



# AUTHORIZATION MANAGER TIPS

- Outpatient Rehabilitation and Home Health Care

## INTRODUCTION

Use this tip when you submit a home health care or outpatient rehabilitation authorization request using the Authorization Manager tool. To correctly complete an authorization request, providers are required to include certain information. These requests must be made by the member's PCP, covering doctor, or a specialist with an active referral.

## AUDIENCE

Primary care providers and specialists with an active referral

## REQUIRED INFORMATION FOR CERTAIN PROVIDER TYPES

FOR	THE FOLLOWING INFORMATION IS REQUIRED
Home health care for managed care and PPO members	<ul style="list-style-type: none"> <li>• <b>Request type:</b> Service Request</li> <li>• <b>Place of service:</b> 12-Home</li> <li>• <b>Review type:</b> Initial</li> <li>• <b>Add Servicing/Facility Provider:</b> Homecare provider ID or NPI number (type = Servicing Provider)</li> <li>• <b>Diagnosis:</b> Enter diagnosis code or description</li> <li>• <b>Procedure:</b> Enter a code, see examples below:               <ul style="list-style-type: none"> <li>○ <b>Managed Care Global-</b> G0159</li> <li>○ <b>Physical Therapy</b> - G0151</li> <li>○ <b>Occupational Therapy</b> - G0152</li> <li>○ <b>Skilled Nursing</b> - G0162</li> <li>○ <b>Speech Therapy</b> - G0161</li> <li>○ <b>Social Work</b> - S9127</li> <li>○ <b>Home Health Aide</b> - G0156</li> </ul> </li> </ul> <p style="color: red;">Please note: The CPT code does not need to match the claim if the provider is billing for the same service.</p> <p>After submitting, a new window opens. Populate details as follows:</p> <ul style="list-style-type: none"> <li>• <b>Quantity:</b> As needed</li> <li>• <b>Units:</b> Units (equal to visits)</li> <li>• <b>Frequency:</b> As prescribed</li> <li>• <b>Start date:</b> Requested start date for service</li> </ul> <p><b>Notes</b></p> <ul style="list-style-type: none"> <li>• Extension requests must be faxed in.</li> <li>• For PPO members, each discipline requires a separate authorization.</li> </ul>
Physical, Occupational & Speech therapy	<ul style="list-style-type: none"> <li>• <b>Request type:</b> Service Request</li> <li>• <b>Place of service:</b> 62-Comprehensive Outpatient Rehab or 11-Office</li> <li>• <b>Review type:</b> Initial</li> <li>• <b>Add Servicing/Facility Provider:</b> Therapist's provider ID or NPI number (type = Servicing Provider)</li> <li>• <b>Diagnosis:</b> Enter diagnosis code or description</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Procedure:</b> Enter an initial code, see codes below: <ul style="list-style-type: none"> <li>○ <b>Physical Therapy:</b> 97161</li> <li>○ <b>Occupational Therapy:</b> 97165</li> <li>○ <b>Speech Therapy:</b> 92507</li> </ul> </li> </ul> <p style="color: red;">Please note: The CPT code does not need to match the claim if the provider is billing for the same service.</p> <p>After submitting, a new window opens. Populate details as follows:</p> <ul style="list-style-type: none"> <li>• <b>Quantity:</b> As needed</li> <li>• <b>Units:</b> Units (equal to visits)</li> <li>• <b>Frequency:</b> As prescribed</li> <li>• <b>Start date:</b> Requested start date for service</li> </ul> <p><b>Notes</b></p> <ul style="list-style-type: none"> <li>• Extension requests must be faxed in.</li> </ul>
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**WHEN DOCUMENTATION IS REQUIRED**

If your authorization request requires documentation, it may be because the patient already has approved visits, either to you or to another provider.

1. Check under **View Authorizations Medical** on the left-hand side of the screen to see if there are any current authorizations on file.
  - If there are no current authorizations approved, submit your authorization request without uploading anything.
  - If the member has current authorizations and there is information you would like to include in your new request, please add a note and submit.
2. Your request will pend for review (which generally occurs quickly). Use Authorization Manager to check the status.

**RELATED RESOURCES**

Visit our [Authorization Manager](#) page for additional resources, including:

- Authorization Manager Guide
- Emergency and Elective Inpatient Services Quick Tip
- Outpatient Specialist Referral Quick Tip