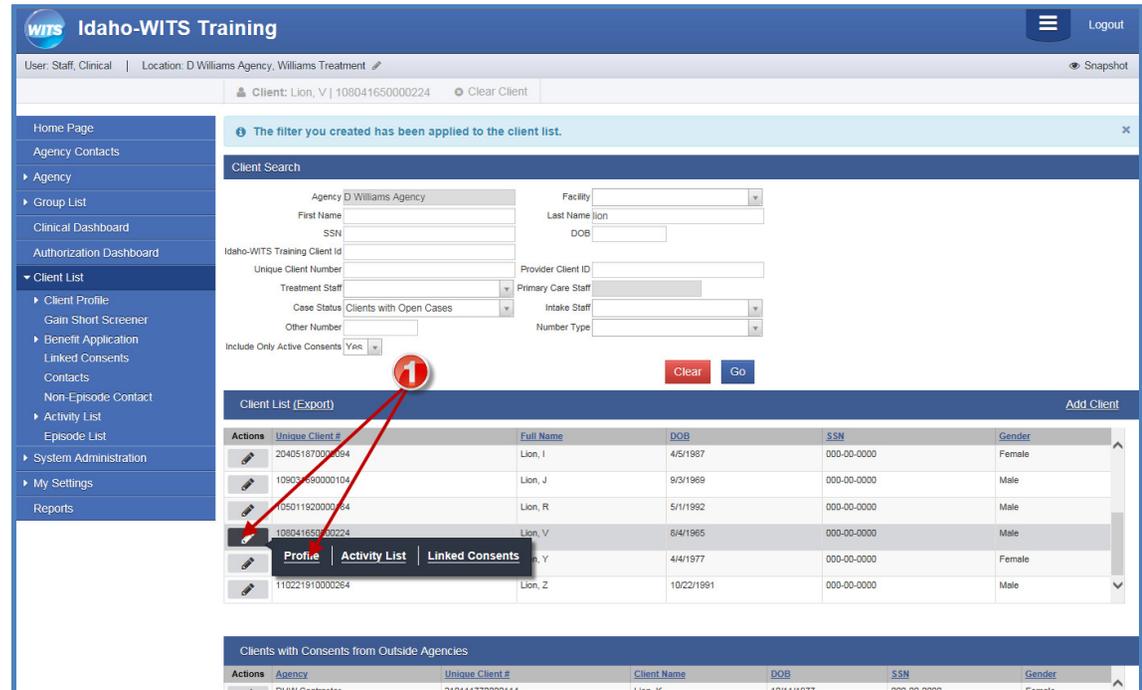


# Authorization Change Request – Add New Service for ATR 4 Clients who are not changing facilities or agencies

These instructions are to be used in the following Situations.

- Transfer an ATR 4 client from one treatment Level of Care (LOC) to a different LOC at the current facility at my agency.

1. **Getting here:** Login, select the **Facility**, select **Client List** on the Navigation Pane (left menu) to generate the Client Search Screen, find client, click  and select **Client Profile**.



The screenshot displays the Idaho-WITS Training interface. The top navigation bar includes the WITS logo, user information (User: Staff, Clinical), location (Location: D Williams Agency, Williams Treatment), and a Logout button. Below the navigation bar, there's a search bar with the text "Client: Lion, V | 10804165000224" and a "Clear Client" button. A notification banner states "The filter you created has been applied to the client list." The main content area is divided into two sections: "Client Search" and "Client List (Export)". The "Client Search" section contains various filters for Agency, Facility, First Name, Last Name, SSN, DOB, Idaho-WITS Training Client Id, Unique Client Number, Provider Client ID, Treatment Staff, Primary Care Staff, Case Status, Intake Staff, Other Number, and Number Type. There are "Clear" and "Go" buttons. The "Client List (Export)" section is a table with columns for Actions, Unique Client #, Full Name, DOB, SSN, and Gender. A red circle with the number 1 highlights the pencil icon next to the client with Unique Client # 10804165000224. A tooltip is visible over this icon, showing options: Profile, Activity List, and Linked Consents. Below the main table, there's a section for "Clients with Consents from Outside Agencies" with a similar table structure.

Actions	Unique Client #	Full Name	DOB	SSN	Gender
	204051870001394	Lion, I	4/5/1987	000-00-0000	Female
	108031990000104	Lion, J	9/3/1969	000-00-0000	Male
	05011920000104	Lion, R	5/1/1992	000-00-0000	Male
	10804165000224	Lion, V	6/4/1965	000-00-0000	Male
	Y	Y	4/4/1977	000-00-0000	Female
	110221910000264	Lion, Z	10/22/1991	000-00-0000	Male

Actions	Agency	Unique Client #	Client Name	DOB	SSN	Gender
	D Williams Agency	10804165000224	Lion, V	6/4/1965	000-00-0000	Male

2. Select the **Authorization** on the Navigation Pane

The screenshot shows the 'Client Profile' page for a client named 'Lion, V'. The left navigation pane has 'Authorization' highlighted with a red circle and a red arrow pointing to it. The main content area shows the 'Profile' section with fields for First Name, Middle Name, Last Name, Gender, DOB, SSN, etc. Below the profile section is an 'Administrative Actions' section with 'Cancel', 'Save', and 'Finish' buttons. Below that is an 'Alternate Names' table and an 'Addresses' table.

Actions	Last Name	First Name	Middle Name	Client Alias Type

Actions	Address Type	Address	Confidential	Created	Updated
	Client Home	1255 Venus Circle Nez Perce, ID 87956	No	3/4/2015	3/4/2015

3. Click  and select **Profile** to review the active Authorization.

The screenshot shows the 'Authorization List' table. The first row is highlighted, and a red circle with the number '3' is placed over the 'Profile' button in the 'Actions' column of that row. A red arrow points from the '3' to the 'Profile' button.

Actions	Auth #	Payer	Status	Effective Date	End Date	Authorized	Encumbered	Expended	Available	Last Activity Date
	3389	ATR4 [ATR4, 7919BPA]	Active	4/17/2015	4/30/2015	\$961.80	\$0.00	\$0.00	\$961.80	4/17/2015
		OHW Adult [State General, 1]	Closed	7/1/2014	3/18/2015	\$0.00	\$0.00	\$0.00	\$0.00	3/18/2015
	2036	OHW Adult [State General, 1]	Closed	7/1/2014	4/17/2015	\$0.00	\$0.00	\$0.00	\$0.00	4/17/2015

4. Click **Requests** under the Actions box.

User: Staff, Clinical | Location: D Williams Agency, Williams Treatment | Snapshot

Client: Lion, V | 10804165000224 | Clear Client

### Authorization

Group Enrollment: ATR4 | Status: Active  
Plan: ATR4 | Contract: 7919BPBPA - DHW-D Williams (ATR4) / 12/1/2014 - 9/29/2017 - ATR4-ATR4  
Authorization #: 3389 | Date Approved: 4/17/2015  
Administering Agency: A Managed Service Contractor | Updated Date: 4/17/2015 1:10 PM  
Effective Date: 4/17/2015 | Updated By: Buskey, Michelle  
End Date: 4/30/2015 | ATR Intake: 4/17/2015-Williams Treatment

Comments

### Authorized Services List

Service	Authorized Units	Authorization Amt	Encumbered	Expended	Available Units
Outpatient	25	\$231.00	\$0.00	\$0.00	25.00
Drug/Alcohol Testing	25	\$337.50	\$0.00	\$0.00	25.00

Actions:

Total Authorized: \$568.50  
Total Encumbered: \$0.00  
Total Expended: \$0.00  
Total Available: \$568.50

5. The Authorization Change Request List displays. Click **Add New**.

User: Staff, Clinical | Location: D Williams Agency, Williams Treatment | Snapshot

Client: Lion, V | 10804165000224 | Clear Client

### Provider Authorization Change Request

Group Enrollment: ATR4 | Status: Active  
Plan: ATR4 | Contract: 7919BPBPA - DHW-D Williams (ATR4) / 12/1/2014 - 9/29/2017  
Authorization #: 3389 | Date Approved: 4/17/2015  
Effective Date: 4/17/2015 | Updated Date: 4/17/2015  
End Date: 4/30/2015 | Updated By: Buskey, Michelle  
ATR Intake: 4/17/2015-Williams Tre

Comments

### Authorization Change Request List

Actions	Date	Type	Service	Units	End Date	Status	Justification

6. The Authorization Change Request List displays. Select **Add New Service**.

7. Select the **Service**, enter the **Number of Requested Units**, and select the **Justification Reason**.

8. **Comments.**

- **Transfer an ATR 4 client from a treatment LOC to a different treatment LOC at the current facility at my agency.** Note the current level of care (LOC) and the requested LOC. If new or additional RSS services are requested, include the name of the service, number of units, and justification for each RSS service. Include the name of the Stand Alone RSS provider if applicable applicable (create a provisional voucher for the provider after the authorization change request is complete).

9. Click **Add ASAM Concurrent Review**.

The screenshot shows the 'Authorization Change Request Profile' form for a client named 'Lion, V'. The 'Type' dropdown menu is highlighted in yellow, and a red arrow points to it with a circled '6'. A text box next to the arrow says 'Select the Type of Add New Service'. The form includes fields for Service, Units, End Date, Justification, Requestor Comments, Approver's Comments, Deny Reason, and Other Description. At the bottom, there is an 'Actions' section with a button labeled 'Add ASAM Concurrent Review' and 'Cancel', 'Save', and 'Finish' buttons.

The screenshot shows the 'Authorization Change Request Profile' form with several fields filled out. A red arrow points to the 'Type' dropdown menu, which is set to 'Add New Service', with a circled '7'. Another red arrow points to the 'Service' dropdown menu, which is set to 'Intensive Outpatient', with a circled '8'. A third red arrow points to the 'Justification' text area, which contains the text 'Client needs this service as pa...', with a circled '9'. The 'Requestor Comments' field contains the text 'LOC change from OP to IOP. New RSS services requested: Case Management 90 units, Drug Testing, 90 units. Client needs case management and therapeutic drug testing while in treatment.' The 'Actions' section at the bottom has the 'Add ASAM Concurrent Review' button highlighted. 'Cancel', 'Save', and 'Finish' buttons are also visible.

10. Update the **Level of Care** for each Dimension.

11. Update **Comments** for each Dimension.  
Enter the updated information at the top of each Comment field and document it as: Update (date). **DO NOT DELETE ANY PREVIOUS COMMENTS.**

12. Select the **Requested Level of Care** and the **Current Level of Care**.

13. Click **Sign ASAM**.

Client: Lion, V | 10804165000224 | 1 Clear Client

ASAM — PPC2R

Dimension 1 - Acute Intoxication and/or Withdrawal Potential

Update the LOC. Level of Care: I.0 Outpatient

Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 1.

Enter information at the top of the Comment field with the date.

Dimension 2 - Biomedical Conditions and Complications

Update the LOC. Level of Care: I.0 Outpatient

Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 2.

Enter information at the top of the Comment field with the date.

Dimension 3 - Emotional, Behavioral, or Cognitive Conditions and Complications

Update the LOC. Level of Care: I.0 Outpatient

Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 3.

Enter information at the top of the Comment field with the date.

Dimension 4 - Readiness to Change

Update the LOC. Level of Care: I.0 Outpatient

Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 4.

Enter information at the top of the Comment field with the date.

Dimension 5 - Relapse, Continued Use, or Continued Problem Potential

Update the LOC. Level of Care: I.0 Outpatient

Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 5.

Enter information at the top of the Comment field with the date.

Dimension 6 - Recovery / Living Environment

Update the LOC. Level of Care: I.0 Outpatient

Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 6.

Enter information at the top of the Comment field with the date.

Requested Level of Care: II.1 Intensive Outpatient

Current Level of Care: I.0 Outpatient

Clinical Override

Comments

Review Date: 04/02/2015

Program: Williams Treatment/Adult Outpatient : 4/2/201...

Administrative Actions

Sign ASAM

ASAM Notes

Cancel Save Finish

14. Click **Finish**.

Client: Lion, V | 10804165000224 | 1 Clear Client

ASAM — PPC2R

Dimension	Level of Risk	Level of Care	Comments
1 - Acute Intoxication and/or Withdrawal Potential		I,0 Outpatient	Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 1.
2 - Biomedical Conditions and Complications		I,0 Outpatient	Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 2.
3 - Emotional, Behavioral, or Cognitive Conditions and Complications		I,0 Outpatient	Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 3.
4 - Readiness to Change		I,0 Outpatient	Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 4.
5 - Relapse, Continued Use, or Continued Problem Potential		I,0 Outpatient	Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 5.
6 - Recovery / Living Environment		I,0 Outpatient	Update 4/2/15 Enter new ASAM comments for the dimension or indicate No Change. Admission ASAM Comments for Dimension 6.

Requested Level of Care: I,0 Outpatient      Clinical Override: [ ]

Current Level of Care: I,0 Outpatient

Comments: [ ]

Review Date: 4/2/2015      Program: Williams Treatment/Adult Outpatient : 4/2/2015

Administrative Actions

Signed by: Staff, Clinical      Signed on: 3/24/2015

ASAM Notes

Cancel Save **Finish**

15. Click **Finish**.

Authorization Change Request Profile

Type: Add New Service

Service: Intensive Outpatient

Requested Units: 240

End Date: [ ]

Justification: Client needs this service as pa...

Requestor Comments: LOC change from OP to IOP. New RSS services requested: Case Management 90 units, Drug Testing, 90 units. Client needs case management and therapeutic drug testing while in treatment.

Approver's Comments: [ ]

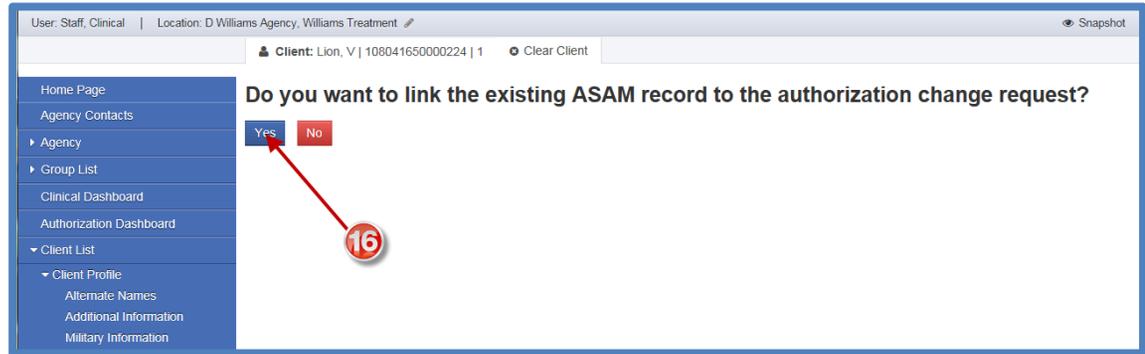
Deny Reason: [ ]      Other Description: [ ]

Actions

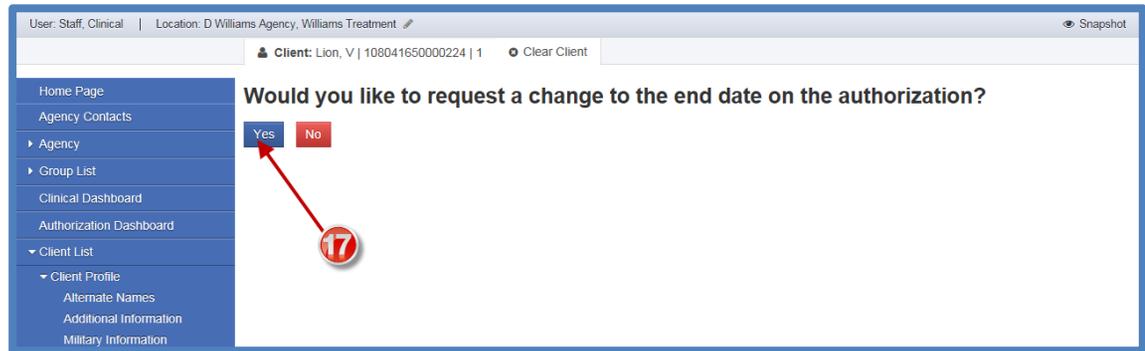
Add ASAM Concurrent Review

Cancel Save **Finish**

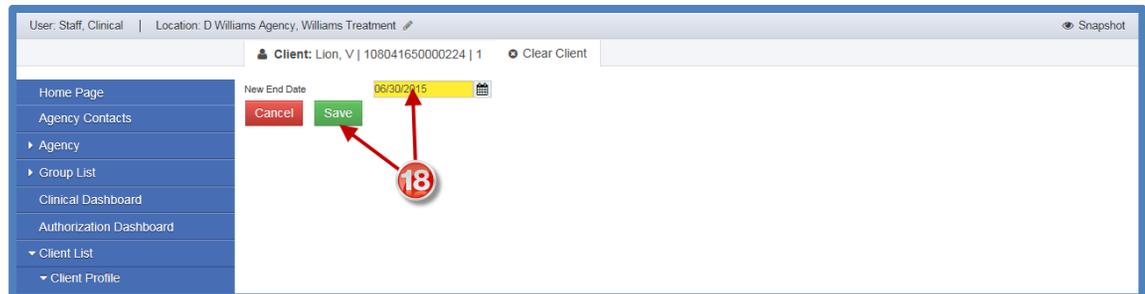
16. Select **Yes** to link the ASAM record with the Authorization Change Request.



17. Select **Yes** to request a change to the end date Authorization if appropriate.



18. Enter the **New End Date** and click **Save**.



19. Click **Finish**.

User: Staff, Clinical | Location: D Williams Agency, Williams Treatment | Snapshot

Client: Lion, V | 108041650000224 | 1 Clear Client

Home Page

Agency Contacts

Agency

Group List

Clinical Dashboard

Authorization Dashboard

Client List

Client Profile

- Alternate Names
- Additional Information
- Military Information
- Contact Info
- Collateral/Cust. Contacts
- Other Numbers
- History
- Client Group Enrollment
- Authorization
- Employment
- Allergies
- Gain Short Screener

Provider Authorization Change Request

Group Enrollment: ATR4 | Status: Active | Contract: 7919BPBA - DHW-D Williams (ATR4) / 12/1/2014 - 9/29/2

Plan: ATR4 | Authorization #: 3389 | Date Approved: 4/17/2015

Effective Date: 4/17/2015 | End Date: 4/30/2015 | Updated Date: 4/17/2015 | Updated By: Buskey, Michelle | ATR Intake: 4/17/2015-Williams Tre

Comments

Authorization Change Request List [Add New](#)

Actions	Date	Type	Service	Units	End Date	Status	Justification
	4/17/2015	Add New Service	Intensive Outpatient (ATR)	240		Pending	See comments.
	4/17/2015	Change Voucher End Date			6/30/2015	Pending	See comments.

**19** → [Finish](#)