Detroit Wayne
Integrated Health Network

707 W. Milwaukee St.
Detroit, MI 48202-2943
Phone: (313) 833-2500
www.dwihn.org

FAX: (313) 833-2156
TDD: (800) 630-1044 RR/TDD: (888) 339-5588

Memorandum

Date: August 19, 2022
To: Clinically Responsible Service Providers (CRSP)
From: Melissa Moody, Chief Clinical Officer- DWIHN
Re: Authorization requests not being automatically approved that fall within the SUG

_____

It has been reported that authorizations are not being automatically approved in MH-WIN even when they are falling within the appropriate Service Utilization Guidelines (SUGs). Upon further review it was found that if an IPOS is early terminated and a new IPOS is completed, it is counting the units/encounters authorized in the terminated IPOS and adding it to the new IPOS amounts. This is causing authorization requests to be over the allowable amount as specified in the SUGs and are subsequently being sent it to the DWIHN's authorization que for manual approval. DWIHN has worked with PCE on a resolution to this issue which can be found in the attached document.

Please discuss deploying and enabling this feature with your PCE PM. It is controlled via access function, so it can be made available across the board, or only to certain staff groups.

Sincerely,

Melissa Moody MS, LLP
Chief Clinical Officer

CC: Eric Doeh, President & CEO
    Manny Singla, Chief Network Officer
    Jamal Aljahmi, Chief Information Officer
    Leigh Wayna , Director of Utilization Management

DWIHN Authorizations: Reduce Authorized Units upon Early Terminate

Early Terminations

Sometimes when early terminating an authorization, the goal is to replace the authorization with a new authorization for use going forward. However, this can cause issues when requesting the replacement authorization, where the units on the old early terminated authorization are still authorized and being counted with the units on the new authorization. This can cause the new authorization to not pass DWIHN SUG guidelines and route for approval.

To help with this scenario, a new feature has been added to the authorization module to allow removing all remaining unused available units on services in the authorizations. This means that the authorized units on each service are reduced to the number of already-claimed units for that service. See below example:

Prior to early termination:

Authorized Service(s) Description		Authorized	Claimed	Available
T1017 Related SALs	Targeted Case Management	98 (8 Per Month)	43	55
		Rates	EFF: 04/14/2021 EXP: 04/13/2022	
H0031 Related SALs	Mental Health Assessment, by Non-Physician	1 (1 Per Year)	0	1
		Rates	EFF: 04/14/2021 EXP: 04/13/2022	
H0032 Related SALs	Treatment Plan Development by Non-Physician	2 (2 Per Year)	2	0
		Rates	EFF: 04/14/2021 EXP: 04/13/2022	

While early terminating: check new checkbox:

All authorized services listed below will be terminated as of the Early Termination Date entered.
To terminate individual services instead, use "Early terminate this service line" links below.

The earliest termination date that can be entered is 03/29/2022.

☑ Release all remaining unused authorized units on this authorization upon early termination. If checked, all available units will be removed and no additional services can be claimed against this authorization that have not already been claimed. Please ensure all clinical documents dated on or prior to the early termination date relating to services on this authorization are completed and signed before continuing.

Early Termination Date
4/4/2022   [Early Terminate This Authorization] [Cancel]

After:

Authorized Service(s) Description		Authorized	Claimed	Available
T1017 Related SALs	Targeted Case Management	43 (8 Per Month)	43	0
		Rates	EFF: 04/14/2021 EXP: 04/04/2022	
H0031 Related SALs	Mental Health Assessment, by Non-Physician	0 (1 Per Year)	0	0
		Rates	EFF: 04/14/2021 EXP: 04/04/2022	
H0032 Related SALs	Treatment Plan Development by Non-Physician	2 (2 Per Year)	2	0
		Rates	EFF: 04/14/2021 EXP: 04/04/2022	

As shown in the final screenshot, the authorized units were reduced to exactly equal the claimed units, leaving the available units at 0. As noted in the text next to the checkbox that performs this update, this means that all clinical documents dated on or prior to the new early termination date relating to services on the authorization must be completed/signed prior to using this feature in order to avoid issues with SALs.

Please discuss deploying and enabling this feature with your PCE PM. It is controlled via access function, so it can be made available across the board, or only to certain staff groups.