



PROVIDER ALERT

AUTHORIZATION AND PAYMENT PROCESS FOR INDIVIDUALS COMMITTED FOR RESIDENTIAL SUBSTANCE ABUSE TREATMENT VIA HEALTH- GENERAL §8-507

JUNE 22, 2016

Effective July 1, 2016, authorizations for placements under Health-General §8-507 will be performed by Beacon Health Options, and not by the Justice Services Division of the DHMH Office of Forensic Services.

The workflow for the §8-505 process will remain unchanged. Courts will continue to forward orders for evaluation to Justice Services, and contracted evaluators in all parts of the state will continue to conduct evaluations according to longstanding practice.

Upon a determination that an individual has a substance use disorder and is matched via ASAM criteria to a residential level of care (level 3.3 or 3.5), the evaluation will be forwarded to Beacon Health Options for review and approval. Initial approvals will be for 60 days, and programs will be able to request extensions in 30 day increments thereafter.

The 8-507 process is a state funded service, and prompt billing by providers is essential to manage the budget. Therefore, please note that under the change from the current process: Payment is contingent on authorization prior to commencement of treatment, and also on prompt billing within 30 days of the service date.

Should a dispute arise, in which Beacon denies authorization, but where the provider believes that further residential treatment is required, providers should use the standard appeals process, found at



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<http://maryland.beaconhealthoptions.com/provider/manual/CH10-Grievances-and-Appeals.pdf>

Beacon Health Options will conduct a series of webinar trainings during the month of June to assist programs properly administer this change. These trainings will be announced in an upcoming provider training alert.