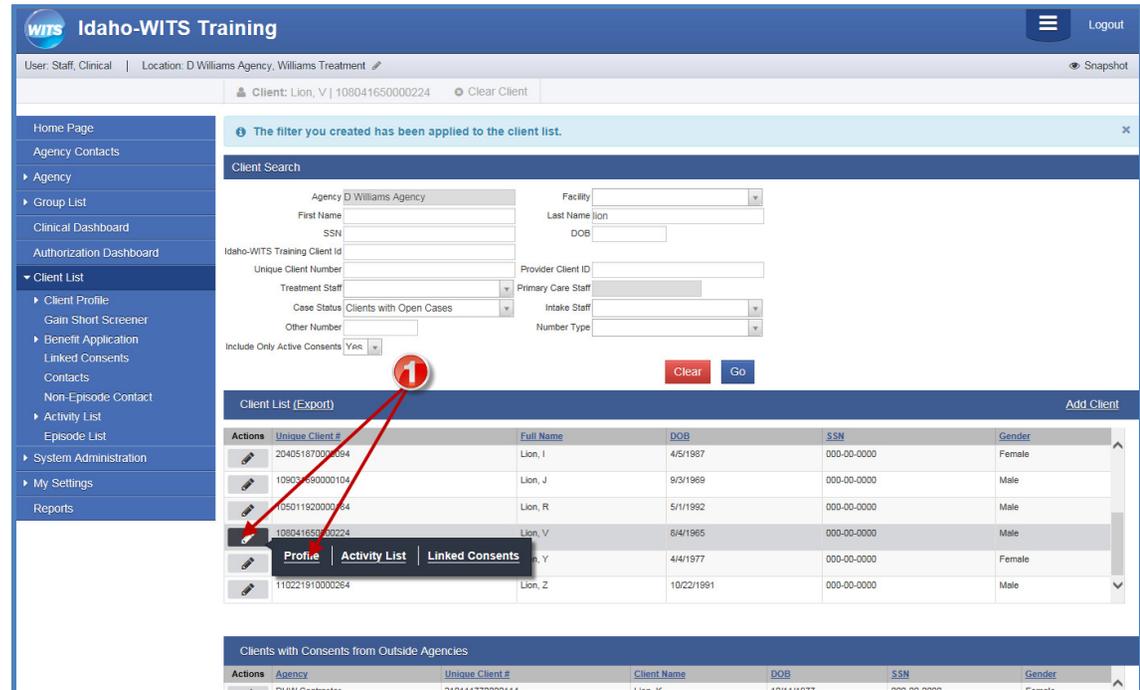


Authorization Change Request – Change to Service for ATR 4 Clients who Transferring to another Agency

These instructions are to be used in the following situations.

- Transfer a client at the same Level of Care (LOC) to a different agency and there are two weeks (14 days) or less before the treatment authorization expires.
- Transfer an ATR 4 client from one treatment Level of Care (LOC) to a different LOC at a different 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 shows the Idaho-WITS Training interface. The navigation pane on the left includes 'Client List' and 'Client Profile'. The main area displays a 'Client Search' form and a 'Client List (Export)' table. A red circle with the number '1' is placed over the pencil icon in the 'Actions' column of the table, with a red arrow pointing to it. A tooltip menu is visible over the pencil icon, showing options: Profile, Activity List, and Linked Consents.

Actions	Unique Client #	Full Name	DOB	SSN	Gender
	2040518700000000	Lion, I	4/5/1987	000-00-0000	Female
	1080416500000000	Lion, J	9/3/1969	000-00-0000	Male
	0501192000000000	Lion, R	5/1/1992	000-00-0000	Male
	1080416500000000	Lion, V	8/4/1965	000-00-0000	Male
	1080416500000000	Lion, Y	4/4/1977	000-00-0000	Female
	1102219100000000	Lion, Z	10/22/1991	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-hand navigation pane is expanded to show 'Client Profile', and the 'Authorization' option is highlighted with a red circle and a red arrow pointing to it. The main content area displays the client's profile information, including first name, middle name, last name, gender, date of birth, and social security number. Below the profile information, there are sections for 'Administrative Actions', 'Alternate Names', and 'Addresses'. The 'Administrative Actions' section has buttons for 'Cancel', 'Save', and 'Finish'. The 'Alternate Names' and 'Addresses' sections have 'Add' buttons and tables for listing names and addresses.

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

The screenshot shows the 'Authorization List' page for the same client. The left-hand navigation pane is expanded to show 'Client Profile', and the 'Authorization' option is highlighted with a red circle and a red arrow pointing to it. The main content area displays a table of authorization records. The table has columns for 'Auth #', 'Payer', 'Status', 'Effective Date', 'End Date', 'Authorized', 'Encumbered', 'Expended', 'Available', and 'Last Activity Date'. 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.

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
	2036	CHW Adult [State General, 1]	Closed	7/1/2014	3/18/2015	\$0.00	\$0.00	\$0.00	\$0.00	3/18/2015
	2036	CHW 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 | 108041650000224 | 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

Authorization

Group Enrollment: ATR4 | Status: Active
Plan: ATR4 | Contract: 7919BPA - 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: Close, **Requests**

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

Finish

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

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

Client: Lion, V | 108041650000224 | 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

Provider Authorization Change Request

Group Enrollment: ATR4 | Status: Active
Plan: ATR4 | Contract: 7919BPA - 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
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Actions: **Add New**

Finish

6. The Authorization Change Request List displays. Select **Change to Service**.

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

Client: Lion, V | 108041650000224 | 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

Authorization Change Request Profile

Type: **Change to Service**

Service: [Dropdown]
Units: [Dropdown]
End Date: [Calendar]
Justification: [Dropdown]
Requestor Comments: [Text Area]
Approver's Comments: [Text Area]
Deny Reason: [Text Area] | Other Description: [Text Area]

Actions: Add ASAM Concurrent Review

Cancel Save Finish

7. Select the **Service** (the current treatment LOC), enter the **Number of Requested Units**, and select the **Justification Reason**.

8. **Comments.**

- **Transfer a client at the same Level of Care (LOC) to a different agency and there are two weeks (14 days) or less before the treatment authorization expires:** Specify the new agency and enter justification for additional units. If new or additional RSS services are requested, include the name of the Stand Alone RSS provider if applicable ,name of the service, number of units, and justification for each RSS service (and complete a provisional voucher if applicable).
- **Transfer an ATR 4 client from a treatment LOC to a different treatment LOC at a different agency:** Specify the new 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 Stand Alone RSS provider if applicable ,name of the service, number of units, and justification for each RSS service (and complete a provisional voucher if applicable).

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

The screenshot shows a web application interface for an "Authorization Change Request Profile". The top navigation bar includes "User: Staff, Clinical" and "Location: D Williams Agency, Williams Treatment". Below this, the client information is "Client: Lion, V | 10804165000224". A left-hand menu contains various options like "Home Page", "Agency Contacts", "Group List", "Clinical Dashboard", "Authorization Dashboard", and "Client List". The main form area is titled "Authorization Change Request Profile" and contains several fields: "Type" (Change to Service), "Service" (Outpatient), "Additional Units" (30), "End Date", "Justification" (Client will continue treatment p...), "Requestor Comments" (Client will be transferring to the Another Treatment Provider...), "Approver's Comments", "Deny Reason", and "Other Description". At the bottom, there is an "Actions" section with a link "Add ASAM Concurrent Review" and buttons for "Cancel", "Save", and "Finish". Three red callout boxes with numbers 7, 8, and 9 point to the "Service" field, the "Justification" field, and the "Add ASAM Concurrent Review" link, respectively.

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 | 108041650000224 | 1 Clear Client

ASAM — PPC2R

Dimension 1 - Acute Intoxication and/or Withdrawal Potential
Update the LOC. Level of Care: 1.0 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: 1.0 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: 1.0 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: 1.0 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: 1.0 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: 1.0 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: 1.0 Outpatient
Current Level of Care: 1.0 Outpatient
Clinical Override: [dropdown]
Comments: [text area]

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	<input type="text"/>	1.0 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	<input type="text"/>	1.0 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	<input type="text"/>	1.0 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	<input type="text"/>	1.0 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	<input type="text"/>	1.0 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	<input type="text"/>	1.0 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: 1.0 Outpatient Clinical Override:

Current Level of Care: 1.0 Outpatient

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

15. Click **Finish**.

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

Client: Lion, V | 10804165000224 Clear Client

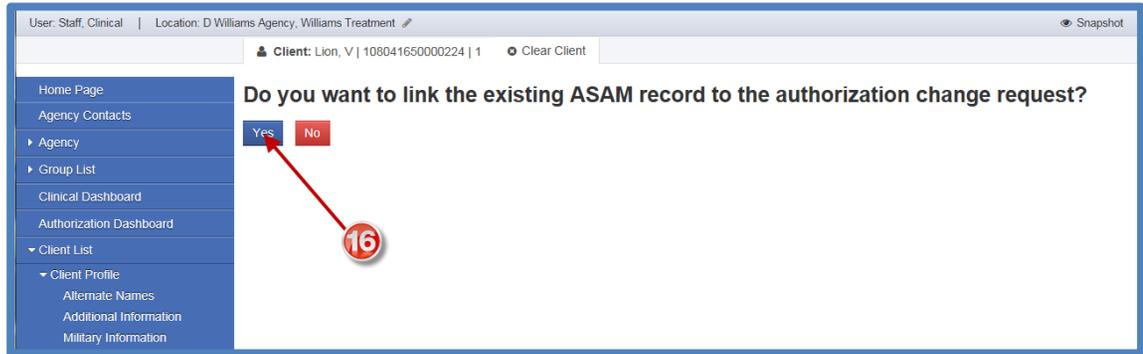
Authorization Change Request Profile

Type	Change to Service
Service	Outpatient (ATR)
Additional Units	30
End Date	
Justification	Client will continue treatment p...
Requestor Comments	Client will be transferring to the Another Treatment Provider. LOC change from IOP to OP. New RSS Services requested. Case Management 30 units for the RSS Stand Alone Provider. Client needs case management while in treatment.
Approver's Comments	
Deny Reason	
Other Description	

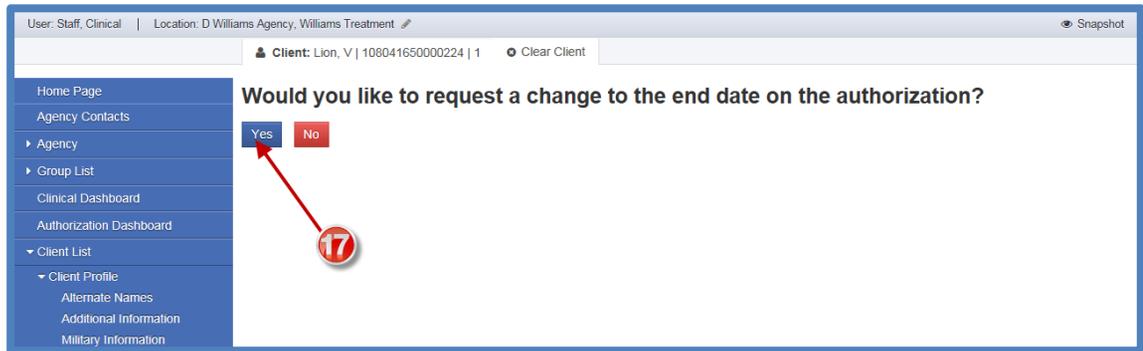
Actions

[Add ASAM Concurrent Review](#)

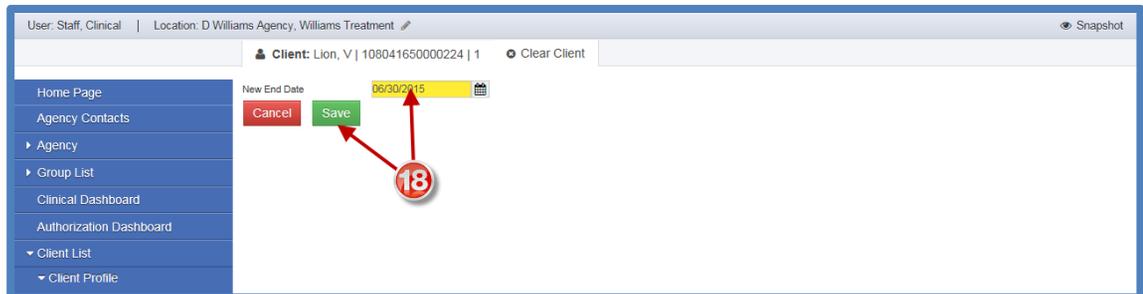
16. Select **Yes** to link the ASAM record with the Authorization Change Request.



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](#)