Incomplete PA Requests

When Dell Children's Health Plan receives a prior authorization request for service and the request does not contain complete clinical information or documentation the Plan will:

- Notify the requesting provider and member, in writing, of missing information no later than 3 business days after the prior authorization (PA) request receive date.
- Dell Children's Health Plan may contact the provider by telephone to obtain the information necessary to resolve the incomplete PA request.
- If the Plan does not receive the requested information by the end of the 3rd business day from the date the notice was sent to the requesting provider, the PA request will be sent to the Plan's medical director for review, no later than the 7th business day after the PA receive date.
- Dell Children's Health Plan will make a decision no later than the 10th business day after the request receive date.
- Dell Children's Health Plan's written request for additional information shall include the following:
 - A statement that the Plan has reviewed the PA request and is unable to make a decision about the requested services without the submission of additional information.
 - A clear and specific list and description of missing/incomplete/incorrect information or documentation that must be submitted in order to consider the request complete.
 - An applicable timeline for the provider to submit the missing information.
 - Information on the manner through which a provider may contact the Dell Children's Health Plan.