

## PROGRAM OPERATIONS DIRECTIVE 1.2

**SUBJECT: Authorizations for Skill Building and Community Living Supports**

ISSUED: September 18, 2012

\*Revised 7-5-2015

### **PURPOSE:**

The purpose of this correspondence is to modify the way authorizations are created for Skill Building and Community Living Supports services due to overutilization of these services. Additionally, authorizations for all services will need to be reviewed.

### **DEFINITION:**

H2014 - Skill Building (including all modifiers)<sup>1</sup>

H2015 - Community Living Supports (including all modifiers)<sup>2</sup>

H2030 - Clubhouse<sup>3</sup>

Medical Necessity<sup>4</sup>

### **REQUIREMENT:**

All authorizations created for Skill building (H2014), Community Living Supports (H2015), will need to be created using a month as the time frame. For example, if an IPOS is being created for the annual period of January 1 – December 31, the authorizations for only those above listed codes would be created as the following example: January 1 – January 31; February 1 – February 28; March 1 – March 31; and so on. Authorizations can be created to cover for the entire treatment period; they can all be done at the time of the IPOS. If these authorizations need to be modified, authorizations that will not be utilized must be end dated and a new monthly authorization will be created.

All other services (except H2014, H2015 or H2030) do not need to be authorized by month. They can be authorized for the entire IPOS period, quarterly, or as needed. Please note: Authorization for services must meet medical necessity.

### **REFERENCES:**

<sup>1</sup> **SKILL BUILDING**: Medicaid Provider Manual, Chapter 3, Section 17.3.K.

<sup>2</sup> **COMMUNITY LIVING SUPPORTS**: Medicaid Provider Manual, Chapter 3, Section 17.3.B

<sup>3</sup> **CLUBHOUSE**: Medicaid Provider Manual, Chapter 3, Section 5.4

<sup>4</sup> **MEDICAL NECESSITY**: Medicaid Provider Manual, Chapter 3, Section 2.5