



North Sound Mental Health Administration

Regional Support Network for Island, San Juan, Skagit, Snohomish, and Whatcom Counties

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NSMHA Contract Memorandum 2011-001

Date: April 18, 2011

To: Tom Sebastian, CEO, Compass Health
Donna Konicki, Bridgeways
Michael Watson, Lake Whatcom RTC
Dean Wight, CEO, Whatcom Counseling and Psychiatric Center
Kathy McNaughton, COO, Catholic Community Services Northwest
Claudia D'Allegrì, Sea Mar
Ken Stark, Snohomish County Human Services Director
Phil Smith, Volunteers of America
Richard Sprague, Interfaith
Sue Closser, CEO, Sunrise Services

From: Chuck Benjamin, Executive Director

Subject: Revised/new policy/document

In an effort to more effectively manage services to individuals in Levels of Care 1 and 2, NSMHA has revised the authorization process.

1. Initial authorizations for individuals at a Level of Care (LOC) of 1 or 2 will be authorized for up to 6 months.
2. An alternate reauthorization review process is being established for reauthorizations for individuals with Medicaid at Level of Care 1 and 2 who meet the following criteria (Reauthorization exception review process will continue for State funded individuals):
 - a. Current LOC 1
 - OR
 - b. Current LOC 2 and was LOC 2 in previous authorization period
 - AND
 - c. Fall into Category 1 or 2 or both:
 - i. Category 1 - No inpatient, crisis or jail services since the last authorization period AND current treatment episode open less than two years.
 - ii. Category 2 - Individuals who do not have an "A" diagnosis per the Statewide Access to Care Standards

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3. The alternate reauthorization review process will work as follows:
 - a. On a monthly basis, NSMHA will generate a report of individuals by agency who meets the criteria outlined above.
 - b. The report will be generated and sent by the 10th of each month to each agency for those individuals whose authorization is due to expire the following month (i.e., an individual with an authorization due to expire in July will be included in the report sent by June 10th).
 - c. Providers shall review each chart on the report and for those individuals who meet continued stay criteria, per NSMHA Policy #1539 Continued Stay/Reauthorization Criteria, the reviewer (must be clinical supervisor, clinical director or quality manager) shall sign and date certifying the individual meets these criteria for reauthorization for up to six months of ongoing services or up to 90 days to transition out of services. This signed and dated certification must be returned to NSMHA prior to submission of the reauthorization request in order for a determination to be made. Any request for which this certification has not been received will be considered as request sent in error and will be decertified.

4. The first report will be sent by NSMHA by June 10, 2011.

This revised/new policy/document will be available on the NSMHA website at www.nsmha.org for your future reference.

Please ensure this revised/new policy/document is implemented at your agency within 60 days.

cc: Cindy Ainsley, Bridgeways
Heather Fennell, Compass Health
Kay Burbidge, Lake Whatcom
Pamala Benjamin, Whatcom Counseling and Psychiatric Center
Pat Morris, Volunteers of America
David Small, Sea Mar
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Rebecca Clark, Mental Health Program Coordinator Skagit County
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Contract File