



6 month/Annual Review Training

Presented by Telligen Staff (Bonnie Parra and Charles Rossiter)

Agenda



- Introduction of Bonnie and Charles
- This presentation counts toward your CHIS continuing training hours
- Overview of 6 month/Annual Review Optional Document
- Discuss required documentation for each submission
- Type questions into Q&A as they come up. We will answer as we go or address each question at the end of the presentation
- CHIS FAQ can be found at: <https://idmedicaid.telligen.com/>



Each section needs to be completed

- Document needs to be submitted at the time of the 6-month review and Annual Review
- The optional template was updated in February 2024 (can be located on the states website)

Revised 2/2024

Page 1 of 2

OPTIONAL Ongoing Prior Authorization Request Template

☐ 6-Month Review - Prior Authorization Request

☐ Annual Review - Prior Authorization Request

Participant's Name:

Provider Name:



Page 1 – List all objectives(s)



- List all objectives(s) that have been implemented since your last prior authorization
- At 6-month review, list objectives from the initial or annual review to the 6-month review; at the annual review, list the objectives from the 6-month review to annual review.
- List- Objective, Status and Date of Update.

Objective	Status Identify all that apply	Date of update(s):



New (N): Implementation Plan has been implemented since the last prior authorization request and has not previously been submitted for Prior Authorization.

Continued (C): The Implementation Plan will continue to be implemented.

Achieved (A): The child has met mastery/criteria for the objective and it is no longer being implemented.

Modified (M): The Implementation Plan has been modified.

Discontinued (DC): The Implementation Plan has been discontinued and will no longer be implemented.

- ☐ No new Implementation Plans have been implemented since the last prior authorization.
 - ☐ New Implementation Plans have been implemented (i.e. Implementation Plans are being implemented that have not been submitted for Prior Authorization) and are attached.
 - ☐ Annual ACTP is attached. This must be submitted at the annual prior authorization request.
- * If the Prior Authorization request is requesting additional hours/units of service(s) then an updated Assessment and Clinical Treatment Plan must be submitted.



Page 1 – Signatures



If providers are sharing hours (have the exact same hours authorized to be shared, up to a total per week)- both providers must sign the form if using the same data. NOTE: If a provider has separate hours recommended for authorization, each provider must submit their own 6 month or annual review form.



Page 2 – Ongoing Prior Authorization Request



Ongoing Prior Authorization Request

Participant's Name:

Objective:



- Brief analysis (including a written summary) of data regarding the participant's progress or lack of progress and justification for any changes made to the implementation of programming:
- Analysis of data can include: why the participant is making progress, why the participant is not making progress, why modifications were made to the implementation plan and how those modifications impacted progress/lack of progress.
- Each Goal/Objective must be clearly outlined in the written analysis section for the last authorization period.
- If the member is not making progress on goals/objectives, please outline what modifications will occur over the next authorization period to assist the member with working towards mastery.
- If the member has reached mastery for certain goals/objectives, please add modifications in the written analysis section (increased level of mastery, etc.) for those goals/objectives since mastery has been met and document states goal/objective is continuing.



Page 2 – Summary of parent(s) or caregiver(s) response



- Summary of parent(s) or caregiver(s) response to teaching of coordinated methods: (Required for Annual Review)
- This section must be completed if the parent/caregiver participated in the family training component of behavioral intervention.



Pages 2- Graphs showing change lines



- On the graphs- each Goal/objectives listed must have at least 5 out of the 6 months of the last authorization period. The graphs must include this information, or the written analysis section must outline when/why a goal/objective was not worked on for each month of the last authorization period.
- It is helpful to note in the written analysis section if the provider has not been authorized to work with the member over the entire 6-month authorization period (Example- if provider took over working with the member per a PA amendment during the last authorization period).
- If a goal/objective was started or ended during the last authorization period, it is helpful to note this information in the written analysis section.
- Data in the graph needs to match the written analysis section.



Additional Notes:



- Requested start date of authorization period cannot be on, or prior to date request for services was received. Please note that authorizations for CHIS must be prior authorizations and cannot be backdated to the day or days prior to review submission. Please review IDAPA 16.03.09.570-577 and the Provider Handbook.
- Dates of service requested in Qualitrac need to be for six months at a time and match the ACTP request for hours grid.
- Reminder: Information reviewed in this training is essential per IDAPA and Provider Handbook, as information must be present when documents are reviewed by the state for QA/QI.
- The template reviewed today is an optional format; however, all information reviewed in this training is required to be present in the document submitted to Telligen for Prior Authorization.



Contact Information



For technical issues with Qualitrac contact Telligen's customer support at 866-538-9510

MedicaidChildrensDDServices@dhw.idaho.gov

Questions about CHIS policies or Fee Schedule

Questions regarding Children's Developmental Disability Support Services through the Division of Medicaid

CHIS@telligen.com

Questions building a case

Questions about uploading additional documentation to an existing case

Questions regarding a request for information

Questions about a member having prior services



Questions

