with an entity that makes decision on the Contractors' behalf; the subcontractor may issue NOA's. The Contractor shall monitor the delegated subcontractor per ACOM 438.

Q6: Can guidance be provided to the MCO's in ACOM 414 Attachment C for Behavioral Health services that are being denied.

A6: AHCCCS will consider this when ACOM 414 is opened for revisions. However, the Medical Director rendering the decision should provide the rationale for the denial included within the letter.

Q7: If an NOE is issued prior to the 14th day does the Contractor still have 28 days to issue a decision?

A7: No, if for example, an NOE is sent on day six of the request timeframe, and an NOE is issued an additional 14 days are given. The decision must be made by the 20th day of the request. The timeframe is counted from the date on the letter which represents the mail date of the NOA. It is important to ensure that the NOA is issued as expeditiously as the member's health condition requires and in no instance later than the end of the time period.

Q8: What happens if a Service Authorization Decision is not reached within the required timeframes

A8: A service authorization decision that is not reached within the required timeframes for a standard, expedited or a medication request constitutes a denial. The Contractor shall issue a NOA denying the request within the required timeframe.

Q9: For termination, suspension, or reduction of a previously authorized service, when does the NOA have to be mailed?

- A9: NOA shall be mailed at least 10 calendar days before the date of the proposed termination, suspension, or reduction except for situations in 42 CFR 438.210 providing exceptions to advance notice.
- Q10: If additional information is needed to make a decision for a prior authorization. What are the requirements around how many outreach attempts to be made by the plan to get the information prior to denying the request?
- A10: Per ACOM 414, The NOE shall not be sent until the Contractor has made sufficient attempts to obtain the necessary information from the requesting provider. Rationale for the NOE must be clearly documented. The extension will be for no more than 14 calendar days or as expeditiously as possible if the member requests or if the delay is in the member's interest.