Appeals Reviewed by an Independent Review Organization (IRO)

When services are denied, the member or provider may request that the service is submitted to an Independent Review Organization (IRO) for review and determination. If an IRO upholds the Molina decision, this means that services remain denied by Molina. If the IRO overturns the Molina decision, this means that the IRO decided to approve the service requested and the service will be approved by Molina. APS service codes outlined below are service groups for Inpatient authorization requests. Please refer to <u>Pre-Authorization Statistic Abbreviation Guide</u> to view the descriptions of the APS abbreviations.

Service Code	Service Code Description	Upheld on IRO	Overturned on IRO	Total IRO Appeals
0037U	TRGT GEN SEQ ALYS SLD ORGN NEO	0	3	3
55874	TRANSPERINEAL PLMT BIODEGRADABLE MATRI 1/MLT NIX	3	0	3
58550	LAPS VAGINAL HYSTERECTOMY UTERUS	1	0	1
58552	LAPS W/VAG HYSTERECT 250 GM/ and RMVL TUBE and /OVARIES	2	0	2
62323	NJX DX/THER SBST INTRLMNR	2	0	2
63655	LAM IMPLTJ NSTIM ELTRDS PLATE/PADDI E EDRI	2	0	2
63685	INSJ/RPLCMT SPI NPGR DIR/INDUXIVE	2	0	2
64568	OPEN IMPLANTATION CRANIAL NERVE	2	0	2
64582	OPEN IMPLTJ HPGLSL NRV NSTIM RA	1	0	1
72141	MRI SPINAL CANAL CERVICAL W/O	4	0	4
72158	MRI SPINAL CANAL LUMBAR W/O and W/CONTR MATRI	3	0	3
74178	CT ABDOMEN and PELVIS W/O	2	0	2
99221	1ST HOSPITAL IP/OBS CARE SF/LOW	1	0	1
APS	MRI Upper Extremity Joint	2	0	2

IRO Appeal Grand Totals		100	6	106
	MISCELLANEOLIS			
E1399	DURABLE MEDICAL EQUIPMENT	3	0	3
APS	OB - Normal Vaginal	2	0	2
APS	Nuclear Medicine Cardiology	2	0	2
APS	MRI Lumbar Spine	2	0	2
APS	MRI Cervical Spine	1	0	1
APS	Medical - Pediatrics	3	3	6
APS	Medical	44	0	44
APS	LTAC - Level 1	2	0	2
APS	Intermediate ICU	3	0	3
APS	Tele/Sac	2	0	2
APS	Surgical	6	0	6
APS	Rehab - Level 1	3	0	3