

Authorization Process Overview

High Level of Care Services

1. High Level of Care (HLOC) services include:
 - ❖ Urgent services: Inpatient, Acute Treatment Unit (ATU) and ASAM 3.7
 - ❖ Non-urgent services: Partial hospital program (PHP), intensive outpatient program (IOP), residential treatment (both QRTP and PRTF), ASAM 3.5, ASAM 3.3, ASAM 3.1 and ASAM 2.1.
2. All HLOC services require prior authorization for both in-network and out-of-network providers.



Lower Level of Care Services

1. Lower Level of Care (LLOC) services include:
 - ❖ High intensity treatment (HIT) services: high fidelity wraparound services, assertive community treatment (ACT), multi-systemic treatment (MST), functional family therapy (FFT), respite and case management
 - ❖ HIT services are high intensity, community-based programs that can serve as a step-down option for high-risk members discharging from HLOC services or can provide additional support to members struggling in routine outpatient services
 - ❖ PHP and IOP are also considered HIT services
 - ❖ Routine outpatient services
2. Routine outpatient services, FFT, community based wraparound services and case management do not require prior authorization for in-network providers.
3. ACT, MST and respite require prior authorization for all providers.



Requesting Authorizations

❖ In-network Providers

- ❖ Can submit all authorization requests via ProviderConnect.
 - ❖ Some HLOC are set to auto-approve when specific criteria are met.
- ❖ All urgent HLOC requests should include a tox screen/BAL results.
- ❖ ASAM requests should include full ASAM dimensions, tox screen/BAL results and treatment plan.
- ❖ Can check the request status and authorization through ProviderConnect and submit discharge clinical.
- ❖ If you would like training on using ProviderConnect, please contact ProviderRelations.

❖ Out-of-network Providers

- ❖ Can call our Access to Care lines to make urgent HLOC authorization requests.
 - ❖ NHP: 888-502-4189
 - ❖ HCI: 888-502-4185
- ❖ Clinical for non-urgent mental health HLOC requests can be faxed to 719-538-1439
- ❖ ASAM requests should be submitted on the SUD SCA Request Form and must include full ASAM dimensions, tox screen/BAL results and treatment plan.
- ❖ Outpatient requests must be submitted on the SCA Request Form and can be faxed to 719-538-1439 or emailed to Healthcolorado@Carelton.com for HCI members, Northeasthealthpartners@Carelton.com for NHP members



Retrospective Requests

- ❖ Retrospective requests apply when a member has discharged from HLOC services before an authorization request was submitted.
 - ❖ This can occur when a member's Medicaid eligibility is approved and backdated, the member is too gravely disabled to provide insurance information or the member gives incorrect information to the HLOC provider.
- ❖ Retrospective requests can be submitted via fax to: 1-855-378-8309 or via mail to: Carelon Behavioral Health, Attn: Colorado Claims, PO Box 1850, Hicksville, NY 11802
- ❖ LLOC requests are considered retrospective when they're submitted after the member has started services. These are submitted on the SCA form via fax to 719-538-1439.
 - ❖ LLOC requests can be backdated 30 days from the date the request is received. Requests received over 30 days from the start of services or last covered day may result in an administrative denial.



Turnaround Times

- ❖ Urgent HLOC requests: 24-72 hrs
- ❖ ASAM 3.5, ASAM 3.3 and ASAM 3.1 requests: 72 hrs
- ❖ ASAM Special Connections programs: 24 hrs
- ❖ Non-urgent HLOC requests: 10 days
- ❖ Outpatient requests: 10 days
- ❖ Retrospective requests: 30 days



Withdrawal Management Services

ASAM 3.2WM and 3.7WM do not require prior authorization unless the provider is out-of-network.

- ❖ In-network providers should register admissions to both levels of care via ProviderConnect.
- ❖ Out-of-network providers should submit the SUD SCA Form via fax
- ❖ Continued stay reviews are required for 3.2WM admission longer than 5 days and 3.7WM admissions longer than 4 days.
 - ❖ In-network providers can submit continued stay requests via ProviderConnect or fax.
 - ❖ Out-of-network providers should submit continued stay requests via fax on the SUD SCA Form.



Care Coordination Services

- ❖ Complex members, members that may benefit from help connecting to community services and providers or members that have frequently been moving between levels of care may benefit from care coordination services.
- ❖ Members can be referred for care coordination by contacting their RAE and requesting care coordination services.

Northeast Health Partners: 888-502-4186

Health Colorado: 888-502-4190

- ❖ Referrals can come directly from members or from a current provider.



Questions??

Thank you!

