



# Provider Notice

January 23, 2025

## **Behavioral Health (BH) Administrative Day Authorization Support Effective 02/24/25**

CountyCare Health Plan is committed to ensuring members receive the best care and supporting provisions for discharge. Per the Administrative Day Policy reminder notice posted 7/21/23 (found [here](#)), Administrative Days are available for members through a process managed by the CountyCare Utilization Management (UM) Teams who manage both medical and behavioral health (BH) admissions. The full IAMHP policy can be found [here](#). (See **Appendix I**).

Starting **02/24/25**, our BH process will be enhanced to proactively evaluate, escalate, and collaborate on potential requests for Administrative Day Authorizations. Our goal is to ensure that facilities are taking full advantage of the use of Administrative Days when applicable for our members.

### **As previously noted in the Administrative Day Policy notice, the following apply:**

- Members are covered by Medicaid and initially admitted with a diagnosed condition requiring an acute inpatient level of care, medical or behavioral health care.
- Providers should notify CountyCare BH UM of the initial member admission within one business day.
- The initial admission is authorized (approved) by CountyCare.
- At the time of Administrative Day(s) authorization requests, the following should apply:
  - Member no longer meets medical necessity criteria for inpatient acute care.
  - There is a specific and documented discharge plan in place to a lower level of care.
  - There are documented barriers to implementation of the discharge plan that are beyond the control of the provider, facility and CountyCare.
- As noted in the Administrative Day Policy notice, a separate authorization will be provided by BH UM for the use of administrative days.

### **The enhanced process will include the following:**

- BH UM monitoring documented discharge challenges and outreaching to facilities on members who could benefit from the use of Administrative Days as acuity resolves.
- Facilities engaging the BH UM team to collaborate on the needs of the member (use of days, number of Admin Days, discharge planning updates, and discharge date/clinical).
- BH UM being available to facilities for escalation needs and coordination with our Case Management team to ensure the transition of care/services are in place.
- BH UM can be reached at 1-855-444-1661, option 5- ask for a BH UM Clinician.

**This policy is intended to provide guidance for In-Network facilities. All Out of Network requests are subject to prior authorization along with Medical Director review and may be redirected to an In-Network facility.**

### **Contact Us**

Please contact CountyCare Provider Services at **312-864-8200, Option 6**. You can also use our Interactive Voice Response (IVR) system to verify eligibility. The Provider Services Representatives can assist you with eligibility and claim status. They can also connect you with your assigned PR Representative.

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact your assigned Provider Relations (PR) Representative or if you do not know your assigned PR Representative, please contact [CountyCareProviderServices@cookcountyhhs.org](mailto:CountyCareProviderServices@cookcountyhhs.org)

## Reminder

There are multiple ways to request Prior Authorization and notification:

- ***In-network providers only*** may submit requests via CountyCare Health Plan Portal for quicker response. Visit CountyCare Provider Portal for details on sign up. **You can find the portal link [here](#).**
- Submit via phone by calling 312-864-8200, option 5, or 1-855-444-1661, option 5.
- Submit via fax by visiting [www.countycare.com](http://www.countycare.com) for fax numbers and details.