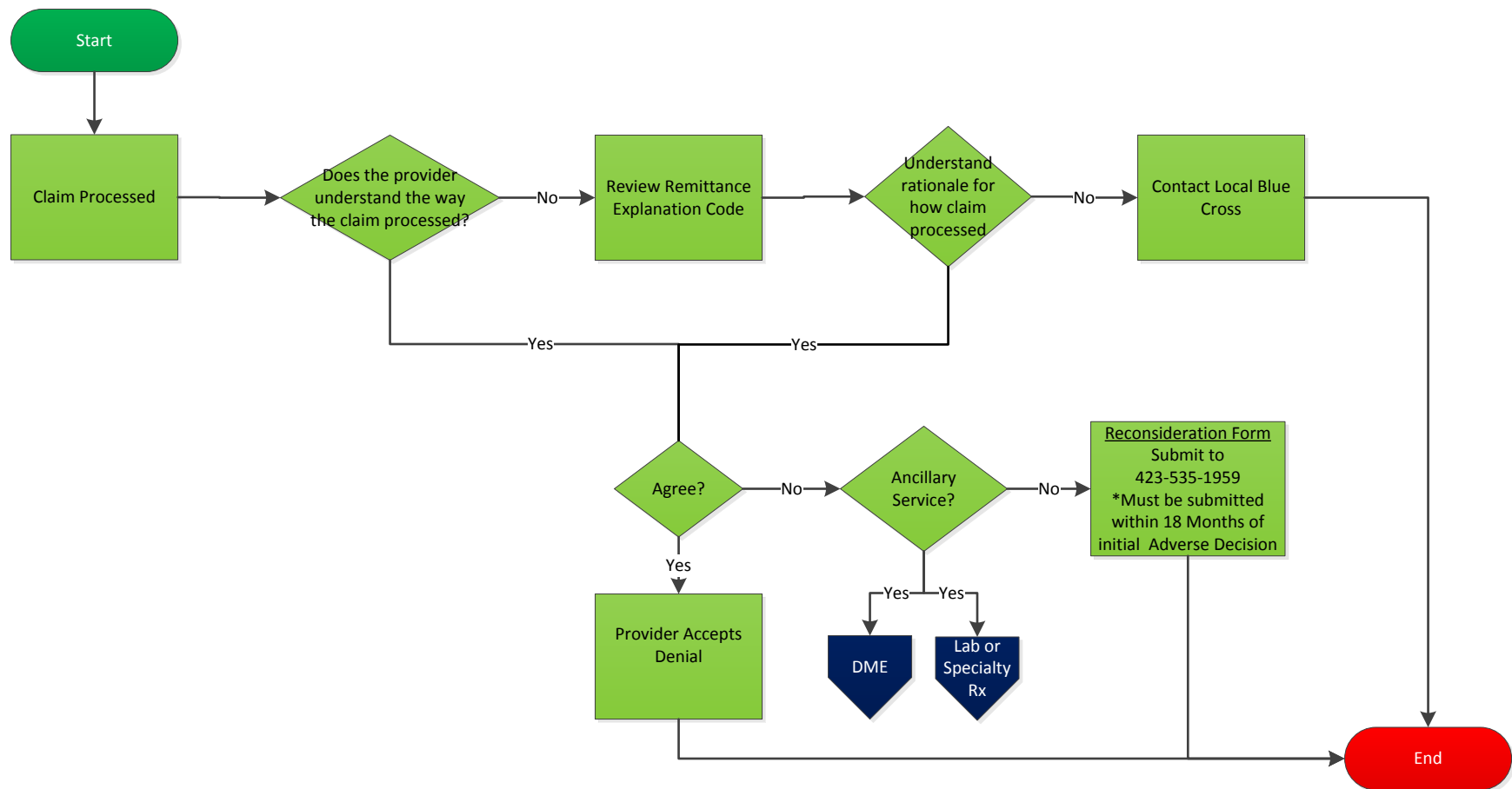


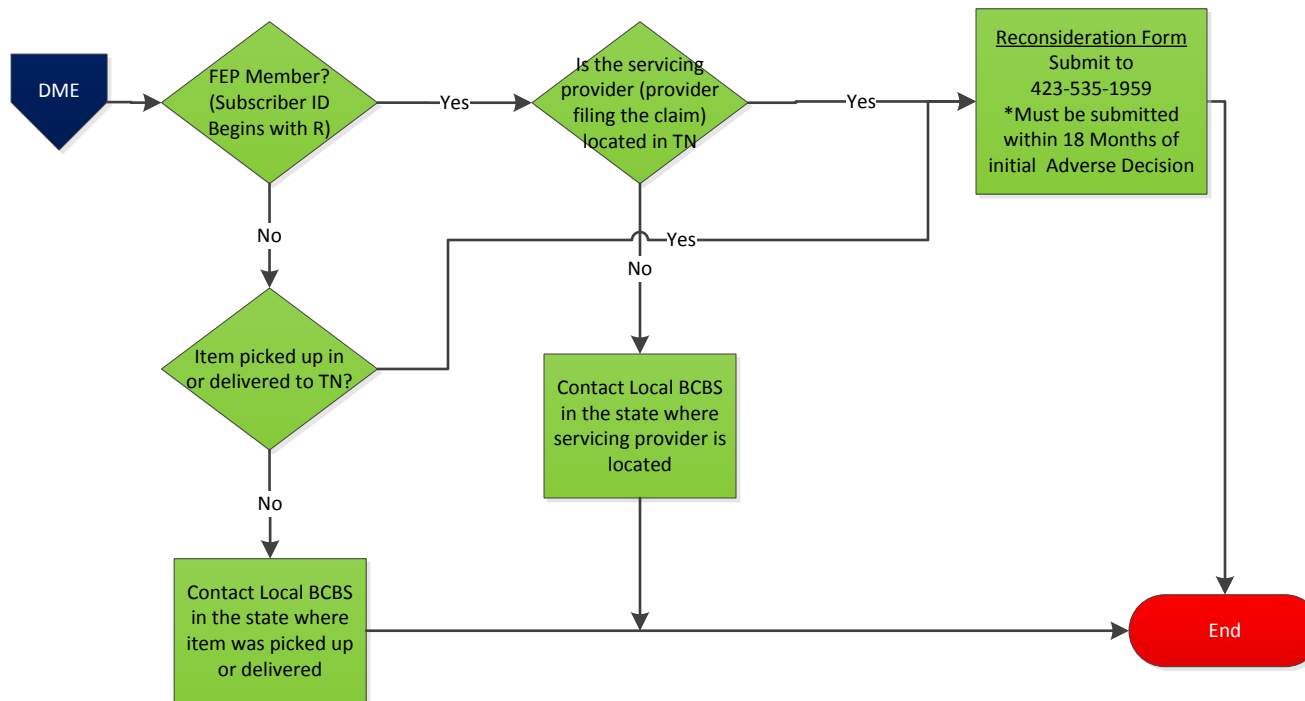
# Claim Reconsideration

## NOTE:

- Authorization reconsiderations are optional and occur before or during services.
- For **non-Tennessee members** when services have already been rendered, the reconsideration process is required prior to the appeals process (if no service has been rendered-work with member's plan).
- If, during the claim reconsideration review, it is noted the determination was related to a denied authorization; the timeline for appeal would begin from the initial authorization denial (See timeliness grid).



# Claim Denial Ancillary DME Services



# Claim Denial Ancillary Lab/Specialty Rx Services

