

Behavioral Health Authorization Requests After the October 1st, 2015 ICD-10 Implementation Date

On June 20th, 2015, Alaska Medical Assistance implemented the ICD-10 system updates to the Alaska Medicaid Management Information System (MMIS). Effective in October, all behavioral health authorization requests with a treatment plan begin date on or after October 1st, 2015 must incorporate an ICD-10 diagnosis code.

DSM-IV-TR codes must continue to be used for behavioral health authorization requests with treatment plan begin dates up to and including September 30th, 2015.

Please remember that claims may not contain both ICD-9 and ICD-10 diagnosis code sets on the same claim form after October 1, 2015. A claim, including one with multiple claim lines for many dates of services, may only have one diagnosis code set associated with it. After October 1, 2015, providers may not bill multiple dates of services that are both before and after October 1, 2015 on the same claim form.

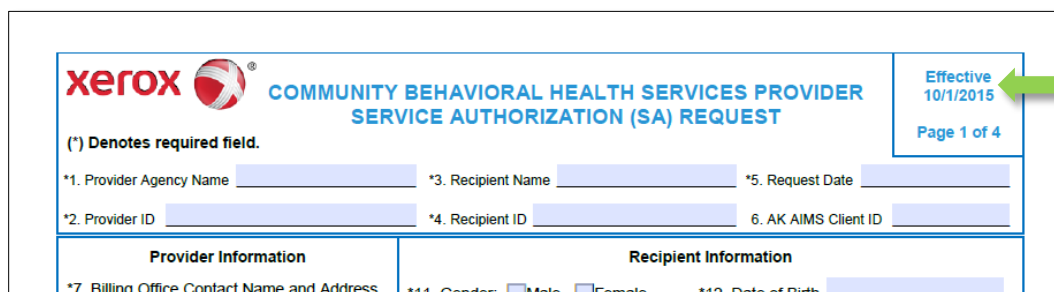
Behavioral Health Authorization Requests Submitted via Paper or Fax


All Community Behavioral Health Services (CBHS), Mental Health Physician Clinic (MHPC), and Residential Behavioral Rehabilitation Services (BRS) service authorization requests submitted by mail or fax for treatment plans with begin dates on or prior to September 30th, 2015 containing DSM-IV-TR codes will be processed accordingly.

CBHS, MHPC, and BRS requests containing DSM-IV-TR codes for treatment plans on or after October 1st, 2015, or that are submitted on the incorrect form, will be suspended until the requesting provider submits corresponding ICD-10 codes or the correct form. Requesting providers will receive notification to submit the correct form or applicable ICD-10 codes for treatment plans with begin dates on or after October 1st, 2015.

All behavioral health authorization request forms have been updated to accommodate ICD-10 diagnosis codes and descriptions. There is also a section to further elaborate on some of the diagnosis codes.

Below is the new CBHS authorization request that must be used after the October 1st, 2015 ICD-10 implementation date.



xerox  **COMMUNITY BEHAVIORAL HEALTH SERVICES PROVIDER SERVICE AUTHORIZATION (SA) REQUEST**

Effective 10/1/2015
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(*) Denotes required field.

*1. Provider Agency Name _____ *3. Recipient Name _____ *5. Request Date _____
*2. Provider ID _____ *4. Recipient ID _____ 6. AK AIMS Client ID _____

Provider Information	Recipient Information
*7. Billing Office Contact Name and Address _____	*11. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female _____ *12. Date of Birth _____



Providers must ensure that they are using the appropriate form that corresponds to the treatment plan begin date.

Use this form for treatment plans that are implemented on or after 10/1/15.

*18. Treatment Plan Date: Enter the Treatment Plan date that supports this Service Authorization Request.

(a) New Request – SA From: Through: (May not exceed 135 days correlated to treatment plan date.)

On all of the new forms, the *Multiaxial DSM-IV-TR Diagnosis* and *Axis IV* sections have been replaced with a comprehensive *Diagnosis Codes* section that incorporates behavioral, medical and other, and psychosocial ICD-10 diagnosis codes.

*14. Diagnosis Codes

(a) Behavioral ICD-10 Diagnosis Code(s) (Mental, Behavioral, and Neurodevelopmental Disorders (F01-F99)):

ICD-10 Code	Description	Comment

(b) Medical and other ICD-10 Diagnosis Code(s):

ICD-10 Code	Description	Comment

(c) Psychosocial ICD-10 Diagnosis Code(s) (Injury, Poisoning, and Certain Other Consequences of External Causes (T07-T88) and Factors Influencing Health Status and Contact with Health Services (Z00-Z99)):

ICD-10 Code	Description	Comment

There is also a section on all of the forms to elaborate on any psychosocial ICD-10 diagnosis codes.

(d) Further description from Psychosocial ICD-10 Diagnosis Code(s), above:

The new MHPC and BRS authorization request forms reflect the same changes as the new CBHS authorization request form shown above.

Behavioral health providers must ensure they are using the appropriate version of the form based on the treatment plan begin date. If you have any questions, contact Provider Inquiry at 907.644.6800, option 1, 1, or 800.770.5650, option 1, 1, 1 (toll-free in Alaska).