

OHCA Minute: Why?

Help the Health Care Authority Medical Directors answer the question “Why?”

Medical directors at the Oklahoma Health Care Authority (OHCA) are charged with determining the medical necessity for a requested service. Most often, the missing information that results in denial is an answer to the question “Why?”

“Why is the requested service medically necessary?” If the request is for a repeat service in a short period of time, “Why does the service need to be provided at such a short interval?” If the request is for a repeat image, “Why was the initial image not adequate, or was it missing a needed part of the anatomy?”

Often the medical record includes minimal pertinent information in the patient history or physical exam supporting the request. Brief notes such as “echo” or “MRI of LS spine” are often all that is found upon reading the assessment and plan. Without sufficient information to connect the chief complaint and the plan - answering the “why?” - an approval is not possible.

In reviewing records, as soon as information is found to support the criteria for approval, the request is approved and sent back to the provider. The mindset of the review is to find criteria for approval. A clear answer to the “Why?” makes approval easy.

MD-DDS.Inquiries@okhca.org is available for questions addressed to the OHCA medical directors regarding prior authorization approvals and denials. As a reminder, this email address is available only to contracted MD, DO, DDS, APRN and PA providers.

The OHCA wishes to thank all providers who provide medical care to our members