Document Type:[1]	_X_ Policy & Procedure	___ Process Guideline	Adopted:	5/4/2020
			Last Reviewed:	2/28/2023
	___ Plan	___ System Description	Retired:	

Revisions: 2/28/2023

Document Scope: (applies to Policy & Procedure only)

X   The requirements herein apply only to the GCBH BH-ASO Central Office and its functions.

–   The requirements herein apply, verbatim, to GCBH BH-ASO and its network providers[2].

–   The requirements herein apply both to GCBH BH-ASO and its network providers[2]. Additionally, network providers must have internal documents outlining their processes for implementing the requirements, insofar as they relate to actions for which network providers are responsible.

PURPOSE: To clarify GCBH BH-ASO's processes associated with an AEM Inpatient Psychiatric Admission request established by WAC 182-507-0115.

DEFINITIONS

Alien Emergency Medical (AEM) client: A person nineteen years of age or older who is not pregnant and meets the eligibility criteria under WAC 182-507-0110.

POLICY

A.   GCBH BH-ASO will serve as the point of contact for inpatient community psychiatric admissions for undocumented aliens to support HCA Alien Emergency Medical (AEM) Program.

B.   GCBH BH-ASO will establish if the individual is an undocumented alien, possibly qualifying for the AEM program, and instruct the requesting hospital to assist the individual in submitting an AEM eligibility request.

C.   GCBH BH-ASO will receive the admission notification for ITA admissions and make medical necessity determinations for voluntary psychiatric admissions.

PROCEDURE

1.   Upon receipt of clinical information from the hospital, ASO authorization staff verify funding and check for prior history of Emergency Related Services Only (ERSO) funding in the ProviderOne system.

2.   ASO authorization staff then discuss how best to assist the individual applying for AEM funding with hospital staff.

3.   Authorization staff trained in the ProviderOne system are to complete the direct data entry prior authorization request screen; completing all required fields, recording the clinical information required for the prior authorization through the ProviderOne provider portal within 5 business days of the discharge, and attaching required documentation. The required data and clinical information includes, but is not limited to:

3.1.   Individual's name, gender, and date of birth

3.2.   Client ProviderOne number and/or Social Security Number (if available)

CL352 – AEM Inpatient Psychiatric Admission Authorization
[1]See definitions of document types in AD100, "Development, Approval & Review of Formal GCBH BH-ASO Documents"
[2]"Network Provider" – An organization with which GCBH BH-ASO is contracted for the provision of direct services.

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3.3. Hospital to which the admission occurred

3.4. If the admission is voluntary or an ITA

3.5. Diagnosis code

3.6. Date of admission

3.7. Date of discharge

3.8. Number of covered days, with dates as indicated

3.9. Number of denied dates, with dates as indicated

3.10. For voluntary admissions, a brief statement as to how the stay met medical necessity criteria

APPROVAL

_____   2/28/2023
(Karen Richardson or Sindi Saunders, Co-Directors   Date