## Georgia Collaborative ASO: Transition Reference Guide

## November 23, 2015

We are nearing our go-live of the behavioral health authorization and claims system with the Georgia Collaborative ASO. In anticipation of this upcoming milestone, DBHDD and the Georgia Collaborative have hosted a series of in-person trainings and webinars. As a compliment to these trainings, we would like to offer the following Quick-Reference Guide to assist providers in the transition process. Again, please note that this information is only applicable to behavioral health providers at this time.

## Implementation Timeline:

In order to support the transition from APS to Beacon, there will be a period of down time to facilitate the transition of information between systems.

#### December 1st to 10th Present to November 30, 2015 **December 11, 2015 APS Healthcare Live GA Collaborative ASO System Live System Down Time** APS will complete a final processing of During this time, providers The Georgia Collaborative authorizations and encounters on will not have access to APS or **Connects System and Batch** November 30, 2015. If providers wish to the GA Collaborative. processes live. Providers able to submit auths/encounters, it is The Collaborative will be enter retro and current loading their system with all recommended that provider processes are registrations, authorizations, and CIDs, Medicaid Eligibility, and completed in advance of November 30. encounters to the Collaborative. Authorizations.

During this period of down time, outpatient providers will hold authorization requests and encounter submission until December 11, 2015.

Intensive providers will have a period of work-around processes that have been outlined in trainings to date. The following pages outline details related to provider activity during the transition period (Dec 1-10, 2015).

All authorizations that have been processed and provided by APS Healthcare as of November 30, 2015 will be honored by the Georgia Collaborative.

Provider Connect and batch processes will be available for use beginning December 11, 2015.

Service Type	Process During Data Transition: Dec 1-10, 2015	Process on December 11, 2015 and After
Non-	If an individual has a current auth through APS, that auth will	Use PROVIDERCONNECT or Batch submission process to:
Intensive/Intensive	be honored through the auth end date.	Request Initial Authorizations
Outpatient		Request Concurrent Authorizations
Requests for	If the individual needs an auth and the provider has assessed	Enter Discharges
Community	the individual and determined that the individual meets	<ul> <li>Submit Claims for state funded services</li> </ul>
Behavioral Health	admission/continued stay criteria, the provider may provide	
	the service and seek authorization once the system is up.	Claims for Medicaid covered lives will continue to be submitted to either GAMMIS or to the covering CMO
	State-funded claims and encounters will be held by providers	
	until the system is live on December 11, 2015.	
PRTF	Initial LOC: Outpatient providers should fax or email the	Initial LOC: Tier I and Tier II providers may submit a request via PROVIDERCONNECT and
	PRTF referral packet 855-858-1968) or email:	upload all required documentation as part of the request
	GAPRTF@valueoptions.com with all necessary	For the PRTF Referral Checklist Form, <u>click here</u> .
	documentation. For the PRTF/CBAY Referral Checklist Form,	
	<u>click here</u> .	Admissions: Admissions should be submitted via ProviderConnect on the day the
	For DDTF for illiaing and display to initial posts and action and action	child/youth is admitted to the facility.
	For PRTF facilities seeking an initial authorization or lateral	Company Parisons Company and the size of a submitted via Dravidar Company five
	transfer, the PRTF referral packet including all necessary documentation should be faxed to: (855-858-1968) or	<u>Concurrent Reviews</u> : Concurrent reviews should be submitted via ProviderConnect five business days prior to the last covered day.
	emailed to: GAPRTF@valueoptions.com	business days prior to the last covered day.
	emailed to. <u>GAFRIT @ValueOptions.com</u>	<u>Discharges</u> : Discharges should be entered via ProviderConnect on the day the child/youth
	For PRTF facilities seeking a concurrent authorization, the	discharges from the facility.
	requester should call 1-855-606-2725 and ask to be	alsonal Ses from the radiity.
	connected to the assigned CCM to conduct a telephonic	<u>Claims for state funded services:</u> Should be submitted via ProviderConnect. (Claims for
	review.	Medicaid covered lives will continue to be submitted to either GAMMIS or to the CMO)
СВАУ	Initial LOC: Outpatient providers should fax or email the	Initial LOC: Outpatient providers submit a request via ProviderConnect and upload all
	CBAY referral packet to (855-858-1968) or email:	required documentation as part of the request
	GAPRTF@valueoptions.com . For the PRTF/CBAY Referral	For the PRTF/CBAY Referral Checklist Form, click here.
	Checklist Form, <u>click here</u> .	
		CME Admissions and Concurrent reviews:
		CME providers may submit a service requests and scheduled treatment plan reviews via
	For PRTF facilities seeking an initial CBAY authorization, the	ProviderConnect and upload all required documentation as part of the request / review
	CBAY referral packet including all necessary documentation	
	should be faxed to: (855-858-1968) or emailed to:	CME Discharges:
	GAPRTF@valueoptions.com	CME providers may submit discharge information via ProviderConnect and upload any
		required documentation

Service Type	Process During Data Transition: Dec 1-10, 2015	Process on December 11, 2015 and After		
Inpatient/State Contracted Beds	Inpatient facilities with existing contracts with DBHDD will receive referrals and authorization via GCAL.  Concurrent reviews will be conducted via telephonic reviews with CCM assigned to facility.  Claims for dates of service prior to December 1, 2015 will be submitted via the invoice process.	Admissions: All inpatient admissions/pre-cert must be processed through GCAL.  Concurrent Reviews: Concurrent reviews will be conducted telephonically on or before the last covered day of the current authorization.  Discharges: Must be submitted on the same day that the individual is discharged from the facility via ProviderConnect.  Claims: For dates of service December 1 forward, claims will be submitted via ProviderConnect.		
PASRR Level II Reviews	The referral process will remain the same.	The referral process will remain the same, however the authorization number will be generated at the time that the authorization is submitted to ProviderConnect.  Collaborative staff will submit the initial/concurrent auth request and send the referring facility/provider a Letter of Determination via fax, which will include the auth number.  Facilities/providers may obtain existing authorization numbers by contacting customer service at: 1-855-606-2725.		
CSU	Referrals and initial authorizations will be received via GCAL via the Electronic Bed Board.  For concurrent reviews, facilities will be notified via email one day prior to the authorization expiration date. The CSU is asked to call: 855-606-2725 and ask to be connected with CCM to conduct concurrent review. The call must be completed by noon.  Note that the authorization period during the transition period will remain 20 days to minimize continued stay reviews. Upon go live, the initial authorization period will be 7 days for any new authorizations.	Admissions: All CSU admissions must be processed through GCAL and Electronic Beds Board. GCAL Posts PA# and CID# on Beds Inventory Status Board within 24 hours. All initial authorizations are 7 days.  Concurrent Reviews: Requests for concurrent reviews should be submitted electronically through ProviderConnect on or before the last covered day of the current authorization.  Discharges: Must be submitted on the same day that the individual is discharged from the facility via ProviderConnect.  Claims for state funded services: Must be submitted via ProviderConnect		
Residential Detox	Referrals and initial authorizations will be received via GCAL via the Electronic Bed Board.  For concurrent reviews, facilities will be notified via email one day prior to the authorization expiration date. The CSU is asked to call: 855-606-2725 and ask to be connected with CCM to conduct concurrent review. The call must be completed by noon.  Note that the authorization period during the transition period will remain 20 days to minimize continued stay reviews. Upon go live, the initial authorization period will be 7 days for any new authorizations.	Admissions: All CSU admissions must be processed through GCAL and Electronic Bed Board. GCAL Posts PA# and CID# on Beds Inventory Status Board within 24 hours. All initial authorizations are 7 days.  Concurrent Reviews: Requests for concurrent reviews should be submitted electronically through ProviderConnect on or before the last covered day of the current authorization.  Discharges: Must be submitted on the same day that the individual is discharged from the facility via ProviderConnect.  Claims for state funded services: Must be submitted via ProviderConnect		

# Georgia Collaborative ASO Resource List:

Department	Issue	Hours	Phone	Email
Georgia Crisis and Access Line (GCAL)	Inpatient and CSU referrals and initial authorizations	24 hours a day, 7 days a week	800.715.4225	N/A
	Canaral information/Claims	,	955 606 2725	NI/A
Customer Service	General information/Claims	M-F 8AM-5PM	855.606.2725	N/A
Provider Relations	Training/Enrollment	M-F 8AM-8PM	800.397.1630	GACollaborativePR@beaconhealthoptions.com
EDI Helpdesk	Technical assistance regarding ProviderConnect and batch processes	M-F 8AM-5PM	888.247.9311	e-supportservices@valueoptions.com
Fraud Waste and Abuse	Report Instances of fraud, waste and abuse	M-F 8AM-5PM	888.293.3027	GACompliance@valueoptions.com

For questions regarding obtaining your agency's GAC# or other technical questions regarding ProviderConnect, please contact:

e-supportservices@valueoptions.com.

### Online Resources and Quick Links

### DBHDD Provider Manual for Community Behavioral Health Providers (link)

The DBHDD Provider Manual has been updated to reflect nomenclature, authorization parameters, and system adjustments related to the implementation of the Georgia Collaborative ASO. It's highly recommended that providers spend time reviewing the Provider Manual. Recent updates to the manual can be easily referenced in the change order log at the beginning of the manual.

### Georgia Collaborative Website (link)

The Georgia Collaborative Website includes a wealth of information for providers. You are encouraged to explore the website to familiarize yourself with the resource. Some quick links that may assist in transition include:

- <u>Bulletins</u>: Information and updates regarding the Collaborative go-live that may affect providers, such as clarifications related to implementation, upcoming system downtime, available trainings, online updates, etc.
- Upcoming Trainings: Information regarding upcoming webinars and face-to-face training registration links.
- <u>Previous Trainings</u>: Power-point and audio recordings of many trainings offered to-date including general clinical overviews, quality reviews, PRTF/CBAY,
   PASRR, and CSU trainings.
- Contact Information: Find the best contact information for the Georgia Collaborative based on your need.
- <u>ProviderConnect</u>: An online tool that allows you to submit and check claims status, check member eligibility, update your provider profile, request inpatient and outpatient authorizations and more. ProviderConnect is easy to use, secure and available 24/7. To request the setup of a Super User within your agency/facility, please complete the <u>Account Request Form for Georgia Providers</u>. For questions regarding obtaining your agency's Georgia Consumer Identification Number (GAC#) or other technical questions regarding ProviderConnect, please contact: <u>e-supportservices@valueoptions.com</u>.
- ReferralConnect: An online tool that allows you to search for agencies and providers that offer services you need by location and type of service.