



Kansas Insurance Commissioner **Vicki Schmidt**

Independent Medical Review

April 14, 2023



The Kansas Insurance Department

- Established in 1871
- State regulator of insurance and securities
- Our mission: Regulate, Advocate, Educate



Consumer Assistance Division

- First responders for insurance and securities complaints and inquiries when a consumer has an issue
- Evaluation and review of complaints by company to identify patterns with claims practices
- **Independent Medical Review**



Independent Medical Review (IMR)

- Established in K.S.A 40-22a
- Option for a patient to contest a decision by their insurer
- Specific eligibility requirements
- Non-biased review
- No cost to the patient
- 2022 total reviews: 161
- Reviews resulting in a reversal: 72



Eligible claims

- Insured with a health claim that was **denied** by an insurance company for any of the following reasons:
 - **Experimental procedure**
 - **Investigational**
 - **Medically unnecessary**
- Must have gone through insurance's company's appeal process
 - Expedited process available if an appeal would delay urgently needed care



Claims NOT eligible

- Medicaid, Medicare, or Medicare supplement plans
- Federal employee plans
- Workers compensation
- Self-insured employer plans



How to apply

- Insured **must** go through their insurance company's appeals process first
- 120 days from the final denial to request a review
- Contact the Department at 800-432-2484 to request a form
- Submit to the Department a completed IMR request form and:
 - A letter summarizing the dispute
 - Related medical records
 - Any other supporting documentation

Review process

- Department will review the submitted request to determine if the request is eligible
- Will determine eligibility of a request within 10 days
- If approved the request is submitted to an independent review organization
- Independent review organization receives and reviews the dispute



Next steps

- Written decision by the review organization will be issued within 30 days
- If **overturned**, the insurance company must pay for the treatment
- If **upheld**, the decision is final—but insured can still appeal through the court system

Case Example #1 - Overturned

A family requested an IMR for the denial of a genetic testing due to not being **medically necessary**. The family was contesting it was medically necessary as the family was attempting to conceive a child. The Department requested that the family submit medical records to support their position, but were reluctant to share their medical records with a third party. The Department acknowledged their concerns and reiterated how the review is unbiased but done by medical professional who would understand the records and maintain privacy. The family submitted the records to the Department, who in turn submits them to the insurance company first to ensure they have seen them. The insurance company **overturned** their own denial PRIOR to going to the IMR organization because those medical records had not been previously submitted.

Case Example #2 - Upheld

An IMR was requested for left hip arthroscopy and associated services as they were denied as not **medically necessary**. Submitted with the request was over 35 pages of medical records. The insurance company returned to the Department with over 120 pages of the insured's medical records along with documentation to support their position. The IMR determination came back indicating they were **upholding** the denial as they believed the medical records showed that the surgery would not provide relief as previous injections had not given them relief.

Case Example #3 - Overturned

A request for peroral endoscopic myotomy was denied as **experimental and/or investigational**. The insured provided roughly 50 pages of documents while the company provided over 252 pages. The IMR determination **overturned** the denial as they believed the request was not experimental and/or investigational due to recent and relevant peer literature.

What you can do as a provider

- Most IMR referrals to the Department come from providers
- You know your patients!
- Access to relevant medical records
- Patients don't always know what their options are



IMR Contacts

Consumer Main Line: 785-296-7829

Kansas only hotline: 800-432-2484

kid.webcomplaints@ks.gov



Contact Us



785-296-3071



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Thank you!

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