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HEALTH ECONOMICS & REIMBURSEMENT

Prior Authorization and Appeal Tool Kit for Tricuspid Transcatheter Edge-to-Edge Repair (TEER)

This Tool Kit is designed to help your office with the process of confirming insurance coverage, submitting a prior authorization (Prior Auth) request for your patients, or appealing denials.

A Prior Auth must be obtained for Medicare Advantage and third-party commercial insurance plans. Medicare Fee-For-Service (FFS) does not require a Prior Authorization.

The "tools" enclosed in this package will assist you in identifying specific information to submit a prior authorization form or appeal a case and include the following documents:

- Checklists to guide you on the coding and documentation requirements
- Sample Letter of Medical Necessity
- Sample Letter of Appeal

SUBMISSION PROCESS

The following is a reminder of the key steps involved when submitting a Prior Auth or appeal request. Please check your patient's insurance benefits for Prior Auth and appeal requirements before submitting a request. This information is subject to change.

Please **DO NOT** include this form in your submission to the payer.

	SUBMISSION PROCESS STEPS	SPECIFICATION	DONE?
1	**Obtain Patient-Specific Information**	• Collect patient information and the consent release form • Collect benefit plan information (plan type, insurance number, copy of card(s), etc.) • Gather patient-specific clinical documentation (e.g., diagnosis code(s), relevant history, and physical to include symptoms and pertinent findings)	☐
2	**Verify Benefits**	• Contact your patient's medical benefits administrator or Medicare Administrative Contractor (MAC) to verify benefits and out-of-pocket costs • Verify payer Prior Auth and medical policy requirements • Verify the physician/facility network contract status	☐
3	**Submit Request**	• Using the information above, submit the prior authorization request to the payer • Submit a letter of medical necessity and attach requested clinical documentation as needed (**find a sample medical necessity letter template here**) • Create a follow-up alert after submission	☐
4	**Follow up**	• Routinely follow up and document your phone calls and interactions (the date, time, name of the contact person, and the call reference number) • If approved, document the approval number and date range for the authorization	☐
5	**Appeal (if needed) ***	• Make sure the physician and patient are willing to appeal the denial • Request a copy of the request denial in writing • Contact the benefit administrator or MAC to determine the appeal process • Attach requested documentation to the appeal form and submit. You can also submit a patient-specific appeal letter (**find a Sample Appeal Letter here**) • Follow up with the benefit administrator for final coverage decision	☐

**Appeals may be needed for a prior auth denial (pre-treatment) or a post-treatment claim denial*

ADDITIONAL PRIOR AUTHORIZATION AND APPEAL SUPPORT

Should your office need any additional reimbursement support materials or have any questions about the prior authorization or appeal process for your patients, please contact the Abbott support teams:

- For timely support with **prior authorizations, denials, and pre-procedure appeals**, please contact the **Patient Therapy Access (PTA)** team. PTA specialists support prior authorization and pre-procedure appeal processes for Medicare Advantage and private payers on behalf of your patients. PTA specialists are available to your patients regardless of provider.
  - Email: PTA_Cardiac@abbott.com
  - Phone: **(877) 706 - 7246**

- For Tricuspid TEER-specific coverage, coding, or payment questions, please contact our **Health Economics and Reimbursement Field Team**:
  - Email: AbbottEconomics@abbott.com

- For general reimbursement inquiries, please contact the **Abbott Reimbursement Hotline**:
  - Hotline: **(855) 569 - 6430**
  - Email: ReimbursementHelp@abbott.com

IMPORTANT POINT TO REMEMBER:

- Prior authorization approval process generally takes around **30 days**; however, it can take longer in some cases.

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