Notification Regarding Changes Related to Child/Adolescent Non-Acute Partial Hospitalization Program (PHP) Services

In an effort to improve the quality of Child and Adolescent Partial Hospitalization Program services effective September 1, 2012, Community Care is implementing a requirement that Interagency Service Planning Team (ISPT) meetings occur for all Child and Adolescent Non-Acute Partial Hospitalization referrals for Health Choices Carbon, Monroe and Pike County Members prior to a provider requesting an initial authorization. Also, Community Care will require that non acute partial initial and continued stay requests be faxed to the office listed below.

Implementation of ISPT meetings for all Child and Adolescent PHP referrals:

• At the point where a decision is made to refer a child to a PHP, the referring organization or PHP must schedule an ISPT meeting and invite the Community Care, Care Manager. Please fax the invites and requests to the Tobyhanna office at 1-866-562-2405. The notification of the invitation must be received at least seven days prior to the scheduled ISPT meeting.
• In addition to the Community Care, Care Manager, the interagency team should include at a minimum, the child, parent(s) or legal guardian(s), case manager, providers who are currently rendering services to the child, a representative of the school district, and any other child welfare or child serving agencies that are providing services to the child and family.
• The purpose of the ISPT meeting is to allow the team to determine if Partial Hospitalization is the appropriate level of care, identify alternatives if needed, and best identify the type of PHP for referral, when applicable.
• If Partial Hospitalization is recommended by the interagency team, the PHP provider will be required to fax the CMP Pre-Certification authorization request to Community Care within 5 business days following the ISPT meeting. The Care Manager may contact the provider to request additional information to help substantiate the request.
• The authorization period for Child/Adolescent Non-Acute PHP for both pre-certification and continued stay will be no longer than three (3) months or 90 days.
• Upon review of the pre-certification and continued stay forms the Care Manager may initiate a clinical discussion with the provider if needed. Any concerns from the Care Manager related to the pre-certification, continued stay, or discharge will be referred to the Physician Advisor (PA).
• Please continue to utilize the same continued stay and discharge process.
• Continued stay requests to be at least 14 calendar days prior to the last covered day.

Community Care would like to also inform you that the authorization period for Adult PHP services, to include both pre-certification and continued stay authorization requests, will be no longer than three (3) months. Any authorizations approved prior to the effective date on this notification will continue to the end of the authorized period.

Please note that there has been some additional information added to the Partial Hospitalization Program Notification Form in both the Adult and Child/Adolescent forms. The additional information has been added to reduce the need for additional information being requested on an individual basis. The authorization request forms are on our website and can be accessed via: www.ccbh.com/providers/phealthchoices/forms/index.php.