

## PROVIDER NOTICE

**Notice #:** PN 2013-02

**Issued:** June 12, 2013

**To:** Providers of Intensive Outpatient, Extended Day Treatment, Home Based Services (MST, MDFT, FFT), Outpatient, Psych Testing, Methadone Maintenance, Ambulatory Detoxification, and all other levels of care *except IICAPS and Home Health*

**Subject:** Updated Retrospective Eligibility Review Template

Dear Provider,

The CT Behavioral Health Partnership issued a Provider Alert (PA 2011-22) in September of 2011 that outlined a process for obtaining service registrations for Medicaid members with retroactive eligibility. The CT BHP has made updates to the Retroactive Eligibility Review Template and providers will be asked to immediately begin using the updated form for these requests. The updated Retroactive Eligibility Review Template now includes the following fields:

- Total number of units requested: \_\_\_\_\_
- Requested end date of authorization: \_\_\_\_\_
- Is member still in treatment?  Yes  No

**NOTE:** Upon receipt of this notice, please **discard all previous copies of your retroactive eligibility review templates** and begin utilizing the attached, updated form. All required fields need to be completed on the enclosed form going forward. Forms received with blank required fields will be returned to the provider.

The updated template (now a pdf writable form) will be available on the CT BHP website For Providers homepage: <http://www.ctbhp.com/providers.htm> and has been included as an attachment with this notice. We have also included the original Provider Alert language (below) that outlined the process as well as the instructions on how to view the eligibility determination date.

**From Provider Alert (PA 2011-22):**

EFFECTIVE OCTOBER 1<sup>ST</sup> 2011, for Intensive Outpatient, Extended Day Treatment, Home Based Services (MST, MDFT, FFT), Outpatient, Psych Testing, Methadone Maintenance, Ambulatory Detoxification services, and all other levels of care *except IICAPS and Home Health (see below)*

- 1) Providers must first verify through the DSS automated eligibility system ([www.ctdssmap.com](http://www.ctdssmap.com)) that the member has been made retroactively eligible:
- 2) Providers will then verify the eligibility "change date" in the ProviderConnect system ([www.ctbhp.com](http://www.ctbhp.com)). Instructions attached.

- 3) Provider will submit an abbreviated retrospective review form\*\* to the CT BHP within thirty (30) days of the eligibility determination date (date the members eligibility date was determined\*).
- 4) CT BHP will review the request and verify that member's eligibility has been retroactively granted.
- 5) CT BHP will create an authorization and authorization letter and will submit the authorization to HP.

If you have any questions or concerns, please do not hesitate to contact the CT BHP Call Center at 1-877-552-8247.

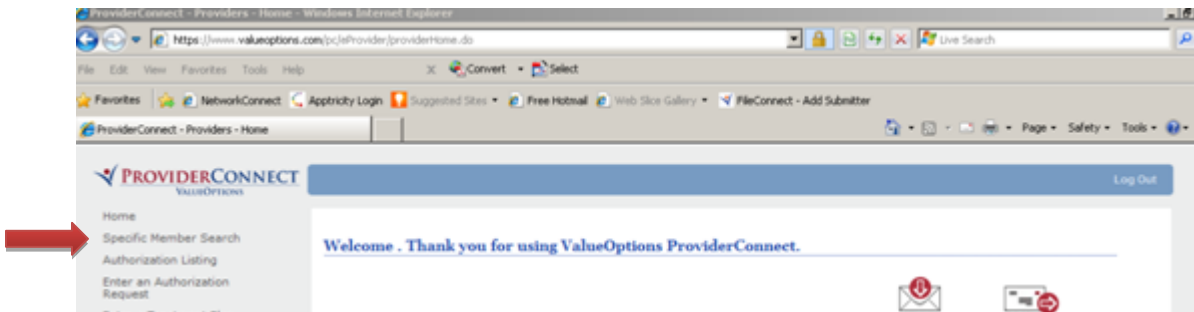
Provider Relations  
CT Behavioral Health Partnership

Encl: *Attachment: \*Instructions for how to view the eligibility determination date*  
*Attachment: \*\*Retrospective Review form – Web Registered Services*

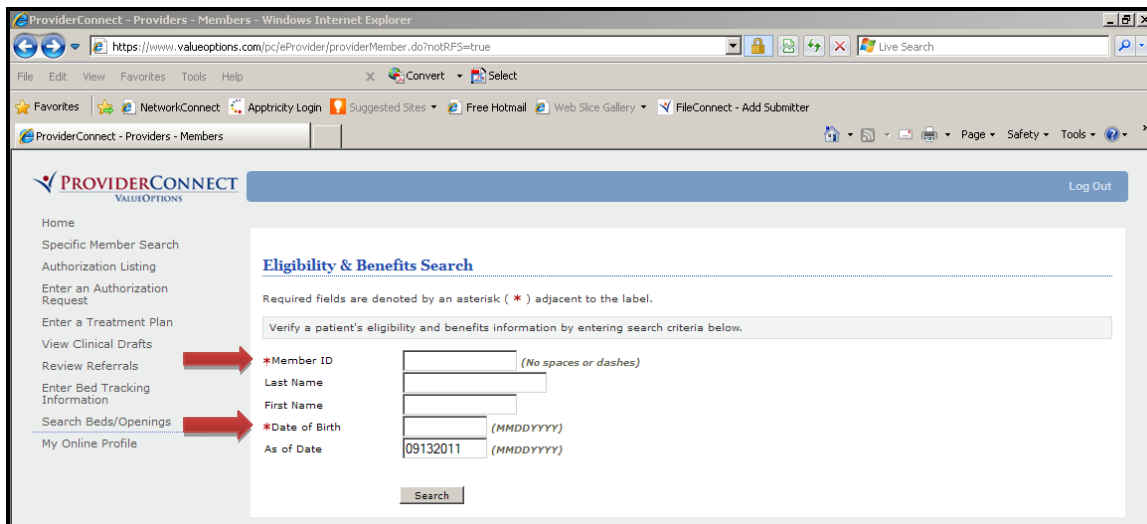
## CT BHP Retrospective Eligibility Viewing Eligibility Determination Date

To View Eligibility Determination Date:

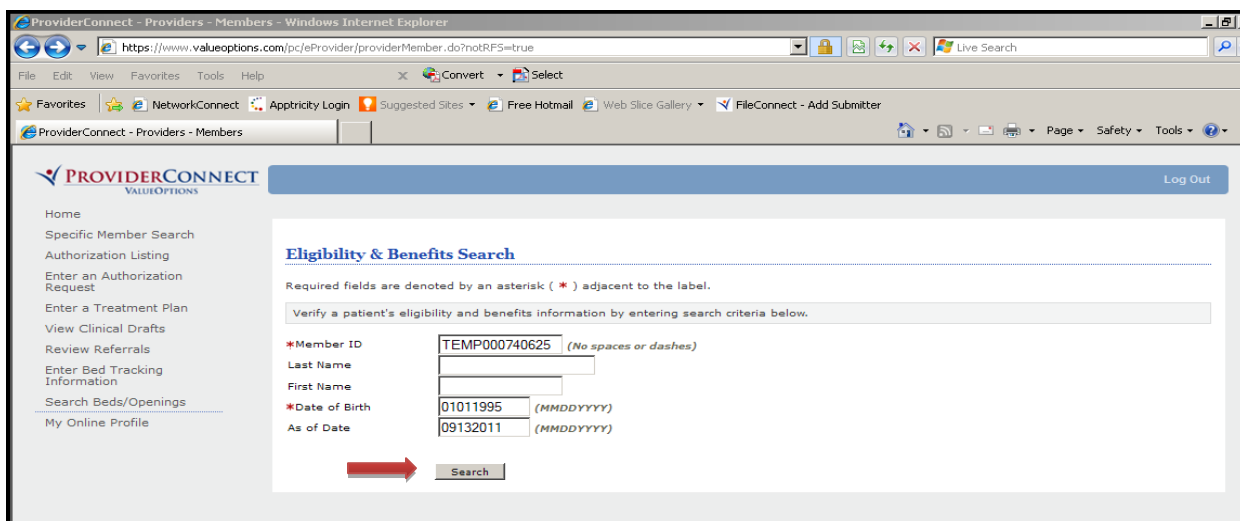
- 1) Enter ProviderConnect Home Page and click on “Specific Member Search.”



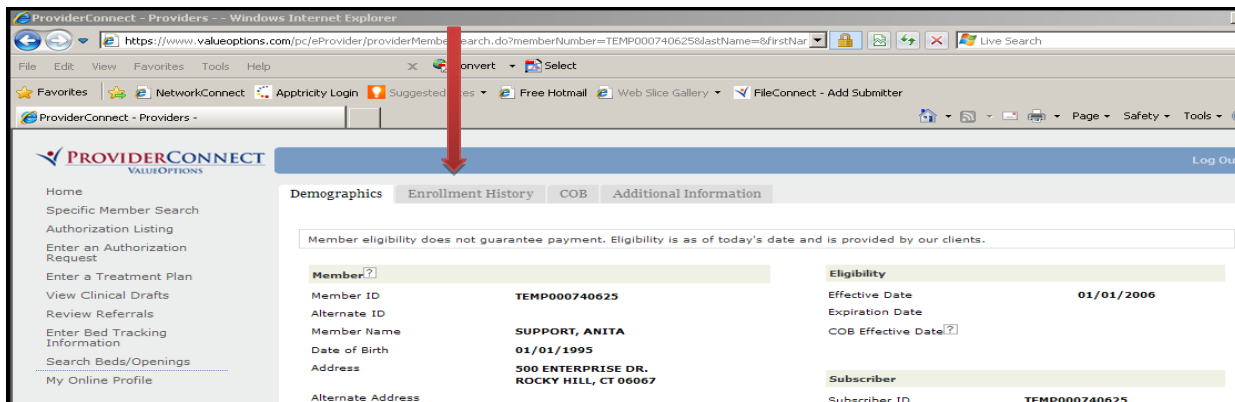
- 2) Enter Member ID and DOB.



- 3) Click “Search.”



4) The Demographics screen will appear. Click the “Enrollment History” tab.



5) View Eligibility Determination Date and Effective Date of member’s retro eligibility

