



The purpose of this form is to request a behavioral health prior authorization. Please fax this completed form to (318) 812-6249, Attn. Medical Management. Requests **without** supporting clinical documentation will be returned to the provider, delaying the review process.

If you have questions about this form, contact Blue Advantage Medical Management at 1-866-508-7145, option 3, option 3. Please complete all applicable areas below.

Behavioral Health Authorization Request Form

Request Date

____/____/____

Date of Admission/Service Start

____/____/____

Time of Admission

TYPE OF REVIEW

- Precertification
- Concurrent Review
- Discharge (Please complete DC planning on pg.2)

Estimated Length of Care:

INPATIENT SERVICES

- Inpatient Mental Health
- Inpatient Detox

Readmission within 30 days

- Yes No

Primary Diagnosis Code (ICD-10)

Secondary Diagnosis Code (ICD-10)

Was the member admitted through the ER?

- Yes No

If yes, please provide location, date and time of ER visit.

OUTPATIENT SERVICES

- Individual Counseling
- Psychological Testing
- IOP
- Medication Management
- PHP

How often do these services occur?

Primary Diagnosis Code (ICD-10)

Secondary Diagnosis Code (ICD-10)

PATIENT INFORMATION

Patient Name

Member ID Number

Address

Date of Birth

Emergency Contact

Phone

Parent/Guardian/Legal Representative

Alternate Phone

The information on this form is protected health information and subject to all privacy and security regulations under HIPAA.

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Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, incorporated as Louisiana Health Service & Indemnity Co., offers Blue Advantage (PPO). Both are independent licensees of the Blue Cross and Blue Shield Association.

Blue Advantage from Blue Cross and Blue Shield of Louisiana HMO is an HMO plan with a Medicare contract. Blue Advantage from Blue Cross and Blue Shield of Louisiana is a PPO plan with a Medicare contract. Enrollment in either Blue Advantage plan depends on contract renewal.

PROVIDER INFORMATION	
Attending MD	NPI
Primary Clinician	NPI
Facility/Clinic	NPI
Person to Contact regarding this request	
Phone Number	Fax Number
CLINICAL INFORMATION REQUIRED – Please check all applicable documentation included with this request	
<input type="checkbox"/> Initial Psych Evaluation	<input type="checkbox"/> Treatment Plan
<input type="checkbox"/> PEC/CEC	<input type="checkbox"/> All nursing, psychiatric, psychosocial and medical evaluation available
DISCHARGE PLANNING AND FOLLOW-UP FOR INPATIENT, PHP AND IOP	
Discharge Planner	Phone number
Discharge Date	Discharge Time
DC Diagnosis (ICD-10)	
Address upon discharge	
Phone number upon discharge	
Has a seven day follow up aftercare appointment been scheduled? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain:	
Discharge summaries must be faxed to (318) 812-6249 within 48 hours of discharge.	
Blue Advantage collects data for the Healthcare Data and Information Set (HEDIS) regarding follow up care for patients who have Inpatient Psychiatric treatment. The CMS Inpatient Psychiatric Facility Quality Reporting Program (IPFQR) encourages facilities and clinicians to improve quality of Inpatient care by tracking 7- and 30 day follow ups. Complete the following information regarding follow up appointments.	
Follow-up Provider	Appointment Date and Time
Does the patient require transportation assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No Blue Advantage members may qualify for transportation assistance. Contact 1-866-508-7145 for assistance.	
Blue Advantage recognizes the importance of collaboration between behavioral health care and medical care. We encourage facilities to communicate with the patient's medical providers to ensure coordination of care. Our behavioral health staff is available to assist with this process by calling 1-866-508-7145.	
Has the patient's primary care provider (PCP) been notified of this admission? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain:	

Requirements for Inpatient Providers:

- Schedule the first follow-up appointment for the patient. All inpatient discharges from behavioral health facilities require a seven-day and thirty-day follow-up with a behavioral health professional. Follow-up visits with primary care provider do not sufficiently meet the follow-up requirements.
- Begin discharge planning on the day of admission. Include utilization review, discharge planner, the patient and his/her family, and others desired by the patient.
- Coordinate care by notifying the patient's primary care provider of the recent hospitalization and provide a current listing of all prescribed medications. Follow-up should also be scheduled with primary care provider.
- Conduct follow-up calls with the patient to encourage medication adherence and discuss any side effects.
- Seek Blue Advantage assistance with any scheduling challenges before the patient is discharged, if needed.
- Share information with Blue Advantage. As a reminder, a release of information form is NOT required for a provider to release a member's relevant clinical information to Blue Advantage Behavioral Health staff per HIPAA Privacy Rule at 45 CFR 164.501.

A list of services that require prior authorization can be found in the *Provider Quick Reference Guide* on the Blue Advantage Provider Portal accessed through iLinkBlue (www.BCBSLA.com/ilinkblue).