



***Network Notification***

**Date:** September 22, 2017  
**To:** CareSource Ohio Medicaid and MyCare Ohio Health Partners  
**From:** CareSource  
**Subject:** Clinical Appeals Require Member Consent

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As a reminder to our health partners, Ohio Administrative Code (OAC) requires any provider acting on the member's behalf to have the member's written consent to file an appeal.

All pre-service appeals requested by a provider will require member written consent to be processed. The consent must be specific to the service being appealed, is only valid for that appeal and must be signed by the member. Appeals meeting this criteria will be processed using the member appeal decision timeframe.

OH-SP-0102