

## Medical Record Requirements for Retrospective Review for Covered Services

The needed documentation list below will assist Banner – University Health Plans (B – UHP) staff in processing your retrospective review requests timely without the need of requesting more documentation from you during the review period.

		If the service you are requesting approval for, requires a prior authorization to be paid, please explain why authorization was not completed prior to the service being provided.	
	Соруо	by of Denial letter sent to you from B – UHP- if service denied	
	Legal documentation of Court Ordered Evaluation along with dates of initiation and completion of the court ordered period.		
	Certificate of Need (CON) for Psychiatric Retrospective Review		
	Medical Records: (please do not send complete medical chart- only provide information pertinent to the requested service)		
		Recent progress notes	
		Recent Diagnostic Tests (imagery, labs, procedures)	
		Current medication/medication history	
		Current Treatment Plan	
		Current therapy notes	
	Behavioral Health Residential Facility (BHRF) that utilized Substance Abuse Block Grants can submit for retrospective review once they identify the member is now on Medicaid/BUHP.		
Retrospective Reviews and supporting documentation/medical records should be directly submitted to B – UHP claims department via mail or claim resubmission: (Please mark claim as 'resubmission' if applicable)			
Banner – University Family Care / AHCCCS Complete Care (B – UFC/ACC)			

PO Box 35699 Phoenix, AZ 85069-7169

Electronic ID: 09830

## Banner – University Family Care / Arizona Long Term Care (B – UFC/ALTCS)

PO Box 37279

Phoenix, AZ 85069-7169 Electronic ID: 66901

## Banner - University Care Advantage (B - UCA)

PO Box 38549

Phoenix, AZ 85069-7169 Electronic ID: 09830 (UCA)

## **APPEALS**

Banner – University Health Plans

Attn: Grievance and Appeals Department

2701 E. Elvira Tucson, AZ 85756

Fax: 866-465-8340

Email: BUHPGrievances&Appeals@bannerhealth.com