

Waiver Tips 2011

Submission of Authorization Requests

Tips for Submission of Authorization Requests to UM

Submission of PCP: E-mail Label Instructions

Please label and email MH/SA plans to Utilizationm@pbhsolutions.org. Please label and email DD plans to DD-UM@pbhsolutions.org. Both are labeled with the first three initials of the consumer's last name and first initial of the first name along with County of Medicaid or Primary Residence if Non-Medicaid, age, specialty and primary service. For example:

Consumer information:

Donna Travis PCP (Updated PCP) Stanly County; Child; Mental Health; IIHS

Submit as:

MH/SA:

TRAD PCP Sta Child MH IIHS or TRAD Updated PCP Sta Child MH IIHS

DD:

TRAD PCP Sta Adult DD RS or TRAD Updated PCP Sta Adult DD RS

- Please label attached file(s) in e-mails to UM in the same manner. (Send all attachments in same e-mail; no separate e-mails for the same request.)
- If/when UM returns PCPs, ISPs/Updated PCPs, ISPs for corrections, please continue to re-forward these attachments once edited from the same e-mail trail.
- Please be sure to include your name and direct contact number for UM follow-up as needed. UM staff will also include their name in all e-mails. Main UM contact number for all calls: 704-939-7700. In the body of the e-mail, please be sure to include the corresponding Treatment Authorization Request (TAR) number.
- When submitting PCPs, ISPs / Updated PCPs, ISPs to UM, please ensure these are password protected. Please choose a specific password for your agency and use this password consistently across all services/staff. Once the password is decided for your agency, please notify UM of this password; we will save it for future submissions from your agency. (PBH Care Coordinators do not have to password protect their submissions.)
- Please note that UM will return PCPs, ISPs / Updated PCPs, ISPs in secured e-mails and each staff can set up his/her own password for opening these e-mails from UM staff.
- Do not submit information to a Care Manager's personal PBH e-mail in the event that this staff is currently out of the office. Submit any requests for services or questions to the UM mailbox e-mail identified above—unless otherwise directed by the Care Manager reviewing your request.

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TIPS when Completing your TAR:

- Correct Population: MH, SA, IDD.
- Treating clinical staff and contact # listed on the comments section of the TAR/submitted by page.
- Service and code are correct.
- Start and End dates must be actual days per authorization guidelines for the service(s) being requested. Authorization guidelines can be found on the PBH website on the provider resources page:

<http://www.pbhsolutions.org/providers/resources.asp>
- All information must match the PCP exactly. If the plan states per month, per week, etc., then the TAR should request in the same way.
- You must save each page where there is a "blue" save button.
- Comment on progress toward goals in the clinical comments of the TAR and provide clinical justification for the service and frequency being requested.
- Comment on Step down/discharge planning which should be discussed from admission and included on every TAR.
- Do not assume a TAR submitted to UM has been approved. Check the system to determine approval.

Timely Submission of PCP/TAR:

- Please be aware that a request is considered complete upon receipt of the PCP (when required) and TAR. For example, if UM receives a TAR with no PCP, an incomplete letter will be mailed notifying the agency and individual/family that the request was incomplete. Please send the Plan (PCP, ISP) on the same date as the TAR.
- The Provider Manual for Reauthorization of Enhanced Services states that, "The request for additional services must be made no earlier than thirty (30) days and **no later than fifteen (15) days** before the current service authorization expires." Please ensure Treatment Authorization Requests are submitted at least fifteen days (15) in advance of the authorization expiration date to avoid a lapse in service.
- Requests are not backdated by UM staff. There is a current process in place for submitting backdated requests. (See Review and Determination form.)