To: AmeriHealth Caritas Louisiana Providers

Date: June 27, 2017

Subject: Reminder: Modifications to the Pre-Authorization Process for Mental Health Rehabilitation (MHR) services

Summary: Effective January 1, 2017, AmeriHealth Caritas Louisiana implemented modifications to the pre-authorization process for Mental Health Rehabilitation (MHR) services. If you provide these services, it is important that you review the below information so that you and your agency can become familiar with the upcoming changes.

In addition, Effective July 1, 2017, AmeriHealth Caritas Louisiana now requires the Child and Adolescent Service Intensity Instrument (CASII) or the Child and Adolescent Level of Care Utilization System (CALOCUS) to be completed for all Child and Adolescent Mental Health Rehabilitation initial service requests and annually thereafter. AmeriHealth Caritas Louisiana will provide training for providers on the modified pre-authorization process. Communications on dates/locations will be provided through your AmeriHealth Caritas Louisiana Account Executives. Immediate information about CASII can be located online at: http://www.aacap.org/aacap/Member_Resources/Practice_Information/CASII.aspx.

1. AmeriHealth Caritas Louisiana will implement a Member’s Choice in Provider form to be used for all MHR services in an attempt to reduce duplication of services. Providers will be responsible for having the member and/or their legal representative complete and sign the form indicating their choice of provider for the provision of MHR services. The form must then be submitted along with the Prior-Authorization request to AmeriHealth Caritas Louisiana. The Member’s Choice in Provider form can be located on the AmeriHealth Caritas Louisiana website at www.amerihealthcaritasla.com on the Providers tab under Forms.

2. AmeriHealth Caritas Louisiana has revised the Child and Adolescent MHR Treatment Request form to capture additional information for the Prior Authorization process. Changes include:
   a. A place to submit the ICD-10 diagnosis code along with the Diagnostic and Statistical Manual (DSM) code for the member.
   b. A reminder to attach the Choice in Provider form, as well as the Clinical Assessment and/or Treatment Plan, when applicable.
   c. A place to clarify the specific interventions for each service requested.
d. A note that if the request is for both Community Psychiatric Supportive Treatment (CPST) and Psychosocial Rehabilitation (PSR), it is necessary to clearly indicate the need for both services and the different interventions to be utilized in both services.

e. The addition of several Symptom criteria that can be noted for Continued Stay Requests. The additions/revisions include: Disruptive Behaviors, Paranoia and Interpersonal conflicts.

Questions:
Thank you for your continued support and commitment to the care of our members. If you have questions about this communication, please contact AmeriHealth Caritas Louisiana’s Provider Services department at 1-888-922-0007 or your Provider Network Management Account Executive.