

**McLaren Health Plan**  
**Provider Network Update · Special Edition**  
**August 15, 2024**

As we continue to navigate the impact to our operations due to the cyber-attack, we are making progress restoring our systems and services. Below is an update on key items:

**Customer Service**

The McLaren Health Plan Member and Provider Call Center is operational, although they may not have access to all systems, they can provide assistance and direction.

**McLaren Connect Provider Portal**

The McLaren Connect Provider Portal is still available, you may check the portal for eligibility, benefits, and claim status.

**\*Pre-Authorization Requests**

**8/15/2024 Update:** Effective for DOS beginning 8/16/2024 and after, all inpatient hospital, NICU, LTAC, inpatient rehab, and SNF stay authorization requirements have been reinstated. Continue to fax clinical documentation to 855-377-3653. For Hospital stays, greater than 48 hours, you may fax authorization requests and clinical documentation to 855-377-3653. All hospital inpatient stays for McLaren Health Plan Medicaid members less than 48 hours are considered observation. Hospital observation stays do not require prior authorization or submission of clinical documentation.

The time period for the temporary waiver of authorizations for all lines of business for inpatient hospital, NICU, LTAC, inpatient rehab, and SNF stays was only for DOS 8/3/2024 – 8/15/2024.

Outpatient authorization requirements are still in place. Outpatient authorization requests may be faxed to 855-377-3653. Providers will be notified verbally of auth decisions by Medical Management staff. We reserve the right to retrospectively review cases for medical necessity. If you have any questions, please contact Customer Service at 888-327-0671.

**\*Claims Submission and Adjudication**

At this time, we are unable to receive any inbound claims files or access our claims adjudication system.

**8/15/2024 Update:** If you are submitting claims to us electronically, they are currently being held and will be released to us as our claims adjudication system becomes available. Please do not send paper claims, continue to submit claims electronically.

**Pharmacy Services**

MedImpact, our Pharmacy Benefit Manager, is fully operational, pre-authorizations can be submitted and are being responded to, there is no disruption in services as it pertains to the pharmacy benefit.

As this situation evolves, we will continue to post updates on our website,  
[McLarenHealthPlan.org/Providers/Provider Communications/Provider Network Updates 2024](https://McLarenHealthPlan.org/Providers/Provider%20Communications/Provider%20Network%20Updates%202024).

Thank you for your patience and continued service to our members as we navigate this situation.