

December 1, 2015

To: New Hampshire Healthy Families (NHHF)/Cenpatico Specialty Therapy and Rehabilitation Services (STRS) Providers

Subject: Continuity of Care for Mandatory Enrollment into Medicaid Care Management for Medical Services Coverage for Step 2 Phase 1

Dear Valued Provider,

Mandatory enrollment into Medicaid Care Management for Medical Services is required and coverage is effective 2/1/2016. Continuity of care for members entering into new coverage under NHHF is essential to ensure optimal health outcomes. In an effort to ensure a smooth transition for members who are newly covered by NHHF under mandatory enrollment, please follow the process outlined below.

1. **Members who started treatment prior to 2/1/2016 and had an authorization from the state:** Cenpatico will receive a list of these authorizations from the state. The authorizations will be transferred to our systems and the end date of the authorization will be either the end date of the existing authorization or 60 days, whichever is sooner. There is no action needed by providers.
2. **Members who started treatment prior to 2/1/2016** and have been receiving services without authorization as a part of the 80 units allowed without the need for prior authorization and therefore **do NOT have an authorization from the state** will have two (2) options:
  - a. For authorizations with dates of service including on dates from 2/1/2016 to 3/1/2016: Providers can submit a list of limited information to us on or after 2/1/2016. The information can be faxed to: 877-658-0322. (Please include a fax sheet cover sheet with a description of "Non-state approved authorizations for: (provider name and contact info)". Please include the following information:
    - (1) Member's first and last name;
    - (2) Date of Birth;
    - (3) Discipline of treatment requested;
    - (4) Number of visits requested;
    - (5) Date treatment started;
    - (6) Expected plan of care end date (not to exceed 2/29/2016);
    - (7) Provider/Facility/Group Name;
    - (8) Provider Tax ID (group, facility, or individual);
    - (9) NPI of rendering provider;
    - (10) Provider contact name and telephone number; and
    - (11) Fax cover sheet that provides an explanation of the documentation that is included.

Have Questions?  
Call us at 1-888-282-7767

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b. For authorization requests that include dates beyond 3/1/2016 (more than the transition of care), Submit all required prior authorization documentation to include:

- (1) A copy of the completed Outpatient Treatment Request (OTR) Form;
  - (2) A current physician's prescription; and
  - (3) An updated evaluation/re-evaluation and plan of care, to include long and short term measureable and functional treatment goals.
  - (4) Note: If the request meets our Medical Necessity Criteria, the request will be approved in whole. If the request does not meet medical necessity, providers will be notified of the necessary elements and they will be given the opportunity to provide the needed information or withdraw the request and resubmit with all necessary clinical documents. If the documentation is not received, the request will be approved from 2/1/16 to 3/1/16 to allow for continuity of care and the remainder of the dates will be sent to medical review. A determination on the authorization will be sent via fax to the providers.
3. **Members entering care on or after 2/1/2016** will be subject to medical necessity review and require prior authorization after the initial evaluation. Providers should submit all necessary documentation to include: completed Outpatient Treatment Request (OTR) Form, along with a current physician's prescription, and updated evaluation/re-evaluation and plan of care, to include long and short term measureable and functional treatment goals need to be faxed to Cenpatico for review at: 877-658-0322. A determination on the authorization will be sent via fax to providers after reviewed for Medical Necessity.

Please do not hesitate to reach out to Julie Stover, Clinical Provider Trainer, at 512-876-0843 with any questions. Thank you for your continued service to our members.