



[Date]

Prior authorization for continuing crisis intervention services

Effective [Date], Healthy Blue will require prior authorization (PA) for continuing crisis intervention services. In order to receive continuing crisis intervention services, the member must continue to meet medical necessity for this level of care.

Services for the initial day (day one) of crisis intervention will not require PA; however, providers should notify Healthy Blue within [one] business day to request authorization of continuing crisis intervention services.

How to request PA

Providers should fax a completed [Behavioral Health Outpatient Treatment Request Form] to [1-866-877-5229]. Please note, CPT® code H2011 should be used for both initial and continuing crisis intervention services. Per the Louisiana Department of Health [Behavioral Health Services Provider Manual], "The medical necessity for these rehabilitative services must be determined by, and services recommended by a licensed mental health professional (LMHP) or physician or under the direction of a licensed practitioner, to promote the maximum reduction of symptoms and/or restoration of an individual to his/her best age-appropriate functional level."

Criteria for determining medical necessity

Healthy Blue defers to evidence-based MCG Care Guidelines for initial and continuing crisis intervention services. Healthy Blue will review requests for continuing crisis intervention services for medical necessity and will notify the provider within [two] business days of receipt of the request. Once a member no longer meets criteria for crisis intervention, he or she should be moved to the appropriate level of care.

Why is this change necessary?

Healthy Blue is implementing this PA requirement change to enhance clinical quality and safeguard the appropriate use of continuing crisis intervention services.

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at [1-844-521-6942].

Formatted: Font: Arial

Formatted: Indent: Left: -0.25", Right:

-0.25"

Style Definition: Normal: Font: (Default) Times New Roman, 12 pt, Space After: 0 pt,

Line spacing: single

Formatted: Top: 0.5", Footer distance from edge: 0.3", Different first page header

Formatted: Font: 8 pt

Formatted: Footer, Indent: Left: -0.25", Right: -0.25", Tab stops: 6.75", Right