

## **AUTHORIZATION MANAGER TIPS**

### ART / Residential / CBAT / Sub-acute

#### INTRODUCTION

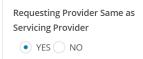
Use this tip when you submit an Acute Residential Treatment (ART), Residential, Community Based Acute Treatment (CBAT), or sub-acute care request using the Authorization Manager tool. To correctly complete an authorization request, providers are required to include certain information.

REQUIRED
INFORMATION FOR
ART, RESIDENTIAL,
CBAT, OR SUB
ACUTE REQUESTS

#### THE FOLLOWING INFORMATION IS REQUIRED

- Request type: Behavioral Health Inpatient
- Place of service: Select based on primary diagnosis
  - 55 Residential Substance Abuse Treatment Facility
  - 56 Psychiatric Residential Treatment Center
- Bed Type: Select based on primary diagnosis
  - Residential Eating Disorder
  - o Residential Psychiatric
  - o Detox Subacute Residential
  - Residential Substance Use
- Admit Type: Emergency or Urgent
- Admit From: Choose from dropdown, may select unknown
- Review Type:
  - Admitted
  - o Pre-cert Admission (for future date of service, within next 48 hours)
- Add Servicing/Facility Provider: Do not add clinician
  - Add the facility/group provider once with the type, Servicing Provider\*
  - o Add the facility/group provider again with the type, Facility

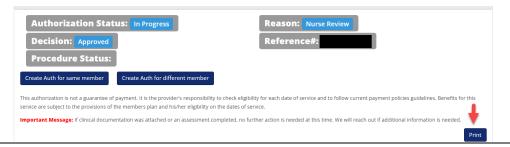
\*If you are signed in as the facility who will bill for the service, select yes for the question below and you will only be required to add the facility once, with the type being facility

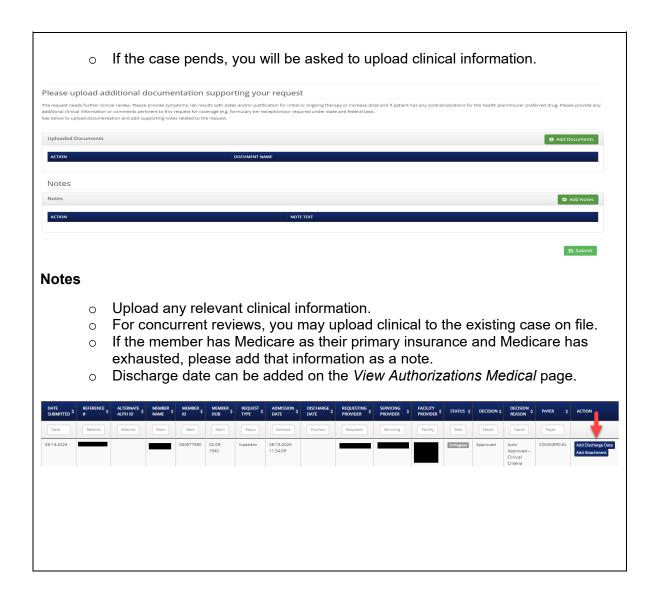


- Diagnosis: Enter diagnosis code or description
- Procedure: Leave blank

Click **Submit**. The case will either auto-approve or pend for approval.

 If the case is auto approved, click the **Print** button to open a separate window and view the details of your approval.





# RELATED VIDEO RESOURCES

Accessing authorizations & printing correspondence

Attaching Clinical to an existing Case

Adding Discharge Date to an inpatient Request

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MPC\_091724-3C-QT (09/24)