

June 6, 2019

Providers.

This is a Provider-led Arkansas Shared Savings Entity (PASSE) program Technical Bulletin. The purpose is to provide technical assistance to address subject matters that may be technical in nature or ambiguous within the PASSE program. The information below is specific to Empower Healthcare Solutions and is not reflective of all PASSE programs.

Upon implementation of Phase II of the PASSE program, each PASSE was asked to designate a transition period in which authorizations would not be disrupted. Existing authorizations that were in effect on March 1, 2019 when Phase II implemented were provided to each PASSE. Empower has honored existing authorizations since this time. The prior authorization requirements for outpatient services has been lifted for the transition timeframe through August 31, 2019. Please note below further information regarding the transition timeframe as well as authorizations beginning September 1, 2019 when the transition period ends.

Authorizations from March 1, 2019-August 31, 2019 for current AND new members

- Authorizations are NOT required* for Outpatient services during this timeframe. Any program requiring a specialty certification (Therapeutic Communities, Residential Community Reintegration and Partial Hospitalization) DO require a prior authorization during this timeframe.
- All Inpatient hospitalizations require prior authorization.
- Any existing medication (meaning the member is already on the medication at time of attribution) that usually
 requires prior authorization will not require authorization during the transition. This must be supported by
 historical claims information. If it is a new medication for the member and the medication typically requires
 prior authorization, it WILL require prior authorization during the transition timeframe.
- For members on the CES waiver as of 3/1/19, the existing plans and budgets are extended through 12/31/19.
- If revisions are needed to current waiver plans, these should be submitted to LaTosha Brown at LaTosha.Brown@empowerhcs.com. The documentation should include the information regarding increased funds needed as well as documentation of medical necessity.
- For new waiver members post 3/1/19, the proposed budget and documentation of medical necessity should be submitted to LaTosha Brown noted above.

*All services are subject to retrospective review of medical necessity of services.

Authorizations post 9/1/19

- Services requiring prior authorization are posted at www.getempowerhealth.com. Under the "Quick Reference Guide for Prior Authorization" posting.
- New rates for traditional CES waiver services will be released later in 2019. Empower encourages providers to
 engage in the discussion surrounding a new model of care to promote member centered planning and
 efficiencies in existing processes.

Empower Provider Relations
EmpowerHealthcareSolutionsPR@empowerhcs.com