

MBHP - IVR Authorization Procedure: IN-HOME THERAPY SERVICES

IHT Provider Accesses the Interactive Voice Registration (IVR) System by calling (888) 899-6277. Press #6 for CBHI Services.

- In-Home Therapy (IHT) can request a start date for the authorization that is up to 14 days forward from the date of the call to the IVR, or up to 14 days prior to the date of the call to the IVR.
- If IHT provider requests a greater number of units than what is entered by the ICC in ProviderConnect, then the IVR auth request will “kick out.”
- IHT will be authorized for Members who meet medical necessity and are less than 21 years of age within the time frame of the authorization requests and are enrolled in the MBHP M001 Benefits package as of the requested effective date of the authorization (Note: Members in MassHealth Limited are not eligible for IHT).
- IHT is one of the three CBHI Hub services and can be provided by both a provider agency who is a CSA and by a non-CSA provider agency (all, however, must be contracted to provide IHT).

For ICC-Involved Youth – IHT Auth Procedure

If IHT is provided to youth involved in Intensive Care Coordination (ICC) – IHT must be documented in the Individual Care Plan (ICP) in ProviderConnect in order for the IHT Provider to obtain an IHT authorization via the IVR.

ICC Hub Provider Responsibilities:

1. ICC obtains consent from family to make IHT referral - ICC convenes CPT meeting - Family and CPT identify need for IHT referral
 - a. **At time of initial or concurrent ICC authorization request in ProviderConnect -** ICC documents referral for IHT in the ICP located in the “Other Services & Supports” section of ProviderConnect (IHT referral documentation in ProviderConnect includes IHT agency/number of IHT units/ frequency of IHT contact/IHT goals)
 - b. **If ICC authorization was already obtained in ProviderConnect without documenting IHT referral, ICC needs to trigger a concurrent review in the following manner:**
 - i. ICC requests a 1 unit ICC authorization in ProviderConnect (See workflow titled Adding a 1 unit ICC Authorization in ProviderConnect). Remember to use today’s date as the Requested Start Date for the one unit of ICC. Remember to reject the 416 units and enter in 1 unit instead.
 - ii. ICC documents the IHT referral as noted above in “Other Services & Supports” section of ProviderConnect.

*****If CPT has not yet convened, but the family is requesting IHT ASAP and this is clinically indicated, ICC follows the procedure noted in 1.b. above, and documents family’s consent.***

- c. Once IHT referral is documented in ProviderConnect, ICC contacts IHT provider with referral goal/ frequency of IHT/number of units IHT provider may request via the IVR.

*****ICC providers may receive the following message in ProviderConnect: “Please Note this is NOT an authorization for care; the services requested require additional review. You will be contacted regarding the status of this request.” This message results in a pending auth, after which the authorization request goes into a queue that is reviewed and processed by an MBHP ICM liaison who will follow-up with the ICC provider as needed.***

IHT Provider Responsibilities When ICC is Involved:

1. **IHT verifies** that ICC has obtained an ICC auth and has completed ICP in ProviderConnect noting IHT agency/number of IHT units/frequency of IHT/IHT goals (*this step does not authorize you for payment of IHT you must complete step 2 below*).
2. **IHT provider then requests an IHT authorization** via the IVR by calling (888) 899-6277. **Press # 6** for CBHI Services

*****If the ICC provider has not yet obtained an authorization for ICC in ProviderConnect, then the IHT provider selects “No ICC” when prompted via the IVR.***

*****If ICC has obtained ICC Authorization in ProviderConnect, but has not entered IHT referral into ProviderConnect, then ICC must complete their procedure as noted above or IHT will be “kicked out” of the IVR.***

For Non-ICC Involved Youth – IHT Auth Procedure

The IHT provider will obtain an authorization for IHT via the Interactive Voice Registration (IVR) system.

Please refer to the MBHP IVR Manual posted at www.masspartnership.com for more details about the services authorized via the IVR. Authorization parameters for IHT are outlined within the IVR manual.

***** IHT IVR Kickouts: if IHT provider is kicked out or otherwise unable to obtain an authorization via the IVR, they will be directed to a voicemail box. IHT provider leaves all requested information on the voicemail:***

1. **Name, agency, town agency is in, and phone number**
2. **Member name and ID number**
3. **CBHI service requested, units, dates of service**
4. **If Member has ICC involvement – name of CSA**
5. **Reason for IVR kick-out**

These voicemail messages are checked on an ongoing basis. MBHP care managers will build the authorization as requested, or will contact providers by phone if additional information is needed. Further review may be warranted by a supervisor or an MBHP MD. Authorization letters are available at the MBHP/ValueOptions online provider portal, ProviderConnect.

- **MBHP ICM liaisons process ICC Hub-related authorizations.**
- **MBHP Utilization Review Department processes non-ICC Hub-related authorizations.**

Providers are requested NOT to leave multiple messages for the same request.