

Understanding the provider peer-to-peer process



FAQ about making determinations with a PacificSource medical director

What is a peer-to-peer process or “P2P”?

The peer-to-peer process—often referred to as a “P2P”—provides an opportunity for providers to discuss criteria used to make specific coverage determinations. Although the process allows for a dialog between a member’s clinician and a PacificSource medical director, it doesn’t make determinations for claim reviews or contract denials.

What is the difference between a peer-to-peer process and an appeal?

A peer-to-peer process is a conversation between the member’s clinician and a PacificSource medical director about clinical reasoning used in a non-approval decision. The purpose is to provide information (but not to change the decision).

An *appeal* is a request for a second review of the original coverage determination. The purpose is to request a different determination.

When can I schedule a peer-to-peer process?

The peer-to-peer process is designed to be scheduled after a coverage determination—but prior to an appeal. You can also request to speak to a medical director during the appeal.

How many times can I speak to a PacificSource medical director about a particular appeal?

A peer-to-peer conversation gives you an opportunity to speak to a medical director one time per appeal. This can be done either before an appeal is submitted or with the appeal request.

Who can request or schedule a peer-to-peer conversation?

The original requesting provider or a designated person from the provider’s staff can schedule a peer-to-peer appointment.

Who can attend or take part in the peer-to-peer conversation?

Only the originating provider takes part in the peer-to-peer conversation.

How much time does it take between requesting a peer-to-peer appointment and having the actual peer-to-peer conversation?

We’ll respond to your initial request for an appointment within 48 hours. The actual P2P appointment will vary depending on the requestor’s availability and the medical director’s schedule.

When setting up a peer-to-peer appointment, what choices should I consider?

When setting up the P2P appointment date and time, you can also decide whether you want the conversation to be by phone or video call.

What if I miss the scheduled time?

A peer-to-peer appointment may be rescheduled for extenuating circumstances. Please reach out to us when faced with an unexpected conflict.

How do I request a peer-to-peer appointment?

Contact our Health Services department to initiate the peer-to-peer request.

- **Commercial:** 541-684-5584
- **Medicaid:** 541-330-7301
- **Medicare:** 208-433-4624

How do I request an appeal?

You will need to fill out a Provider Appeal form and submit by mail or fax. Appeal forms are downloadable for each line of business: Commercial, Medicaid, and Medicare.

- **Commercial appeals:**

Visit PacificSource.com and type "Provider Appeal Form" in the search field at the top of the page.

Fax: 541-225-3628

Mail: PacificSource Health Plans Appeal and Grievance Department

PO Box 7068

Springfield, OR 97475-0068

- **Medicaid appeals:**

Visit CommunitySolutions.PacificSource.com and type "Provider Appeal Form" in the search field at the top of the page.

Fax: 541-322-6424

Mail: PacificSource Community Solutions Provider Appeals

2965 NE Conner Ave

Bend, OR 97701

- **Medicare appeals:**

Visit Medicare.PacificSource.com and type "Provider Appeal Request Form" in the search field at the top of the page.

Fax: 541-322-6424

Mail: PacificSource Medicare Provider Appeals

2965 NE Conner Ave

Bend, OR 97701

How do I request a peer-to-peer with an appeal?

You can request a peer-to-peer appeal by submitting an Appeal Form (or through InTouch for Providers, the online portal); please write that you would like a peer-to-peer conversation with a medical director. If you prefer to submit the form by fax, it helps to note your request in the fax cover page.

I've submitted an appeal but now would like to schedule a peer-to-peer conversation—what steps should I take?

Contact our Appeals and Grievances department at either of these phone numbers:

- **Commercial appeals:** 541-684-5201
- **Government appeals:** 541-330-4992

Can I request a peer-to-peer conversation on an expedited appeal?

No, the peer-to-peer process doesn't allow for an expedited-appeal timeline.

Can an original authorization decision be changed or approved via the peer-to-peer process?

No—the purpose of the peer-to-peer process is to provide an explanation of the denial; it's not a decision-making mechanism. A peer-to-peer conversation doesn't include resolving or denying an authorization or appeal.

A procedure or medication that's been approved in the past is now being denied—why?

There are many reasons a service can be denied. It's best to contact our clinical team to explain the denial rationale. Our Customer Service team can help direct you to the right person:

- **Commercial:** 888-977-9299
- **Medicaid:** 800-431-4135
- **Medicare:** 888-863-3637