



PROVIDER ALERT

OMS, NON-OMS, AND MEDICATION MANAGEMENT PROCESS IMPROVEMENTS

JUNE 27, 2011

In an effort to reduce work for providers and minimize errors, ValueOptions has updated certain workflows on several types of care that are requested via ProviderConnect. These enhanced workflows will be effective on Friday 07.01.2011.

Currently, for OMS, NON-OMS, and Medication Management requests, providers are required to enter the place of service(s), service code(s) and number of units on the Requested Service Tab in ProviderConnect.

As of July 1, 2011, this information will no longer be required for these levels of care. This process improvement will eliminate the Requested Service Screen from the workflow (screenshot below). The confirmation page in ProviderConnect will still display the number of approved units.

Requested Services Header

Requested Start Date: _____ Member Name: _____ Provider Name: _____ Vendor ID: _____ Save Request as Draft

Type of Request: **INITIAL** Member ID: _____ Provider ID: _____ Provider Alternate ID: _____ NPI # for Authorization: SELECT...
 Level of Service: **OUTPATIENT/COMMUNITY BASED** Type of Service: **Mental Health** Level of Care: **OUTPATIENT** Type of Care: **OPMH OMS** Authorized User: _____

All fields marked with an asterisk () are required.
 Note: Disable pop-up blocker functionality to view all appropriate links.
 For certain types of care, further clinical review is required before units can be determined. In these cases, the total number of units available as displayed on the bottom of this page will be zero.
 Please indicate the CPT codes and any modifiers for services that are being requested. Units should remain as zero on request until this further clinical review is completed.*

*Place of Service	*CPT or HCPC Code	Modifier 1 (If Applicable)	Modifier 2 (If Applicable)	Modifier 3 (If Applicable)	Modifier 4 (If Applicable)	*Visits/ Units
SELECT...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	2
SELECT...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
SELECT...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
SELECT...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
SELECT...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
SELECT...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

**** Please note that if you save an authorization request as a draft for OMS/ NON-OMS/ Medication Management before the change on July 1st and attempt to complete the authorization request after July 1st, you will be required to enter the place of service(s), service code(s), number of units, on the Requested Service tab. ****