

Continued Care Authorization Process for ICF-A Care

The Medicaid Drug Treatment Workgroup has developed and approved the following protocols regarding continuing care authorization in an ICF-A facility:

- The provider must call an MCO to request additional authorization of care by 12:00 p.m. (Eastern Time) of the last day of covered services.
- The MCO case manager must respond to the provider by 4:00 p.m. (Eastern Time) with a final disposition.
- If a peer to peer physician review is requested, it must take place within 24 hours of 4:00 p.m. (Eastern Time) of the last covered day.
- If either party is unavailable for peer to peer physician review within that time frame, the unavailable party assumes the financial risk.
- If the last day of an authorized ICF-A stay is on a Saturday, the concurrent review will occur on Friday.
- If the last day of an authorized ICF-A stay is on a Sunday, the concurrent review will occur on the following Monday.
- If a HealthChoice enrollee's eligibility status changes to Medicaid Fee-for-Service while receiving treatment from an ICF-A provider, and the recipient is reenrolled in same or new MCO, the ICF-A stay will be treated as a new admission for purposes of authorization.
- **This will be effective June 1, 2001.**