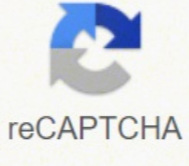
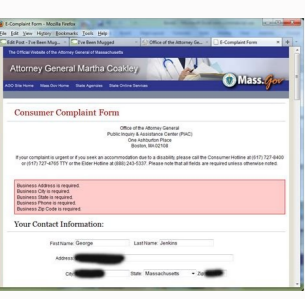




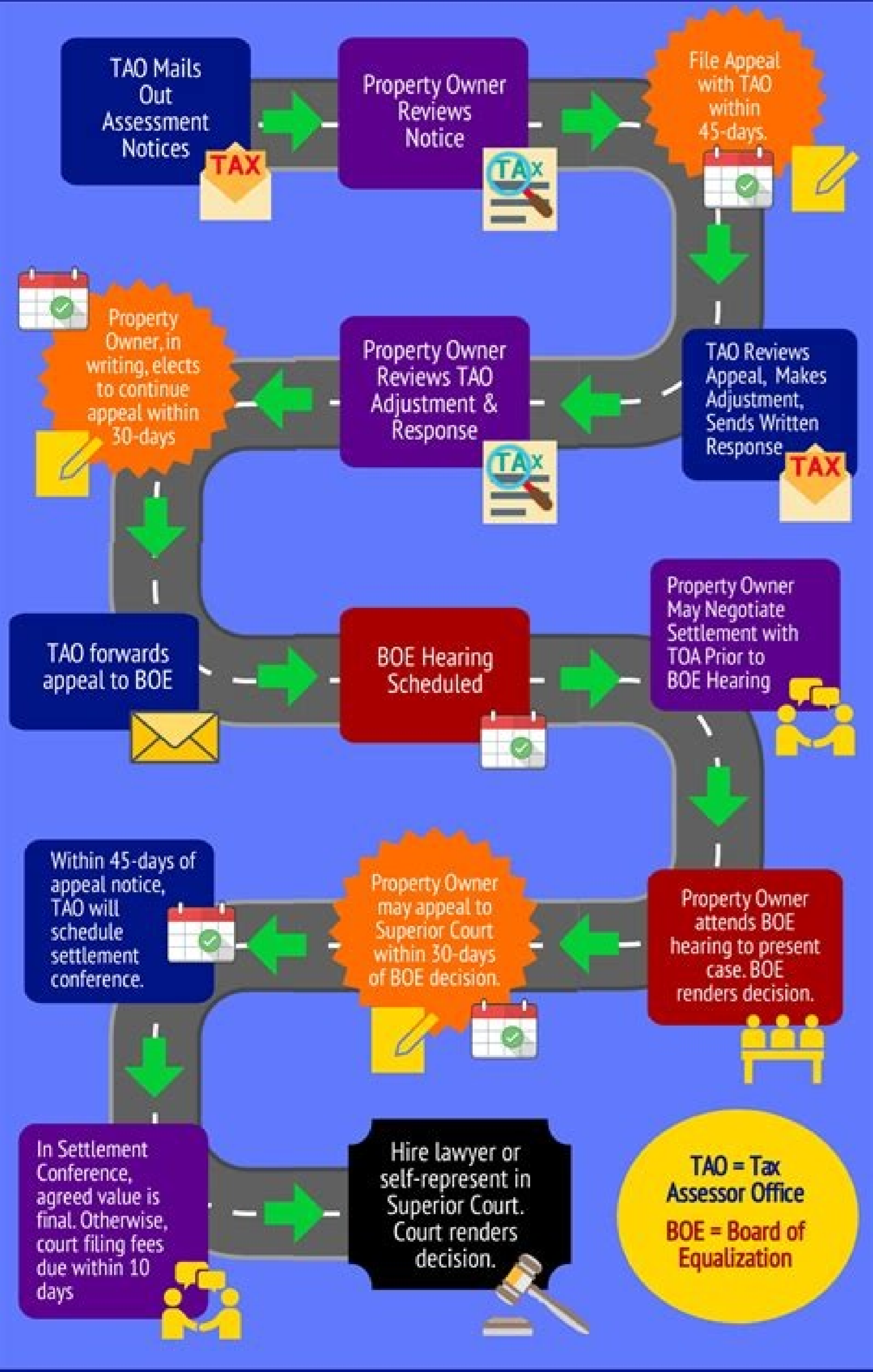
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# OVERVIEW OF GEORGIA TAX APPEAL PROCESS (BOE)

Infographic designed by: Matthew Chan (2020)

Disclaimer: This infographic is for informational purposes only and not a replacement for professional, expert, or legal advice.

[GeorgiaTaxAppealInfo.com](http://GeorgiaTaxAppealInfo.com)

All BRCA tests require precertification. Failure to complete this form in its entirety may result in the delay of review. Effective, August 25, 2016, this form replaces all other BRCA precertification information request documents and forms.

Once completed, this form contains confidential information. Only the individual or entity it's addressed to can use it. If you're not the intended recipient, or the employee or agent responsible for delivering the form to the intended recipient, you can't disseminate, distribute or copy the completed form. If you received the completed form in error, call us at 1-877-794-6728.

#### How to fill out this form

As the patient's attending physician, you must complete all sections of the form. You can use this form with all Aetna health plans, including Aetna's Medicare Advantage plans. You can also use this form with health plans for which Aetna provides certain management services. This includes Innovation Health Plan, Inc., and Innovation Health Insurance Company.

#### When you're done

Once you've filled out the form, fax it and all requested medical documentation to us at 1-888-875-9128. Or you can submit the completed form and the specimen sample to one of our network BRCA testing laboratories listed below. Then they'll submit the form to us.

- **Quest Diagnostics, Inc.:** Fax the precertification form to 1-888-422-5191. Call BRCAVantage Concierge Services at 1-888-436-3463 or visit [www.brcavantage.com](http://www.brcavantage.com) for more information.
- **Amniy Genetics:** Fax the precertification form to 1-888-969-5501. Order collection and transportation kits from by calling 1-888-263-7343 or online at [www.amniygen.com](http://www.amniygen.com).
- **GeneDs, Genpath, Skoliference:** Fax the precertification form to 1-201-421-2018. If you have any questions call 1-888-728-1206 or visit [www.geneds.com](http://www.geneds.com).
- **Invitae:** Fax the precertification form to 1-415-276-4154. If you have any questions, call 1-800-435-3037 or email [clia@services@invitae.com](mailto:clia@services@invitae.com) or visit [www.invitae.com/brca-request-a-kit](http://www.invitae.com/brca-request-a-kit)
- **Mirriad Genetics Laboratories, Inc.:** Fax the precertification form to 1-881-884-3615. If you have questions, call 1-888-688-7423.
- **Medical Diagnostic Lab, LLC:** Fax the precertification form to 1-889-876-1682. If you have questions, call 1-877-269-0690 or visit [www.molab.com](http://www.molab.com).
- **Counsyl:** For more information, call 1-888-COUNSYL (1-888-388-6795), send an email to [support@counsyl.com](mailto:support@counsyl.com) or visit [www.counsyl.com](http://www.counsyl.com).
- **Dynacore Northwest, Inc. (for members living in the states of Washington or West Virginia only):** Submit the precertification form with specimen sample to Dynacore Northwest, Inc. If you have questions about testing, call 1-800-533-6667. If you have questions about insurance, billing or precertification call 1-877-415-0662.

#### What happens next?

Once we receive the requested documentation, we'll perform a clinical review. Then we'll make a coverage determination and let you know our decision.

#### How we make coverage determinations

For our Medicare Advantage members, we use CMS benefit policies, including national coverage determinations (NCD) and local coverage determinations (LCD) when available, to make our coverage determinations. If there isn't an available NCD or LCD to review, then we'll use the Clinical Policy Bulletin referenced below to make the determination.

For all other members, we encourage you to review **Clinical Policy Bulletin #237: BRCA Testing, Prophylactic Mastectomy, and Prophylactic Oophorectomy** before you complete this form. You can find the policy by visiting the website on the back of the member's ID card.

Aetna (the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company and its affiliates (Aetna), Innovation Health Insurance Company and Innovation Health Plan, Inc. (Innovation Health) are affiliates of Aetna Life Insurance Company (Aetna) and its affiliates. Aetna and its affiliates provide certain management services for its affiliates.

Bchs of georgia appeal form.

The appeal may be lodged by the member or his/her authorised representative, doctor, facility or other healthcare provider. This is a different procedure from the procedure for requesting review described above. The following is a brief description of the various categories of appeal made by members. Written or oral authorization of the member shall be required, except for urgent appeals. The doctor or facility can request a quick appeal by calling the number on the back of the member's ID card. For suppliers who are required to submit a claim review request in paper form, one of the claim review forms listed below shall be used. Commercial Appeals For more information regarding appeals to the Government Program, please refer to the applicable vendor manuals. The medical/clinical peer review process lasts 30 days and ends with the written notification of the appeal decision. The following information does not apply to Medicare Advantage and HMO indications. It can be pre-service or post-service. Examples of medical remedies, pharmacies or wellness include, but are not limited to, adverse actions such as: Medical complaints Denials Surgical procedure Denials prescription prior authorization Denials of credit for wellness incentives To initiate a medical, pharmacy or wellness appeal, contact the appropriate administrator using the contact details provided. on the back of your ID card, the contact details available on the SHBP website, or by contacting SHBP Member Services at 800-610-1563 and selecting the prompt to connect to your administrator. Most of the provider's requests for redress are linked to the length of stay or the definition of refusal of treatment. Participating suppliers should refer to their agreement with participating suppliers and to the applicable for information on specific suppliers' complaints or redress rights. Non-participating suppliers may refer to the information on the No Surprises Act. It can be pre- or Review is conducted by a non-medical appeal committee. It is provided as a general resource to providers regarding the types of claim reviews and appeals that may be available for commercial and Medicaid claims. Each Claim Review Form must include the BCBSIL claim number (the Document Control Number, or DCN), along with the key data elements specified on the forms. A non-clinical appeal is a request to reconsider a previous inquiry, complaint or action by BCBSIL that has not been resolved to the member's satisfaction. Therefore, these types of appeals are outside the scope of eligibility and enrollment appeals handled directly by SHBP through the Tier I Telephone Review and Tier II Formal Appeals Process. Urgent care or expedited appeals may be requested if the member, authorized representative or physician feels that non-approval of the requested service may seriously jeopardize the member's health. Relates to administrative health care services such as membership, access, claim payment, etc. Review is conducted by a physician. Appeals may be initiated in writing or by telephone, upon receipt of a denial letter and instructions from BCBSIL A routing form, along with relevant claim information and any supporting medical or clinical documentation must be included with the appeal request. A clinical appeal is a request to change an adverse determination for care or services that were denied on the basis of lack of medical necessity, or when services are determined to be experimental, investigational or cosmetic. A provider appeal is an official request for reconsideration of a previous denial issued by the BCBSIL Medical Management area. Requesting a Claim Review After adjudication, additional evaluation may be necessary (such as place of treatment, procedure/revenue code changes, or out-of-area claim processing issues). SHBP has delegated full responsibility for claims administration including medical, pharmacy .snoitpo .snoitpo nalp eracideM-non laicremmoC erachtlaeHdetinU dna mehtnA rof eracerahS .rotartsinimda ssenllew dna ;krameraC SVC ,reganam stifeneb ycamrahp ruo ;erachtlaeHdetinU dna ,etnenamreP resiaK ,dleihS eulB dna ssoC eulB mehtnA ,srotartsinimda smialc lacidem ruo ot slaepa ssenllew

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