Authorization Change Request – Change to Service

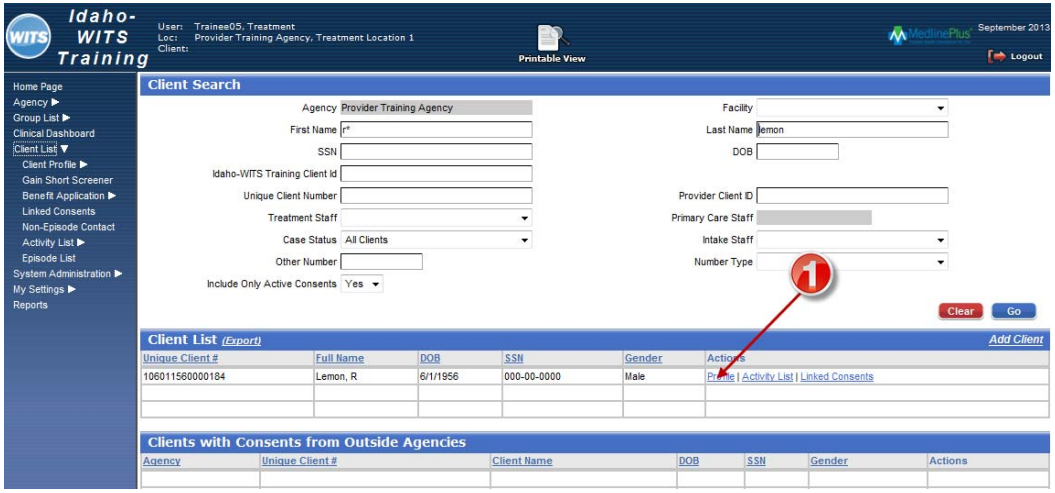
These instructions should be used when:

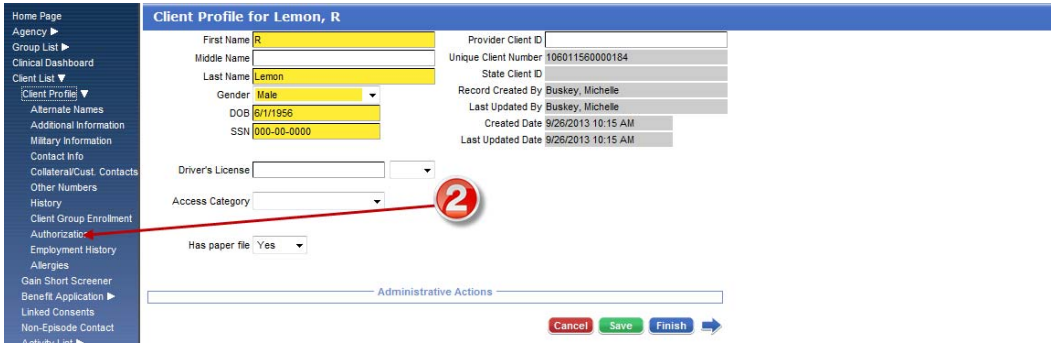
- **A client requires additional units for an existing treatment level of care (LOC)**
- **When the client will be transferring to another agency**
  - **at the same level of care with 14 days or less remaining on the current authorization, or**
  - **the client is changing levels of care (regardless of the number of days remaining on the current authorization)**
- **When the client is funded through IDOC and is moving from one Stage to another Stage.**

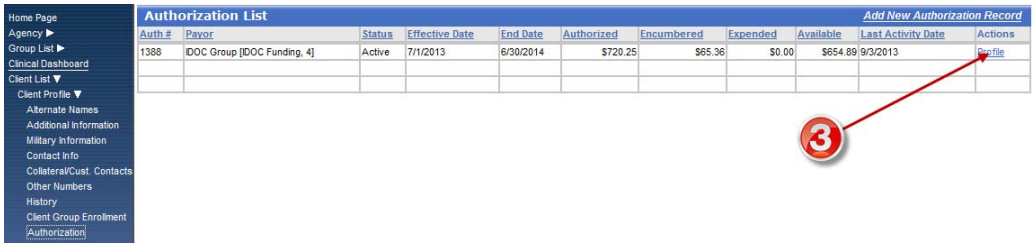
1. **Getting here:** Login, select the **Facility,** select **Client List** on the Navigation Pane (left menu) to generate the Client Search Screen, find client, select **Client Profile**.

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

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







4. Click **Requests**.

5. Click **Add New**.

The voucher can not be edited since Edit Local Voucher Key Activity is not selected for the contract plan.

Authorization for Lemon, R

Group Enrollment	IDOC Group	Status	Active
Plan	IDOC Funding	Contract	4 - IDOC-Provider Training Agency / 7/1/2013 - 6/30/2014 - IDOC Funding-IDOC Gr
Authorization #	1388	Date Approved	7/1/2013
Administering Agency	Idaho Department of Corrections	Updated Date	9/26/2013 10:15 AM
Effective Date	7/1/2013	Updated By	Buskey, Michelle
End Date	6/30/2014	Stage	

Comments

Authorized Services List

Service	Authorized Units	Authorization Amt	Encumbered	Expended	Available Units
Outpatient	25	$355.00	$111.70	$0.00	11.00
Transportation of Client	25	$27.75	$2.22	$0.00	23.00
Drug/Alcohol Testing	25	$337.50	$13.50	$0.00	24.00

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Actions: Close, Requests

Total Authorized:	$720.25
Total Encumbered:	$127.42
Total Expended:	$0.00
Total Available:	$592.83

Finish

Provider Authorization Change Request

Group Enrollment	IDOC Group	Status	AC
Plan	IDOC Funding	Contract	4 - IDOC-Provider Training Agency / 7/1/2013 - 6/30/2014 - IDC
Authorization #	1388	Date Approved	7/1/2013
Effective Date	7/1/2013	Updated Date	9/26/2013
End Date	6/30/2014	Updated By	Buskey, Michelle
		ATR Intake	1/1/0001-
		Stage	

5

Comments

Authorization Change Request List Add New

Date	Type	Service	Units	End Date	Status	Justification	Actions

Finish

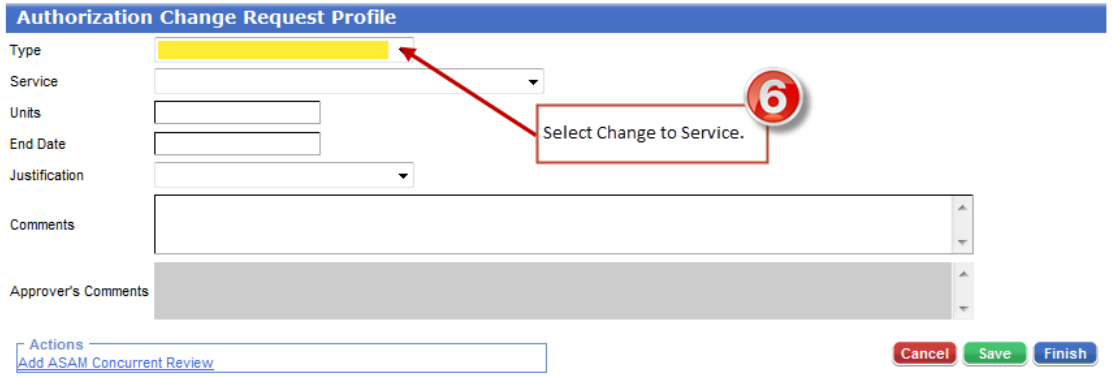
6. Select the type of **Change to Service**.

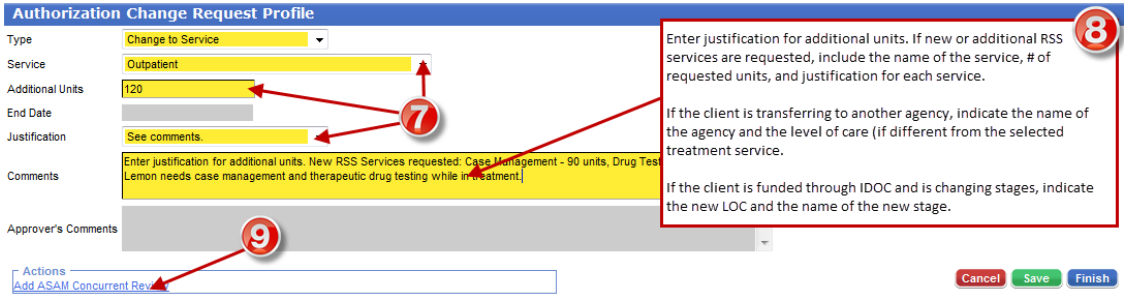
7. Select the **Treatment Service (the current treatment LOC)**, enter the **Number of Requested Units**, and select the **Justification reason**. .
   - If the client is funded through IDOC and changing stages, enter zero units.

8. Enter **Comments:** enter justification for additional units.
   - If new or additional RSS services are requested, include the name of the service, number of units, and justification for each RSS service.
   - If the client is transferring to another agency indicate the agency name and LOC (if different from the selected treatment service.
   - If the client is funded through IDOC, and changing stages, indicate the new treatment LOC and the name of the stage.

   NOTE: A separate Note to Authorizer should ONLY be completed if new or additional RSS services are requested and will be provided by a Stand Alone RSS provider.

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



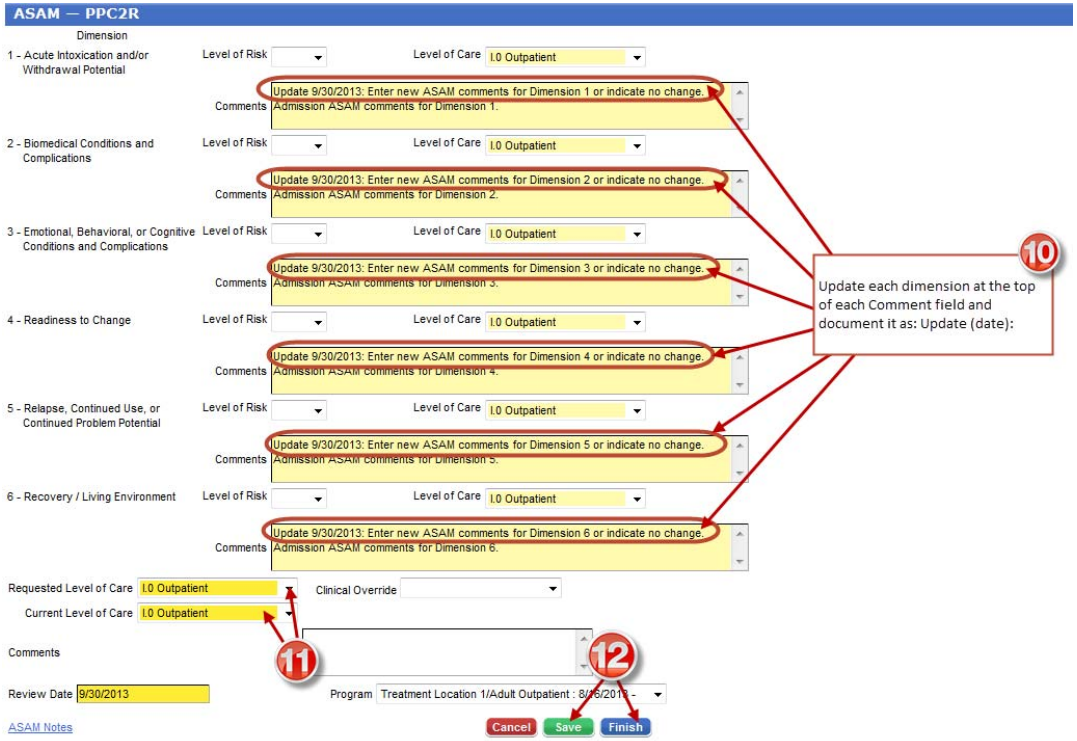


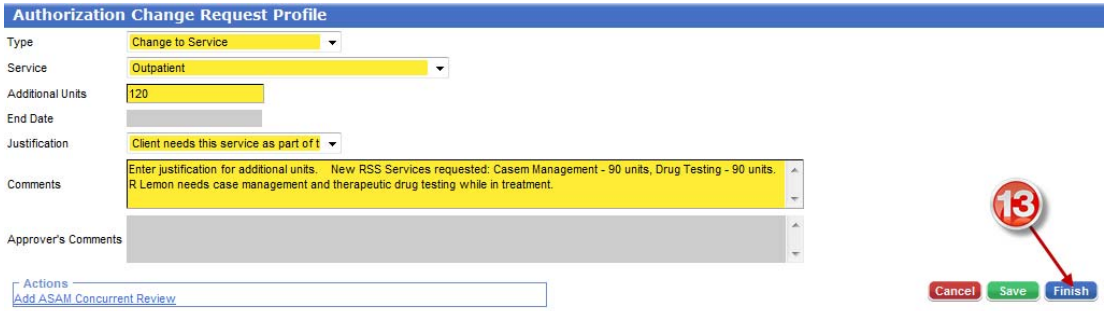
10. Update **Comments** for each Dimension. Update each comment at the **top** of each Comment field and document it as: Update (date). **DO NOT DELETE ANY PREVIOUS COMMENTS.**

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

12. Click **Save** and **Finish**.

13. Click **Finish**.





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

15. Select **Yes** to change the end date of the Authorization if applicable.

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

17. Click **Finish**.

Do you want to link the existing ASAM record to the authorization change request?

Would you like to request a change to the end date on the authorization?

Provider Authorization Change Request

Group Enrollment	IDOC Group	Status	AC
Plan	IDOC Funding	Contract	4 - IDOC-Provider Training Agency / 7/1/2013 - 6/30/2014 - IDC
Authorization #	1388	Date Approved	7/1/2013
Effective Date	7/1/2013	Updated Date	9/26/2013
End Date	6/30/2014	Updated By	Buskey, Michelle
		ATR Intake	1/1/0001-
		Stage	

Comments

Authorization Change Request List *Add New*

Date	Type	Service	Units	End Date	Status	Justification	Actions
9/30/2013	Change to Service	Outpatient	120		Pending	Client needs this service as part of the overall treatment plan	Review | Delete
9/30/2013	Change Voucher End Date			12/31/2013	Pending	Client needs this service as part of the overall treatment plan	Review | Delete