



Louisiana Department of Health and Hospitals

Health Plan Advisory 13-9

June 11, 2013

Continuation of Benefits

The Department of Health and Hospitals is providing the following clarification of Bayou Health policy regarding continuation of benefits pending resolution of an appeal or fair hearing:

A member is only entitled to a continuation of benefits when a previously authorized benefit is terminated, suspended, or reduced prior to the expiration of the current service authorization.

- Expiration of an approved number of visits does not constitute a termination for purposes of notice and continuation of benefits. The cessation of services because the authorization expired is not cause for a continuation of benefits, since the enrollee had no right to expect the services to continue beyond the “previously authorized” quantity, period, or duration.
- Likewise, when a prescription (including refills) runs out and the enrollee requests another prescription, this is a new request, not a termination of benefits. In these circumstances, the MCO or PIHP would not need to send a notice or continue benefits pending the outcome of an appeal or State fair hearing. If the enrollee requests a reauthorization that the MCO or PIHP denied, the MCO or PIHP must treat this request as a new request for service authorization and provide notice of the denial or limitation.

Federal guidance related to this topic can be located at 67 CFR 40989, 41058 (June 14, 2002)