

**DHS MEDI-CAL MANAGED CARE DIVISION
DOCUMENT REVIEW APPROVAL FORM**

TO: Danita Carlson, Government Relations Director
Central California Alliance for Health

DATE: May 22, 2013

RE
Title: 404-1101 – Utilization Management Program

COUNTY: Santa Cruz /Monterey/Merced

REVIEWER: Marilou Rosas, RN/NEII

UNIT: MMU

REVIEW COORDINATOR: JANE MARINE

TELEPHONE: (916) 449-5113

FINDINGS:

APPROVED AS SUBMITTED:

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By: Ann Silvia
Ann Silvia, Chief
County Organized Health System

PENDED (EXPLANATION BELOW):

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ADDITIONAL INFORMATION REQUESTED

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SUBMIT TO DHS BY (DATE): _____

SUBMIT TO: *For US Postal Service Mail:*

For Courier Deliveries (UPS, FedEx, etc.):

To: Jane Marine
CA Department of Health Services
Medi-Cal Managed Care Division
Mail Stop 4400
P.O. Box 997413
Sacramento, CA 95899-7413

To: Jane Marine
CA Department of Health Services
Medi-Cal Managed Care Division
Mail Stop 4400
1501 Capitol Avenue, Suite 71.4040
Sacramento, CA 95814-5005

REVIEW FINDINGS: POLICY #404-1101 – UTILIZATION MANAGEMENT PROGRAM

RESOURCES USED: DHCS CONTRACT, ATTACHMENT A, PROVISION 1
H&S CODE 1363.5(A) (B)

COMMENTS:

PLEASE INCLUDE PROVISIONS FOR THE SEPARATION OF MEDICAL DECISIONS FROM FISCAL AND ADMINISTRATIVE MANAGEMENT TO ASSURE MEDICAL DECISIONS WILL NOT BE UNDULY INFLUENCED BY FISCAL AND ADMINISTRATIVE MANAGEMENT AS OUTLINED IN DHCS CONTRACT ATTACHMENT A, PROVISION 1B.