



MedHOK Values		ika Values		
medHOK UI: Status Auth_Status	Auth_Status_Reason Note: Values with (*) at the end indicates the value is inactive in MHK.	Assigned IKA Auth_Status_Code	Assigned IKA_Reason	IKA_Decision
Cancelled	Data Entry Error	D05	Data Entry Error	Denied
Cancelled	Duplicate Auth	D26	Duplicate Auth	Denied
Cancelled	Not eligible to reopen	D06	Not Eligible to Reopen	Denied
Cancelled	OTO-Not Finalized	D07	OTO - Not Finalized	Denied
Cancelled	Withdrawn	D31	Withdrawn	Denied
Cancelled	any status reason not listed above including blank	D05	Data Entry Error	Denied

Notification (MG/Member)

NO need for notification from MG/Mbr
- EOC language?
- MM process – no activity needed

Claims should have billing codes in the claim – reject (expectation that the provider codes correctly) – this goes to recover side

Types 2 & 3: Pend – do not pay option in MHK

(Change Request)

Applies to Type 1, 2, 3

We discussed this issue with Drs. Lubavin and Hammash and this is SCAN's position:

SCAN or the MG (depending on risk) may cover one (1) specialist referral for consult (in-network or out-of-network) to determine if a member is a possible candidate for a Medicare-approved clinical trial. This is similar to a referral for second opinion

Follow normal process for consultation based on case by case basis – EOC indicates that the member can access without authorization.

SCAN or the MG will not cover the costs of additional services and tests solely to determine whether the member will qualify for the clinical trial. Coverage is for consult only.

Once a member is enrolled in a Medicare approved clinical trial (signed consent form), Original Medicare is responsible

for all subsequent routine clinical trial costs.