

# AUTHORIZATION MANAGER TIPS

- Outpatient Mental Health Services

## INTRODUCTION

Use these tips when you submit a request for outpatient authorization using the Authorization Manager tool. Mental health providers are required to include certain information in their request for it to be correctly completed.

Audiovisual training courses and video demonstrations are available and listed under [Related Resources](#).

Note that:

- Adult or geriatric = 18 and older
- Child or adolescent = under 18

## REQUIRED INFORMATION FOR OUTPATIENT MENTAL HEALTH PROVIDER TYPES

The following fields are required for **all** mental health provider types:

<b>Request type</b>	Behavioral Health Service Request
<b>Review type</b>	Initial
<b>Facility information</b>	Select Servicing Provider for the type
<b>Diagnosis</b>	As appropriate
<b>Quantity</b>	Total episodes of treatment expected
<b>Units</b>	Select units from dropdown
<b>Start date</b>	Requested start date for service

**Place of service** and **Procedure** values are specific by provider type:

Provider type	Place of service	Procedure
<b>IOP (Intensive Outpatient Program)</b>	Select from dropdown: <ul style="list-style-type: none"> <li>○ 12-Home (Aware Recovery)</li> <li>○ 22-On Campus Outpatient Hospital</li> <li>○ 53-Community Mental Health Center</li> <li>○ 57-Non-residential Substance Abuse Treatment Facility</li> <li>○ 99-Other Place of Service</li> </ul>	<ul style="list-style-type: none"> <li>○ S9480-Psychiatric services</li> <li>○ H0015-Alcohol and/or drug services</li> <li>○ H0002-Substance</li> <li>○ H2036-Substance</li> </ul>
<b>PHP (Partial Hospitalization Program)</b>	52-Psychiatric Facility Partial Hospitalization	<ul style="list-style-type: none"> <li>○ S0201- Substance</li> <li>○ H0035- Psychiatric</li> </ul>
<b>Behavioral Health ICBT (Intensive Community Based Therapy)</b>	12-Home	<ul style="list-style-type: none"> <li>○ H2020 In-Home Therapy</li> <li>○ H0025 Family Support and Training</li> <li>○ H0040 Behavior Management Monitoring/Behavior Management Therapy</li> <li>○ H0046 Therapeutic Mentoring</li> <li>○ H0023 Intensive Care Coordination</li> </ul>
<b>Ambulatory Detox</b>	Select from dropdown: <ul style="list-style-type: none"> <li>○ 52 – Psychiatric Facility – Partial Hospitalization (in PHP setting)</li> <li>○ 57 - Non-Residential Substance Abuse Treatment Facility</li> </ul>	<ul style="list-style-type: none"> <li>○ H0014</li> </ul>
<b>Family Stabilization Team</b>	12-Home	<ul style="list-style-type: none"> <li>○ S9485</li> </ul>

## RELATED RESOURCES

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[Authorization Manager page](#) on Provider Central

Audiovisual training courses:

- [Attaching clinical documentation to an existing case](#)
- [Accessing authorizations & printing correspondence](#)

Authorization Manager video demonstrations:

- [Ambulatory detox](#)
- [Family stabilization](#)
- [Intensive Community Based Therapy \(ICBT\)](#)
- [Intensive Outpatient Program: Alcohol/Substance use](#)
- [Intensive Outpatient Program: Psychiatric/Eating disorder](#)
- [Partial Hospitalization Program: Alcohol/Substance use](#)
- [Partial Hospitalization Program: Psychiatric/Eating disorder](#)