"NOTICE OF DENIAL OF MEDICAL COVERAGE"

What?

A standardized notice developed by CMS that the provider of service must deliver to the Senior Preferred member, or their authorized representative before admission to a skilled nursing facility for a non skilled stay.

This is a CMS notice and must be used in the format provided. Only information in the requested areas can be added.

An electronic copy of the notice can be downloaded off the Senior Preferred provider page at www.seniorpreferred.org

Why?

Inform Senior Preferred members or their authorized representative of their financial liability.

Inform Senior Preferred members of their appeal rights.

When?

Notice is given prior to, or at the time of admission to a Skilled Nursing Facility when the member is admitting under a non-skilled stay.
“NOTICE OF DENIAL OF MEDICAL COVERAGE”

How?

Provider of service should follow steps below:

**STEP 1**
Identify when notice needs to be delivered.

**STEP 2**
Provider should fill in the designated spots on the notice in at least 12-point font.

**STEP 3**
Deliver notice to member or their authorized representative (AR).

Member or their AR must **SIGN** and **DATE** the notice.

**STEP 3 CONTINUED....**

Refusal to sign

If refusal to sign and date notice should occur, provider should date and annotate its copy of the notice to indicate refusal. The date of the refusal would be considered the date of the receipt of notice.

**STEP 4**
**FAX** signed and dated notice to Senior Preferred - Medical Management department at fax # (608)775-8003.

Provider should give copy of the signed and dated notice to the member and retain the original signed and dated notice in the patient’s case file.