

**QUEST Member Referral for Non-MRO/Non-Crisis AMHD Services
(Effective July 1, 2010)**

QUEST Health Plan Case Manager

1. Go to www.amhd.org/Provider/Forms.asp to download or print the DOH AMHD Referral Form.
2. Fill out form (including attachment for the relevant Supported Employment, Representative Payee or Housing service*) and fax to the appropriate AMHD service provider. (QUEST CM may send referral form to multiple providers if desired.)
3. Wait for notification of acceptance/authorization or denial of service from AMHD service provider.
4. These procedures do not apply to persons in crisis, who can be authorized directly by ACCESS for crisis services (i.e., CSM, LCRS, CMO).

AMHD Service Provider

1. Upon receipt of referral form, screen the form for the following:
 - a. Is the individual forensically encumbered (e.g. on Conditional Release, in Jail Diversion or Mental Health Court programs, Unfit to Proceed and released to community for fitness restoration)?
 - i. If yes, the individual is eligible for all AMHD services. Please proceed to Step 2.
 - ii. If no, please proceed to Step 1. b. for further screening.
 - b. Is the service being requested a Medicaid Rehabilitation Option (MRO) service (i.e. Community Based Case Management (CBCM); Day Treatment/Aftercare Intensive Outpatient Hospital (IOH); or Specialized Residential) other than crisis services?
 - i. If yes, this service will not be reimbursed by AMHD and the provider shall deny the request.
 - ii. If no, please proceed to Step 1. c. for further screening.
 - c. Does the individual have an AMHD-eligible diagnosis and GAF score?
 - i. If yes, please proceed to Step 2.
 - ii. If no, the individual is not eligible for AMHD services and the provider shall deny the request.
2. If the form has passed the eligibility screening, the provider will review the form to determine if the individual meets the service's admission criteria.

- i. If yes, please proceed to Step 3.
 - ii. If no, the provider shall deny the request.
3. If the individual is eligible for AMHD services and meets admission criteria for the specific service requested, does the service provider have the capacity to admit this individual into the service/program?
 - a. If yes, please proceed to Step 4.
 - b. If no, the provider may either deny the request or approve the request and place the individual on a waitlist, depending on the provider's internal policies and procedures concerning waitlists.
4. If the individual is AMHD-eligible, meets admission criteria, and the provider has capacity to accept this consumer into the service, the provider will complete the appropriate AMHD Service Authorization Request form for that service and fax it to AMHD's Utilization Management (UM) unit at 808-453-6966.

Please note that the service provider will not be reimbursed for any services that are initiated prior to receipt of AMHD UM authorization if it is a service that requires prior authorization. For services that allow retrospective authorization, the provider may submit the authorization request up to 30 calendar days after initiation of services.

AMHD Utilization Management

1. Upon receipt of the Service Authorization Request from the AMHD contracted service provider, UM staff will verify the individual's eligibility for AMHD services by double-checking his/her forensic status, insurance coverage, diagnosis, and functional status. If eligible, please proceed to Step 2. If ineligible for the service being requested, UM will fax a written denial to the service provider.
2. If the individual has passed the eligibility screening, UM will review the form and any additional documentation submitted to determine if the individual meets the service's admission criteria. If yes, please proceed to Step 3. If no, UM will fax a written denial to the service provider.
3. If the individual is eligible for AMHD services and meets admission criteria for the specific service requested, UM will determine if the service provider has an open, approved slot to admit this individual into the service/program. If yes, please proceed to Step 4. If no, UM may deny the request and advise the case manager to

seek alternative service options OR approve the request for waitlisting for the next available slot, depending on the urgency of service need, the service provider's internal policies and procedures concerning waitlists, and the likelihood that an opening will become available within a reasonable time period.

4. If the individual is AMHD-eligible, meets admission criteria, and the provider has an open, approved slot to accept this consumer into the service, AMHD will review the number and duration of requested units of service. If the number and duration of units of service does not exceed AMHD's established limits, UM will fax a written service authorization to the requesting service provider. If the number and duration of requested units of service exceeds AMHD's established limits, UM will deny all or part of the request and fax a written denial to the requesting AMHD service provider.

Please note that the service provider will not be reimbursed for any services that are initiated prior to the date of AMHD UM authorization if it is a service that requires prior authorization. For services that allow retrospective authorization, the provider may submit the authorization request up to 30 calendar days after initiation of services.

***Non-MRO Services**

The following non-MRO services, not offered by QUEST health plan providers, will continue to be provided during and beyond the 60-day transition period to QUEST health plan members who meet eligibility criteria for:

- 24 Hour Group Home
- 8 to 16 Hour Group Home
- Supported Housing
- Semi-Independent Housing
- Representative Payee Services
- Supported Employment
- Crisis Support Management
- Licensed Crisis Residential Service, per diem
- Crisis Mobile Outreach