## When Genetic Testing is Denied: Appeal Guidance for Providers

At Seattle Children's, we help patients get the right genetic testing at the right time and get testing covered. This helps protect the family and the institution from financial liability.

We strongly recommend appealing all genetic test denials, when possible. We must exhaust all authorization options, including appealing a denial, prior to directing the family to apply for Seattle Children's Hospital financial assistance to cover the test.

In all cases, please carefully review the denial letter. This can be found under the Media tab or linked within the preauthorization request referral notes (Referrals tab  $\rightarrow$  referral to "Laboratory") in Epic. Step-by-step directions below.\*

A Letter of Medical Necessity template for genetic testing appeals can be found in the online lab test catalog: <u>https://seattlechildrenslab.testcatalog.org/catalogs/185/files/13519</u>

Denial Reason	What This Means for You	What You Can Do Next
Not Medically Necessary: Genetic testing is a covered benefit, and the payer has a specific coverage policy, but the payer assessed that the patient does not meet their coverage criteria.	This type of denial is the most likely to be overturned, if the patient meets the specific coverage criteria. Goal of the appeal is to provide any missing elements or additional information to support how your patient meets the policy.	<ul> <li>Review the insurance payer policy used in the denial letter, if provided.</li> <li>Submit a letter explaining why your patient meets the payer criteria or why your patient's case is exceptional.</li> <li>Focus on your patient's specific situation. Generally, insurance payers want to know how testing will affect the patient, not about the technical validity of the test.</li> </ul>
<b>Investigational/Experimental:</b> The payer either does not have a coverage policy for the test, or their policy states that this test is not covered.	This type of denial is unlikely (but not impossible) to be overturned. Goal of the appeal is to push the payer to update their policy, even if unlikely to affect this specific patient.	<ul> <li>Submit a letter simply reiterating the medical necessity rationale in your clinic note and ask for an exception to the insurance payer policy for your patient.</li> <li>Prepare the family for the financial assistance process.</li> </ul>
<b>Non-Covered Benefit:</b> The plan does not include coverage for genetic testing.	This type of denial cannot be appealed.	<ul> <li>Proceed to working with the family on the financial assistance process.</li> </ul>

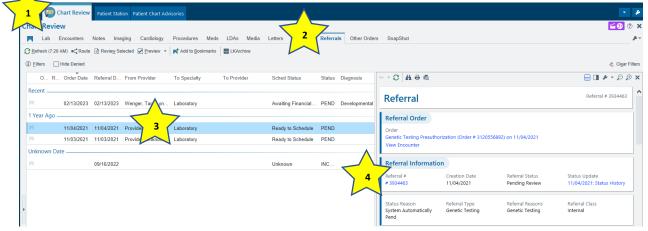
<b>Out-of-Network:</b> The plan may cover genetic testing, but only at specific labs. Seattle Children's may not be in-network for all plans.	This outcome generally cannot be appealed.	✓ ✓	If possible, refer the patient to a provider or institution that is included in their insurance network. The family can call their insurance company directly to determine the options included in their plan. SCH Financial Assistance policy does not cover services that can be provided by an alternate provider within a patient's insurance network and have not been approved by that insurance to be provided at Seattle Children's. (1)
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Additional background on the denials and appeals process can be found on the Laboratory Stewardship page of the online lab test catalog: <u>https://seattlechildrenslab.testcatalog.org/show/1293582188</u>

## \*How to Access the Denial Letter in Epic:

From within the patient's chart:

- 1. Chart Review
- 2. Referralstab
- 3. Referral to specialty Laboratory
- 4. Click the hyperlinked referral # to open the referral
- 5. Communications section of the referral
- 6. Find the note with the denial letter linked (hint: look for the paperclip icon)
- 7. Click Preview to open the attachment and review the denial letter



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## **References:**

1. Seattle Children's Financial Assistance policy 10226: https://seattlechildrens.policystat.com/policy/10750766/latest/