I. SCOPE:

The purpose of the Administrative Hold procedure is to document the reason for the hold, the departments responsible for responding to providers, members or Group Administrators and to provide direction for processing claims.

II. POLICY:

An Administrative Hold form (Exhibit A) will be completed by Network Services for provider holds, by Corporate Enrollment for member holds and by Corporate Contract Installations for group holds. The party initiating the administrative hold will then be responsible for file maintaining the hold and notes/comments in the Information System. Network Services/Enrollment/Contract Installation will maintain copies of the completed form within their departments for future reference/inquiry.

III. PROCEDURE:

Completing the Information System screen file maintenance.

A. Provider Administrative Holds

The Plan Network Services Department will:

1. complete the file maintenance to place the provider on administrative hold [when applicable] on the PS338 [Provider Administrative Hold] screen,
2. provide Plan and Corporate staff with information relating to the hold by entering comments or instructions on reimbursement on the PS320 [Provider Comments] screen.
3. The reason for the administrative hold (i.e., contract negotiations), the effective/expiration date of the hold, and the full name of the person placing the provider on hold will be entered on the PS320 screen.

B. Group Administrative Holds

The Group Entry department will:

1. complete the file maintenance to place the group on administrative hold [when applicable]
2. provide Plan and Corporate staff with information relating to the hold by entering comments on the EP129 [Group Contract Notes] screen.

3. The reason for the administrative hold (i.e., nonpayment of premium), the effective/expiration date of the hold, and the full name of the person placing the group on hold will be entered in the EP129 screen.
4. **Medicare select** members must not be placed on administrative hold for non-payment of premiums. **Health Plan** is liable for all eligible services until member termination occurs.

C. Member Administrative Holds

The Corporate Enrollment Department will:

1. Complete the file maintenance to place the member on administrative hold [when applicable]
2. provide Plan and Corporate staff with information relating to the hold by entering comments on the EP329 [Member Notes] screen for all members, except [Medicaid Product] members. For [Medicaid Product] members, Corporate Government Programs Enrollment Department will be responsible for completing the file maintenance and entering comments on the EP329.
3. The reason for the administrative hold (i.e., nonpayment of premiums), the effective/expiration date of the hold, and the full name of the person placing the member on hold will be entered on the EP329 screen.

D. Processing instructions for the Claims Department

The claim will edit to a review 40 (Group Administrative Hold), 41 (Member Administrative Hold), or 89 (Provider Administrative Hold). The claims processing departments will follow the instructions noted on the applicable Information System screen.

1. The claim will remain in a pending status until instructions to deny or pay the claim are received.
2. If a prompt payment provision is in place, the claim will edit to that (prompt payment) review if it remains in a pending status beyond the limitation for payment without penalty
3. A separate form will be completed for each request. Fill in appropriate name and member, group, or provider number.
4. Indicate Administrative Hold effective date with six digits; i.e., 01-01-99.
5. Indicate Administrative Hold expiration date with six digits; i.e., 01-01-99. If expiration date is unknown when initiating request, it is the requesting person's responsibility to provide that date within 30 days and for updating

the information in System. If expiration date is not received within 30 days, the Claims processing department responsible for clearing the edit will follow-up with the originator of the hold.

6. Narrative explaining reason for Hold. (This field must be completed.)
7. Signature of person requesting Hold and date completed.
8. Signature of Department Head of person requesting Hold and date completed.
9. Department responsible for entering Hold in System (if not completed within the Department responsible for performing the file maintenance .)

Exhibit A

PLAN

ADMINISTRATIVE HOLD REQUEST FORM

PROVIDER NAME_____(1)_____ NUMBER_____(1)_____

MEMBER NAME_____(1)_____ NUMBER_____(1)_____

GROUP NAME_____(1)_____ NUMBER_____(1)_____

EFFECTIVE DATE_____(2)_____ EXPIRATION DATE(3)___

EXPLANATION OF HOLD:

(4)

SIGNATURE OF PERSON REQUESTING HOLD___(5)_____ DATE_____(5)_____

DEPARTMENT MANAGER SIGNATURE_____(6)_____ DATE _____(6)_____

Original to:_____(7)_____

xc: ☐ **Provider File**
☐ **Member File**
☐ **Group File**