



**Arkansas Statistics for CareCentrix, Inc. - Commercial Plans**

**1st Quarter 2017 Prior Authorization Determinations**

|  | Service Category        | Diagnosis                                | Procedure  | Determination | Denial Reason             |
|--|-------------------------|--|--|---------------|---------------------------|
|  | Therapeutic Home Health | CELLULITIS OF ABDOMINAL WALL             | RN VISIT   | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | HOME SLEEP TEST (HST) WITH TYPE II PORTABLE MONITOR; MIN 7 CHAN  | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | HOME SLEEP TEST (HST) WITH TYPE II PORTABLE MONITOR; MIN 7 CHAN  | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR; MIN 4 CHAN   | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR; MIN 4 CHAN   | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR; MIN 4 CHAN   | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR; MIN 4 CHAN   | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | Multiple sleep latency or maintenance of wakefulness testing   | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | Multiple sleep latency or maintenance of wakefulness testing   | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended | Approval      | N/A                       |
|  | Respiratory             | SNORING                                  | Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended | Approval      | N/A                       |
|  | Home Medical Equipment  | TYPE 1 DIABETES MELLITUS                 | PUMP, EXT INFUSION, MINIMED, INSULIN   | Approval      | N/A                       |
|  | Therapeutic Home Health | PRESSURE ULCER OF SACRAL REGION, STAGE 2 | RN CLINICAL ASSESSMENT, INITIAL  | Approval      | N/A                       |
|  | Therapeutic Home Health | PRESSURE ULCER OF SACRAL REGION, STAGE 2 | RN VISIT   | Approval      | N/A                       |
|  | Respiratory             | SLEEP APNEA, UNSPECIFIED                 | SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/RESPIRATORY EFFORT  | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/RESPIRATORY EFFORT  | Denial        | Lack of Medical Necessity |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/SLEEP TIME  | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/SLEEP TIME  | Approval      | N/A                       |
|  | Respiratory             | OBSTRUCTIVE SLEEP APNEA                  | SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/SLEEP TIME  | Approval      | N/A                       |
|  | Respiratory             | RECURRENT HYPERSOMNIA                    | SLEEP STUDY, UNATTENDED, MIN 4 CHAN, W/SLEEP TIME  | Approval      | N/A                       |
|  | <b>Total Q1 2017</b>    |  |  | <b>21</b>     |                           |