



# Provider Notice 1.2

September 10, 2007

## Service Authorization Letters

- Effective immediately all Service Authorization Letters will be posted in PDF format on the secure website of Provider Connect. These may be obtained similar to printing claim Remittance Advice. Authorization letters will not longer be mailed, except upon special request.

## Provider Manual Changes

Introduction:

- No Changes

### Section 1: General Provider Responsibilities

- NEW – Introduction to Training
- Information Updates – New Provider Information Update Form is available on our website or contact the Director of Provider Network at 1-866-547-0222 and one will be mailed or faxed to you.

### Section 2: Quality Assurance and Performance Improvement

- Provider may receive a copy of the Quality Management Plan upon request by contacting the Director of Quality Improvement at 1-866-547-0222.

### Section 3: Utilization Management Program

- NEW – Guidelines for Determining Medical Necessity and Appropriate Level of Care
- GAF Language has been struck, refer to Guidelines for Determining Medical Necessity and Appropriate Level of Care
- Psychiatric Rehabilitation – Child, Adolescent and Adult – Targeted Case Management Services has it's own section.
- New – Targeted Case Management Services
- Special Note – NEW – Discharge from any inpatient mental health facility – definition of Homelessness has now been added to this box.

### Section 4: Member Grievances

- Address update for SRS

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*Changes will go into effect 30 days following the date of publication of Provider Notice.*

### Section 5: Credentialing Services

- NEW – and Certification has been added to the title of this section
- NEW – Supervision must be provided by a person eligible to provide Medicaid services and who is licensed at the clinical level or who is a physician. All services must be rendered within the scope of the provider’s professional license.
- Provider Site Tool – A score of 80% on the site visit is required has been replaced with – The assessment tools, and related processes including corrective action requirements will be distributed to all Providers.
- Certification of Non-LMHP Providers – has been replaced with – NEW – Certification of ALL Providers

### Section 6: Provider Responsibilities

- New – Language line Service is now available for our members.
- Cultural/Ethic/Racial Sensitivity – language has been enhanced
- Access Standards – Definitions of Emergent Care, Urgent Care, and Routine Care have been added to Access Standard Table.
- Provider Reporting – New – Two very important dates instead of three. “First Offered” Date has been removed.

### Section 7: Suspected/Substantiated Fraud and Abuse

- In Addition, KHPA has established a hotline to report suspected fraud and abuse...has been struck. Call KHS at 1-866-547-0222 between the hours of 7:00 AM and 6:00 PM, Monday through Friday.

### Section 8: Member Registration and Authorization for Additional Services

- NEW – Special Health Care Needs language has been added to this section.
- Outpatient Registration Process – NEW –fax number change – from 785-575-9346 to 785-232-2610.

### Section 9: Claims Overview

- Please Note box – NEW – In order to be paid through Kansas Health Solutions (for the PAHP program of mental health services), providers AND LICENSED PRACTITIONERS Must also be a Medicaid-enrolled provider.
- New – Inserted CMS 1500 Claim Form and instructions

## Section 10: Plan Benefits/Services

- NEW – Early Childhood Mental Health/Behavioral Health Services have been added.
- NEW – Documentation of Therapy Notes Guidelines have been added.
- NEW – Guidelines for Documenting Medication Checks have been added.
- NEW – Guidelines for Documenting Psychosocial Group Notes have been added.
- Rehabilitation Services – Crisis Intervention – Limitations/Exclusions – have been revised to be consistent with the fee schedule.
- Targeted Case Management – Eligibility Criteria – this section has enhanced language.
- NEW – Guidelines for Case Management Progress Notes have been added.
- Kan be Healthy is now – Early Childhood Mental Health
- SED Waiver – Parent Support and Training – Provider Qualifications – Completion of Parent Support Training according to a curriculum approved by SRS...within one year of hire has been struck.
- SED – Attendant Care – Guidelines for Attendant Care Documentation has been added.
- 1915(b) Services – Attendant Care - Guidelines for Attendant Care Documentation has been added.

## Section 11: General Definitions

- #21 – “Medical Necessity” NEW – f. Guidelines for Determining Medical Necessity and Appropriate Level of Care

Forms – Will no longer be found at the back of the Provider Manual - NEW – Find forms on the KHS website at [www.kansashealthsolutions.org](http://www.kansashealthsolutions.org) or call 1-866-547-0222 and the Director of Provider Network Management will have them mailed to you.

You will find the revised Provider Manual at the KHS website: [www.kansashealthsolutions.org](http://www.kansashealthsolutions.org)  
Or you may call 1/866/547/0222 and ask for Kim Brown and one will be mailed to you. You may also e-mail Kim at [kimb@kansashealthsolutions.org](mailto:kimb@kansashealthsolutions.org)