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DEPARTMENT OF HUMAN SERVICES
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March 8, 2010

MEMORANDUM

MEMO NOS.
BENX-1001
ACS M10-01

TO: QExA Health Plans and Acute Psychiatric Facilities

FROM: Kenneth S. Fink, MD, MGA, MPH *KF*
Med-QUEST Division Administrator

SUBJECT: ACUTE PSYCHIATRIC HOSPITALIZATION EXCEEDING THIRTY
DAYS PRIOR TO JULY 1, 2010

The Department of Human Services, Med-QUEST Division (MQD) does not have a quantity limit on acute psychiatric hospitalization days. To be reimbursable, an acute psychiatric hospitalization day must be medically necessary.

For dates of admission prior to July 1, 2010, the QExA health plans are responsible for the first thirty (30) days of acute psychiatric hospitalization in the benefit years ending June 30, 2009 and June 30, 2010. Any medically necessary acute hospitalization above the thirty (30) days covered by the QExA health plan during a benefit year is the responsibility of MQD. For dates of admission on or after July 1, 2010, the QExA health plans will be responsible for covering all medically necessary acute psychiatric hospitalizations.

This memo describes the process for getting reimbursed by MQD for medically necessary acute psychiatric hospitalization greater than thirty (30) days per benefit year with an admission date before July 1, 2010.

PROCESS TO OBTAIN MOD AUTHORIZATION:

Step 1: QExA and/or the acute psychiatric facility identifies a member who may exhaust or has exhausted his/her in-patient psychiatric 30-day benefit.

Step 2: Upon determining that the patient will require a medically necessary continued stay beyond the thirty (30) days per benefit year or an admission for a member who has already exhausted the benefit, the facility should submit the following to the MQD, Clinical Standards Office, by fax at (808) 692-8131:

- Completed DHS Form 1144 with dates of service requested. The DHS Form 1144 should be submitted prior to the 30th day; when a client has an emergency admission and has exhausted the thirty (30) days, a DHS Form 1144 must be submitted within one (1) week of admission.
- Admission history and physical; and
- Progress notes from the five (5) days prior to the date of the extension request. In cases when only a post review can be made, progress notes for each of the last five (5) days of the 30-day QExA benefit that occurred during that hospitalization plus the progress notes covering that acute hospital stay beyond the 30-day QExA benefit.

Step 3: The MQD Medical Director or Psychiatric Consultant will perform the review and authorize a specified number of days determined medically necessary to be billed to MQD through Affiliated Computer Services (ACS). Additional 1144s and progress notes can subsequently be submitted as warranted. If the MQD does not agree that the extension is medically necessary, the facility will be informed and the authorization denied.

SUBMITTAL OF CLAIMS:

All claims for approved medically necessary acute psychiatric hospitalization over thirty (30) days must be submitted directly to ACS for processing:

ACS
Attention: Acute Psychiatric Hospital Stay
P.O. Box 1220
Honolulu, Hawaii 96807-1220

If you have any questions about your claims submittal, please call the ACS Call Center at (808) 952-5570 or Toll Free at (800) 235-4378.

For any questions and clarifications on the contents of this memorandum, please contact the MQD, Clinical Standards Office, at (808) 692-8121.