



Troy Medicare Policy and Procedure

Title: Declaration of Disaster or Emergency			Policy Number: UM-001
Primary Department: Utilization Management	LOB: Medicare Advantage and DSNP		Author: J Murphy
Effective Date: 11/1/2022	Original Date: 11/1/2022	Review Date(s): 4/26/2023, 12/7/2023	Archive Date:
Interactive Related Department(s)			
<input type="checkbox"/> All Departments <input type="checkbox"/> Compliance <input checked="" type="checkbox"/> Medical Management <input type="checkbox"/> Provider Operations <input type="checkbox"/> Sales and Marketing	<input type="checkbox"/> Appeals and Grievances <input type="checkbox"/> Pharmacy <input type="checkbox"/> Member Services <input type="checkbox"/> Quality Management <input type="checkbox"/> Utilization Management	<input type="checkbox"/> Care Management <input type="checkbox"/> Enrollment <input type="checkbox"/> Plan Administration <input type="checkbox"/> Claims <input type="checkbox"/> Other _____	

Disclaimer: Troy Utilization Management applies CMS criteria and guidelines, National Coverage Determinations (NCD), Local Coverage Determinations (LCD), Troy Policies, and MCG for determining medical necessity. Troy Health Policies are intended to provide a standard guideline but are not used to preempt providers' judgment in rendering services. Providers are expected to provide care based on best practices and use their medical judgment for appropriate care.

POLICY PURPOSE

The purpose of this policy is to state Troy Medicare's policy in the event of an unforeseen disaster or emergency declaration by the President of the United States or the State Governor in order to support members in finding medical care during an emergency. This policy establishes Troy Health's guidelines for emergency operations and business continuity.

Troy Health, Inc. is committed to complying with all regulations and requirements for Medicare Advantage Plans, and applicable federal and state laws.

SCOPE

This policy applies to all employees in Medical Management and Care Management at Troy and members impacted by a system outage.

REFERENCES

- [42 CFR 422.100\(m\)\(1\)](#)

RESPONSIBLE PARTIES

- Vice President of Health Services
- Chief Medical Officer

POLICY

In the event of a system outage, support will be provided to members and authorization requirements will be lifted during the outage time period.

- Part A, Part B, and supplemental Part C plan benefits are to be provided to members at specified non-contracted facilities (note that Part A and Part B benefits must be obtained at Medicare-certified facilities)
- The 30-day notification requirement to members is waived, as long as all the changes (such as reduction or cost-sharing and waiving authorization) benefit the member.

PROCEDURE

In the event of a UM system outage, providers will be notified when the outage occurs and continuously communicate updates throughout the resolution of the issue. Providers and members will be informed when the UM system is operational and normal activity resumes. If CMS (Centers for Medicare and Medicaid Services) hasn't provided an end date for the disaster or emergency, plans will resume normal operation 30 days after the initial declaration.

ATTACHMENTS/RELATED POLICIES/STANDARD OPERATING PROCEDURES

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APPROVALS

Jen Murphy

Vice President, Medical Management

12 / 27 / 2023

Date

S. Scott

Utilization Management Committee

12 / 22 / 2023

Date

Revision History

Revision Date	Revised by Whom	Revisions Made
10.3.2022	J Terrell	Initial policy
4.26.2023	J Murphy	Review by Policy Committee
12.7.2023	J Murphy	Annual review by Utilization Management Committee