











MCD Name	Reporting Reference	Reporting Name	Submission Date	Data Period Start	Data Period End
NH Healthy Families	BHRUGPA.01-F	Severe and Mental Illness Drug Prior Authorization- F: CMHC Denial Log	11/13/2017	11/3/2017	11/11/2017

This report is specific to CMHCs		
Report Frequency: Weekly	Lag Time: 3- Business Days	First Report Due Date: 9/13/2017

Reporting Week: month/week (1st day of reporting wk.)/year (Rolling week)	Medicaid ID	Member Last Name	Member First Name	Prescribing Provider Name	Drug Name	Child/Adult	Injectable Antipsychotic	Reason for Denial- ONLY FOR CMHCs Each denial should only be placed in 1 category (pick the most appropriate)				
								PA Form Incomplete or Illegible	Member Eligibility Issue	Prior Authorization Criteria Not Met	Prescribing Provider not Network Provider	Other
2017-11-03 - 2017-11-11					FEZIMA CAP 80MG	Age 18+	No	0	0	1	0	0
2017-11-03 - 2017-11-11					VENLAFAXINE CAP 150MG ER	Age 18+	No	0	0	1	0	0
2017-11-03 - 2017-11-11					ARIPIPRAZOLE TAB 10MG	Age 18+	No	0	0	1	0	0
2017-11-03 - 2017-11-11					ARIPIPRAZOLE TAB 10MG	Age 18+	No	0	0	1	0	0
2017-11-03 - 2017-11-11					LATUDA TAB 40MG	Age 18+	No	0	0	1	0	0
2017-11-03 - 2017-11-11					VENLAFAXINE CAP 37.5 ER	Age 0-17	No	0	0	1	0	0
2017-11-03 - 2017-11-11					DEXMETHYLPHENY CAP 20MG ER	Age 0-17	No	0	0	1	0	0
2017-11-03 - 2017-11-11					VYVANSE CAP 40MG	Age 18+	No	0	0	1	0	0
2017-11-03 - 2017-11-11					IMIPRAM PAM CAP 100MG	Age 18+	No	0	0	1	0	0

MCO Name	Reporting Reference #	Report Name	Submission Date	Data Period Start	Data Period End	
NH Healthy Families	BHDRUGPA.01-G	Severe and Mental Illness Drug Prior Authorization- G.CMHC Provider Complaint Log	11/13/2017	11/3/2017	11/11/2017	This is a running log that also includes information from the past reports to allow for review of specific items/information that may have been "in process" when previous report was submitted.

NPI Number	Provider Name	Provider CMHC	Date Received	Complaint/Appeal Category as defined by MCO	Who is Complaint/Appeal Against	Complaint/Appeal Description	Action/Response Taken	Date Action/Response Taken
			9/11/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Patient has been doing well and has remained stable.	Grievance & Appeals spoke with providers office, advised the complaint was that the medication was not approved. Office was advised that an appeal could be requested and COC was put in, Office contact advised that she would ask the provider how she would like to proceed. To date we have not received an appeal request or a consent form from the member. Grievance & Appeals will reachout again to provide assistance.	9/12/2017-10/30/2017
			9/12/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Upheld on appeal on 10/11/17.	9/12/2017
			9/12/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Overtured on appeal	9/12/2017
			9/14/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Case was sent to appeal and has been approved.	9/14/2017
			9/22/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Left multiple messages with office. Provider is out of the country, have spoken with office, they are looking into how the provider would like to proceed.	9/29/2017
			10/2/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Overtured on appeal	10/2/2017
			10/11/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Appeal is pending.	10/12/2017
			10/24/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Overtured on appeal	10/24/2017
			10/24/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	After additonal information was received by Envolve, medication has been approved.	10/24/2017
			10/26/2017	Pharmacy	Peer to Peer reviewer	Denial of medication. Disagreement of determination.	Case has been sent to appeals. COC was put in.	10/26/2017
			11/4/2017	Pharmacy	Denial of medication	Denial of medication.	Case has been sent to appeals. COC was put in.	11/6/2017
			11/4/2017	Pharmacy	Denial of medication	Denial of medication. Disagreement of determination.	Original complaint from 9/12/2017. Provider disagreed with resolution.	11/9/2017
			11/10/2017	Pharmacy	Denial of medication	Denial of medication. Disagreement of determination.	Case has been sent to appeals. COC was put in.	11/10/2017