Topics

• Submission Method
• Prior Authorization Areas
• Documentation requirements
• Common documentation issues
• Questions
Submission Method

• All documentation is accepted ONLY by Fax
• Fax number: 602-253-6695
• Prior Authorization decision is faxed back to the facility contact number listed on the PA Form.
DFSM Prior Authorization Requirements

• Required Prior Authorization for the Fee-for Service TRBHA members:
  o Acute Inpatient Admissions (Level 1)
  o Detox Facilities (Level 1)
  o Residential Treatment Centers (Level 1)
  o Arizona State Hospital
Other Facilities

• All other facilities/levels of care DO NOT require Prior Authorization, at this time.
• Chart review might be conducted during the audit process.
Documentation Requirements

• All admissions require:
  o Initial Authorization - CON
  o Continued Authorization – RON
  o Discharge Summary or Discharge Note with aftercare instructions
Acute Inpatient Admission

• Initial Authorization
  o Fee for Service Prior Authorization Form
  o C.O.N (Certificate of Need)
  o Psychiatric Evaluation
  o Initial Treatment Plan
Court Ordered Evaluation

• Title XIX/XXI funds must not be used

• AHCCCS will cover:
  o From the date of filing for COT
  o From the voluntary status date
  o C.O.N. should be submitted on the first day of coverage with the documentation of the change of status
Acute Inpatient Admission

• Continued Authorization
  o Fee for Service Prior Authorization Form
  o R.O.N (Recertification of Need)
  o Medical Provider's Daily Progress Notes
  o Multidisciplinary Treatment Plan
Detox Admission

• Initial Authorization
  o Fee for Service Prior Authorization Form
  o C.O.N (Certificate of Need)
  o History and Physical
  o Psychiatric Evaluation, if available
  o Initial Treatment Plan
Detox Admission

• Continued Authorization
  - Fee for Service Prior Authorization Form
  - R.O.N (Recertification of Need)
  - Medical Provider's Daily Progress Notes
  - Multidisciplinary Treatment Plan
Acute Inpatient/Detox Admission

• Initial Authorization – up to 3 days
• Must be submitted within 72 hours of admission
• Continued Authorization – up to 7 days
• Request for authorization must include the date of admission and discharge
• Forms must be filled out properly and accurately
RTC (Level 1) Admission

- Initial Authorization
  - Fee for Service Prior Authorization Form
    - Completed by Facility
  - C.O.N (Certificate of Need)
  - Psychiatric Evaluation
  - Initial Treatment Plan
  - Other clinical document supporting non-emergent RTC admission
RTC (Level 1) Admission

- Continued Authorization
  - Fee for Service Prior Authorization Form
  - R.O.N (Recertification of Need)
  - Medical Provider's Progress Notes
  - Multidisciplinary Treatment Plan
RTC (Level 1) Admission

- Initial Authorization – up to 30 days
- Continued Authorization – up to 30 days
- Request for authorization must include the date of admission and discharge
- Forms must be filled out accurately
- Statements must support request
- PA Request must be received prior to admission
Arizona State Hospital Admission

• Initial Authorization (TRBHA coordinates)
  o Fee for Service Prior Authorization Form – Completed by Facility
  o Documents required from TRBHA
    ▪ C.O.N (Certificate of Need)
    ▪ Psychiatric Evaluation
    ▪ BHMP notes supporting placement
    ▪ Any other document supporting placement
Arizona State Hospital Admission

• Continued Authorization – all documents submitted to DFSM by ASH:
  o Fee for Service Prior Authorization Form
  o R.O.N (Recertification of Need)
  o Medical Provider's Progress Notes
  o Multidisciplinary Treatment Plan
Common Documentation Issues

- ICD10 Diagnosis on FFS PA Form and on C.O.N/R.O.N do not match
- Unreadable/Incomplete documentation
- Documentation does not support continuing admission
- Medical Providers signatures without printed names and credentials
- Lack of response from provider
Prior Authorization Phone Line

• 602-417-4400
Questions?

Reaching across Arizona to provide comprehensive quality health care for those in need
Thank You.

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