

Utilization Management for HCDPBC

- Effective October 9, 2020, PBHD has implemented a Gatekeeper Model for Specialty Care:
 - Authorization requests for advanced diagnostic testing (MRI/CT/PET/SPECT) and procedures rendered in a facility setting must be obtained by the Specialty Care provider via the PlanLink provider portal.
 - Initial Specialty Care referrals are made by the C. L. Brumback Primary Care provider for up to three (3) visits.
 - If additional Specialty Care visits are needed, please include in the treatment plan of your office/consult notes and/or operative/procedure reports. Please DO NOT send a request for authorization form.
 - There is a Specialty Care visit limit of six (6) visits per specialty per calendar year, excluding Oncology and Ophthalmology.
- Participating providers may check eligibility, authorization and claim status, and send messages to CCP via the PlanLink provider portal at <http://planlink.ccpcare.org/>
 - Learn more about [PlanLink](#)
- Service Appeals
 - Service appeals must be submitted in writing within 30 calendar days from the date of the Notice of Denial letter by submitting an appeal letter to CCP.

The appeal request must include:

- Completed appeal letter
- Supporting documentation
- Copy of original documentation

