

November 18, 2011

Behavioral Health Services Providers: New Service Authorization Request Form Now Available



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Beginning December 1, 2011, providers must use the new Service Authorization Request Form for outpatient behavioral health services to comply with the new integrated regulations. There are two separate forms for

- Community Behavioral Health Clinic Services and
- Mental Health Physician Clinic Services

Beginning with dates of service on or after December 1, 2011, providers must use the new Service Authorization Request Forms when the amount of services a recipient needs surpasses the daily or annual services limits allowed by regulation (see 7 AAC 135.040). Providers **must complete all pages** of the request form, including a description of the medical necessity. Providers should submit completed forms directly to Affiliated Computer Services (ACS).

Clinical Records and Medical Necessity Documentation

Providers will be required to fully support the medical necessity for the requested services within the text box on page 1 or 2 of the request. **At this time, providers are not required to attach the following clinical records with the service authorization request:**

- Alaska Screening Tool (AST)
- Client Status Review (CSR)
- Behavioral Health Assessment
- Behavioral Health Treatment Plan

Please note that at any time providers may be required to submit additional clinical documentation to support the services requested.

Requested dates of service must be no later than the date of the next scheduled treatment plan review.

Submit ALL Service Authorization Requests directly to ACS

ALL completed Service Authorization Request Forms must be submitted directly to ACS by mail or fax as follows:

Mail: Affiliated Computer Services
Prior Authorization Unit
P.O. Box 240808
Anchorage, AK 99524

Fax: Attention Prior Authorization Unit
866.653.1435

* For dates of service on or after December 1, 2011 ACS will **not** accept any other service authorization request form for behavioral health services. Requests submitted on another form after December 1 will not be processed and services will not be authorized.

Code	Service	Rate	Units	18. Units Frequency
1000	Individual Psychotherapy	100.00	15 min.	1 weekly
1001	Group Psychotherapy	100.00	15 min.	1 weekly
1002	Family Psychotherapy	100.00	30 min.	1 weekly
1003	Individual Psychotherapy	100.00	15 min.	1 weekly
1004	Group Psychotherapy	100.00	15 min.	1 weekly
1005	Family Psychotherapy	100.00	30 min.	1 weekly
1006	Individual Psychotherapy	100.00	15 min.	1 weekly
1007	Group Psychotherapy	100.00	15 min.	1 weekly
1008	Family Psychotherapy	100.00	30 min.	1 weekly
1009	Individual Psychotherapy	100.00	15 min.	1 weekly
1010	Group Psychotherapy	100.00	15 min.	1 weekly
1011	Family Psychotherapy	100.00	30 min.	1 weekly
1012	Individual Psychotherapy	100.00	15 min.	1 weekly
1013	Group Psychotherapy	100.00	15 min.	1 weekly
1014	Family Psychotherapy	100.00	30 min.	1 weekly
1015	Individual Psychotherapy	100.00	15 min.	1 weekly
1016	Group Psychotherapy	100.00	15 min.	1 weekly
1017	Family Psychotherapy	100.00	30 min.	1 weekly
1018	Individual Psychotherapy	100.00	15 min.	1 weekly
1019	Group Psychotherapy	100.00	15 min.	1 weekly
1020	Family Psychotherapy	100.00	30 min.	1 weekly

Where can I find these forms?

Go to <http://medicaidalaska.com> and select Providers > Forms. You may fill out the form on your computer using a .pdf reader and save information typed inside. Alternately, you may print the form and fill it out by hand.

Questions?

Please call ACS' Provider Inquiry Unit at 907.644.6800, option 1, or 800.770.5650 (toll-free in Alaska).