

Referrals and Precertifications/Prior Authorizations

Inpatient rehabilitation



Inpatient rehabilitation admission

Precertification is required no less than two business days prior to the planned date of admission.

Requests for precertification are the responsibility of the admitting participating provider.

Information required when requesting precertification

- Complete and submit the [Inpatient Rehabilitation Precert Worksheet](#) via fax to 570-271-5534. The form must be legible with all areas applicable to the admission completed. Illegible or incomplete worksheets may result in unnecessary denials.
- Participating providers are required to notify Geisinger Health Plan within one business day of an inpatient rehabilitation admission that occurred during non-business hours utilizing the same fax process explained above. The medical management department will complete a clinical review and authorize or deny the admission retrospectively, appropriate to the member's condition at the time of the admission.

Concurrent Review

- Participating providers are required to initiate concurrent review telephonically with the medical management department within one business day of an inpatient admission. Each inpatient admission is subject to the concurrent review process, including instances in which a case rate/MS-DRG may apply.
- During concurrent review, a determination of continued coverage and a subsequent assigned concurrent review date will be provided by the medical management department staff. The following information will be discussed during the initial concurrent review:
 - 1) Current inpatient care needs
 - 2) Plan of care
 - 3) Overall goals and anticipated length of stay (if known)
 - 4) Discharge planning

Geisinger Health Plan, Geisinger Indemnity Insurance Company and Geisinger Quality Options, Inc. are collectively referred to as "GHP" in this summary.

All rights, duties and responsibilities of participating providers will be applied according to the following document order: 1) member's benefit document; 2) the participating provider's contract agreement, 3) the GHP Family Provider Guide; and 4) the Geisinger Health Plan Provider Guide.

Publication history: