



BEHAVIORAL HEALTH EDUCATION

Annual Provider Training

Revised January 2023

FOR IN-NETWORK BEHAVIORAL HEALTH PROVIDERS

Welcome!

WellFirst Health supports services and treatment options within our network.

To build upon our high standards for mental health care, WellFirst Health has developed this training to assist in-network Behavioral Health Providers navigating care to individuals enrolled in a WellFirst Health benefit plan.

TOPICS IN THIS TRAINING:



- ❖ Illinois Requirement Overview
- ❖ ASAM Criteria
- ❖ MCG Guidelines
- ❖ Behavioral Health Medical Policies
- ❖ Prior Authorization
- ❖ Prior Authorization Submission
- ❖ Supporting Documentation
- ❖ Provider Portal Overview
- ❖ Provider Resources
- ❖ Annual Reviews and Provider Updates

STATE OF ILLINOIS REQUIREMENT OVERVIEW

Illinois passed the [Generally Accepted Standards of Behavioral Health Care Act of 2021](#) setting baseline standards for mental health and substance abuse disorder coverage and includes statutes requiring health plans to follow clinically accepted standards of care in evaluating claims for mental health treatment.

This legislation mandates the following for health plans:

- Coverage of “medically necessary” mental health care
- Codification of “generally accepted standards” in making medical necessity determinations

THE ASAM CRITERIA

- Criteria developed by the American Society of Addiction Medicine for the **treatment of addiction**.
- Widely used in the United States, establishes comprehensive guidelines for placement, continued stay, transfer, or discharge of patients with addiction and co-occurring conditions.

Six Dimensions of ASAM:

- **1** — Acute Intoxication and/or Withdrawal Potential
- **2** — Biomedical Conditions/Complications
- **3** — Emotional/Behavioral/Cognitive Conditions and Complications
- **4** — Readiness to Change
- **5** — Relapse/Continued Use/Continued Problem Potential
- **6** — Recovery Environment



MCG GUIDELINES



- Evidence-based guidelines from MCG for **inpatient behavioral health care**.
- Guidelines support clinical decision-making, documentation, and efficient transitions between care settings.

BEHAVIORAL HEALTH MEDICAL POLICIES



WellFirst Health has developed written medical policies detailing clinical criteria for behavioral health services.

Click the links to view each policy in its entirety in our Document Library.

[Residential Treatment – MP9554](#)

[Intensive Outpatient – MP9556](#)

[Partial Hospitalization Program – MP9555](#)

[Day Treatment – MP9557](#)

PRIOR AUTHORIZATION

Behavioral Health inpatient services require prior authorization approval. Determinizations are based on medically necessity in alignment with clinical criteria in the medical policy.

Referring

The provider who is directing a patient to another provider for care.

Ordering

The provider who is requesting the care.

Servicing

The provider who is providing the care.

In some cases, the ordering provider may not be the same as the rendering provider. For example, a Primary Care Provider referring their patient to a Behavioral Health Provider.



PRIOR AUTHORIZATION SUBMISSION



Use our Portal! Our secure Provider Portal is a 24/7 direct line between your organization and us.

- Submit authorization requests electronically through the WellFirst Health Provider Portal **Authorization** application.

- Providers without Portal access may complete our [Behavioral Health Authorization Form](#) and fax to 608-252-0843.

SUPPORTING DOCUMENTATION

Providers must submit all relevant documentation with the authorization request for the Utilization Management Department to make a determination on the request.

Submit documentation that attests to the following:

- Patient Name and Pertinent Information
- Service Type and Location
- Provider Contact Information for questions and clarifications
- Pertinent Medical Documentation

Providers can electronically attach supporting documentation when submitting their authorization requests through the Provider Portal.

Refer to:

- Provider Portal User Guide, available to registered users in the secure Provider Portal once a Portal account is established.
- WellFirst Health Provider Manual in the Supporting Documentation section, available in the Document Library.

PROVIDER PORTAL OVERVIEW

- Available to in-network providers free of charge.
- Self-service applications including the **Authorization** application for submitting requests and the **Authorization View** application to stay informed of authorization status and determinations.
- Using Google Chrome, access the **Provider Portal Log In** page via one of two ways:
 - From the Providers page on wellfirstbenefits.com/Providers.
 - Or at wellfirstbenefits.com/Account-Login.
- To create an account, select **Sign Up** at the bottom of the Provider Portal Log In page.
 - Refer to the [WellFirst Health Provider Registration User Guide](#) on the Account Login page for instructions on how to create an account.

PRIOR AUTHORIZATION & PROVIDER PORTAL RESOURCES



[WellFirst Health Provider Registration User Guide](#)

Details the registration process to create individual and organization Provider Portal accounts.



[Provider Portal User Guide](#)

Details how to use the self-service applications available in the Portal once a Provider Portal account is created.



[Document Library](#)

Online repository that allows users to search for medical policies, manuals, forms and other documents.



[Medical Management Page](#)

Online self-service authorization information, resources, and forms.



[Provider Manual](#)

Policies and procedures as supplemental information to a provider's contract. See the Utilization Management section for detailed authorization information.



[Provider Onboarding Guide](#)

Provider's guide to WellFirst Health resources. See the Prior Authorization section.

ANNUAL CLINICAL CRITERIA REVIEWS & PROVIDER UPDATES

- WellFirst Health policies are reviewed at least annually and updated based on technology assessment resources and in-network provider feedback.
- New and changed policies approved by WellFirst Health's Medical Policy Committee are published as part of our quarterly *Provider News* editions.
- In addition to *Provider News*, policy updates may be communicated in a policy update provider notice that is emailed monthly.
- In most cases, we communicate to providers through email. To stay informed, providers are encouraged to select the Opt In option to receive emails from WellFirst Health.
 - Opt In is available in the WellFirst Health Provider Portal during the Provider Portal registration process and also can be selected after registration through Account Settings.



THANK YOU!

Questions?

Contact a WellFirst Health Provider Network Consultant by email at providerrelations@wellfirstbenefits.com or by phone at 314-994-6262.