



June 11, 2019

**ATTN: Primary Care Physicians
Physical, Occupational and Speech Therapy Providers**

RE: Change in Authorization Process for PT/OT/ST Services

Total Health Care is changing its process for physical, occupational and speech therapy. Providers are no longer required to send requests for clinical review and approval to Navant for dates of service beginning July 1, 2019. The current process will continue with Navant through June 30, 2019.

EFFECTIVE JULY 1, 2019 The following NEW process will be implemented:

1. PCPs will be the gatekeepers for referrals for PT/OT/ST services. The PCP will provide the initial referral for services to include an evaluation **plus treatment visits**, for a maximum up to 12. This **updates** the current referral process of creating a referral for the evaluation only.
2. Subsequent referrals may be processed in increments of a maximum of 6 visits per referral. The benefit maximum for referrals is 30 visits. Therefore, a total of 4 referrals are allowed.
3. If additional visits beyond 30 are clinically indicated, clinical review and approval is required through Total Health Care’s Utilization Department. The provider of service may fax clinical information to 313-748-1312 to request visits beyond 30. The PCP is not required to initiate the request.

NOTE: Chiropractic services are a combined benefit with physical therapy for most commercial members and also require a PCP referral. Therefore, any chiropractic referrals should be deducted from the 30 visits for PT referrals. The PCP will be able to initiate the referral, but it is up to the provider of services to verify eligibility and benefits. **Therefore, the referral is not a guarantee of payment.**

How to Submit a Referral for Services

Therapy	Initial Referral				Subsequent Referrals	
	Evaluation	Quantity	Treatment	Quantity	Treatment	Quantity
Physical	97161	1	97010	12	97010	6
Occupational	97165	1	97010	12	97010	6
Speech	92521	1	92507	12	92507	6

How to Process a Referral for Services

Initial Referral
inclusive of up to 12 visits
(Subsequent referrals up to 6 visits)

Service Details

* Service	OT/PT/ST/Cardiac Rehab	* Location	Outpatient Hospital		
* Service Units	12 Visits	* Start Date	06/05/2019	* End Date	08/05/2019

Date range will auto populate to 180 days.
Modify end date accordingly
(approximately 2 months).

Do not overlap date range with other
PT/OT/ST referrals

Use 1 as the quantity for
the evaluation code

Requested Procedures

* Procedure Code

Quantity	Date Range
1	06/05/2019 - 08/05/2019
12	06/05/2019 - 08/05/2019

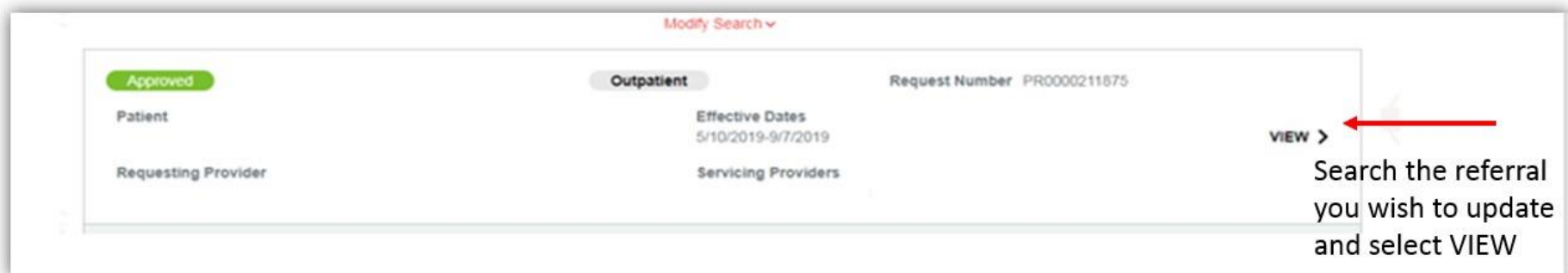
Update date ranges at
procedure code level to match
start and end date above

Use up to 12 as the
quantity for therapy
codes on the initial
referral only

NOTE: THC will have an enhancement coming soon that will display the accumulators for PT/OT/ST and chiropractic visits.

How to Amend a Date Range

If the number of visits have not been used before the End Date expires, amend the initial referral by extending the date as follows:



Modify Search ▾

Approved Outpatient Request Number PR0000211675

Patient Effective Dates
5/10/2019-9/7/2019

Requesting Provider Servicing Providers

VIEW >

Search the referral you wish to update and select VIEW

Referral & Authorizations / Search Requests

Request Detail

PRINT EDIT

Outpatient Request

Approved

Once the Request Detail page appears, select EDIT

Edit Outpatient Request

From the Edit Outpatient Request page scroll down to locate the Service Details /Requested Procedure

Service Details

*Service	*Location	Level of Service
<input type="text"/>	Outpatient Hospital	Select...
*Service Units	*Start Date	*End Date
1 Visits	05/10/2019	09/07/2019

Edit start and end date under Service Details

Requested Procedures

*Procedure Code		
<input type="text"/>		
27369 CPT		
Quantity	Date Range	Modifiers
1	05/10/2019 - 09/07/2019	<input type="text"/>

Update date range of the procedure code