



## **PROVIDER ALERT**

### **EXCEPTION PROCESS FOR UNDOCUMENTED INDIVIDUALS (SX02) – PT 54**

**DECEMBER 6, 2017**

Undocumented individuals are eligible for substance use disorder (SUD) residential treatment for ASAM levels 3.7 and 3.7WM. Providers that are seeking an authorization exception for an undocumented individual (SX02) must complete the Request for Reimbursement for Non-Medicaid Services exception form and submit the documentation to their local authority (local addictions authority or local behavioral health authority). The form is located on the Beacon website at:

[http://maryland.beaconhealthoptions.com/provider/forms/admin/Request\\_for\\_Reimbursement\\_for\\_non-Medicaid\\_Services.pdf](http://maryland.beaconhealthoptions.com/provider/forms/admin/Request_for_Reimbursement_for_non-Medicaid_Services.pdf)

Providers should select either SUD Residential ASAM Level 3.7 or 3.7WM under Level of Care Requested and should select Non-US Citizen / Undocumented under the Financial Reason for Exception. Below are screenshots for reference when completing your documentation.



## PROVIDER ALERT

Level of Care Requested:

- |   |  |
|---|--|
| <input type="radio"/> MH Case Management            | <input type="radio"/> SUD Outpatient                     |
| <input type="radio"/> MH Outpatient                 | <input type="radio"/> SUD Methadone Maintenance          |
| <input type="radio"/> MH Mobile Treatment           | <input type="radio"/> SUD Intensive Outpatient           |
| <input type="radio"/> MH Psychiatric Rehabilitation | <input type="radio"/> SUD Residential ASAM Level 3.3     |
| <input type="radio"/> MH Respite Care               | <input type="radio"/> SUD Residential ASAM Level 3.5     |
| <input type="radio"/> MH Supported Employment       | <input type="radio"/> SUD Residential ASAM Level 3.7 ←   |
| <input type="radio"/> MH Residential Crisis         | <input type="radio"/> SUD Residential ASAM Level 3.7WM ← |
| <input type="radio"/> Other <input type="text"/>    |  |

Providers must select Non-US Citizen / Undocumented under the Financial Reason for Exception section as indicated below.

Financial Reason for Exception (check all that apply):

- |  |   |
|--|---|
| <input type="checkbox"/> Lacks all needed documentation for eligibility      | <input type="checkbox"/> Private Insurance doesn't cover services                 |
| <input checked="" type="checkbox"/> Non-US Citizen / Undocumented ←          | <input type="radio"/> Has Private Insurance, but high co-pay / deductible         |
| <input type="checkbox"/> Income is <u>x%</u> of Federal Poverty Level (FPL): | <input type="radio"/> Eligible for Health Insurance Exchange, but didn't sign up  |
| <input type="radio"/> 250% - 400% of FPL                                     | <input type="radio"/> Has Health Insurance Exchange, but high co-pay / deductible |
| <input type="radio"/> 400% - 600% of FPL                                     | <input type="radio"/> Has Medicare and can't get private insurance                |
| <input type="radio"/> 600% - 800% of FPL                                     |   |
| <input type="radio"/> Over 800% of FPL                                       |   |

If you have questions regarding the form or its submission process, please contact the Provider Relations department at [marylandproviderrelations@beaconhealthoptions.com](mailto:marylandproviderrelations@beaconhealthoptions.com) for assistance.