Available to all providers				
Historic CIM Auth Rules 01/01/2018-9/30/23	**MH / SUD**	**Service Type in Connect as of 10/1/23**	**Contracted Servicing Providers** **Requirements**	**Non-contracted Servicing Provider** **Requirements** **All non-contracted servicing providers will PEND**
Partial Hospital-IOP 7/1/16	MH	Partial Hospital IOP	• Needs PA/auth and clinical review • Enter service type in Connect • Will pend for clinical review • Include documentation with submission	• Needs PA/auth and clinical review • Enter service type in Connect • Will pend for clinical review • Include documentation with submission
ABA Assessment 7/1/16 ABA Treatment - 7/1/16 ABA IBU	MH	Applied Behavioral Analysis ABA		
Eating Disorder Partial-IOP	MH	Eating Disorder Partial IOP		
Eating Disorder Residential	MH	Eating Disorder Residential		
ECT Anesthesia Fees 7/1/16 ECT Treatment 7/1/16	MH	Electroconvulsive Therapy ECT		
Day Treatment 7/1/16	MH	PDTS Psychiatric Day Treatment Services		
PRTS/Sub-Acute Case Rate	MH	PRTS Psychiatric Residential Treatment Services		
Psych Testing and Consultation 7/1/16 Psych Testing 7/1/16	MH	Psychological Testing		
Child Sub-Acute 7/1/16	MH	Sub Acute		
Transcranial Magnetic Stimulation (TMS)	MH	TMS Transcranial Magnetic Stimulation		
Adult Respite Child Respite 7/1/16	MH	Respite	• Notification only • Enter service type in Connect • Will auto approve • No documentation/no clinical review	• Needs PA/auth and clinical review • Enter service type in Connect • Will pend for clinical review • Include documentation with submission

			Notification only • Enter service type in Connect • Will auto approve • No documentation/no clinical review	Notification only • Enter service type in Connect • Will pend for approval by UM team • No documentation/no clinical review
General Outpatient - Adult General Outpatient - Child MAT OBOT Medication Assisted Treatment (MAT) MAT MAT Induction Only	SUD	SUD General Outpatient		
IOP - Adult IOP - Youth	SUD	SUD IOP Intensive Outpatient		
Assessment and Transition	SUD	SUD Assessment		
Day Treatment SUD - Adult Day Treatment SUD - Child	SUD	SUD Day Treatment		
MAT OTP	SUD	SUD Medication Assisted Treatment OTP		
Adult A&D Residential Treatment 7/1/16 Child A&D Residential Treatment 7/1/16 Parent/Child A&D Residential Treatment 7/1/16 Dual Diagnosis Adult Residential Dual Diagnosis Youth Residential Medically Monitored A&D Residential 7/1/16	SUD	SUD Residential		
Withdrawal Management WM FFS	SUD	SUD Withdrawal Management		

			Providers contracted ONLY for Mental Health Outpatient services • Submit claims only	
CANS Assessment- FFS 7/1/16 DBT 7/1/16 Medication Management FFS Outpatient FFS Assessment 7/1/16 Outpatient FFS 7/1/16	MH	MH General Outpatient **providers contracted for LoC A-D should use the LoC service types)	All others, including those contracted for other service types, including Level A-D • Notification only • Enter service type in Connect • No documentation/no clinical review	• Submit claims only

Available only to contracted providers				

Historic CIM Auth Rules 01/01/2018-9/30/23	**MH / SUD**	**Service Type in Connect as of 10/1/23**	<u>**Contracted**</u> **Servicing Providers** **Requirements**	<u>**Non-contracted**</u> **Servicing Provider** **Requirements** **All non-contracted servicing providers will PEND**
Assessment Plus Two Global Crisis Stabilization Assessment	MH	Assessment Plus Two		
Level A Child Global Level A Adult Global Level A Child FFS 7/1/16 Level A Adult FFS 7/1/16 Medication Management for CR Providers	MH	Level A		
Level A Adult Global SPMI Medication Management for CR Providers	MH	Level A Adult SPMI		

Level B Child Global Level B Adult Global Level B Child FFS 7/1/16 Level B Adult FFS 7/1/16 Medication Management for CR Providers	MH	Level B	• Notification only • Enter service type in Connect • Will auto approve • No documentation/no clinical review	
Level B Adult Global SPMI Medication Management for CR Providers	MH	Level B Adult SPMI		
Level C Child Global Level C Adult Global Level C Child FFS 7/1/16 Level C Adult FFS 7/1/16 Medication Management for CR Providers	MH	Level C		
Level C Adult Global SPMI Medication Management for CR Providers	MH	Level C Adult SPMI		
Level D Adult TAY Global Medication Management for CR Providers	MH	Level D Adult TAY		
Level D Adult ICM Global Medication Management for CR Providers	MH	Level D Adult Intensive Case Management ICM	This service type follows the Level D referral process	
Level D Child Initial HBS Global Level D Child HBS Global Medication Management for CR Providers	MH	Level D Child	• Notification only • Will auto approve • Enter service type in Connect	• This service type should only be used by contracted servicing providers • Will pend if submitted with a non-contracted servicing provider
Oregon Intercept 7/1/16 Community Based Intensive Treatment HBS	MH	Community Based Intensive Treatment - CBIT HBS		
Crisis Services	MH	Crisis Services CMHP		
Crisis Stabilization Treatment	MH	Crisis Stabilization Treatment		
Culturally Specific	MH	Culturally Specific	• Notification only	

Foster Care Crisis Response and Coordination	MH	Child Welfare Resource Support Network (Not in Connect)	• Enter service type in Connect • Will auto approve • No documentation/no clinical review
EASA FFS EASA Case Rate	MH	Early Assessment and Support Alliance EASA	
Eating Disorder 7/1/16 Eating Disorder Less Intensive OP	MH	Eating Disorder Treatment	
Supported Employment	MH	Supportive Employment	
N/A	MH	Familly Search and Engagment	
ACT	MH	Assertive Community Treatment (ACT)	This service type follows the ACT Referral process • Needs PA/auth and clinical review • Enter service type in Connect • Will pend for clinical review • Include documentation with submission **Initial requests** • Must be submitted with "BH Provider TBD" • Are coordinated with the Behavioral Health Navigation Team **Continued services** • Must be submitted by the current servicing provider
DBT IOP	MH	DBT IOP	• Needs PA/auth and clinical review • Enter service type in Connect • Will pend for clinical review • Include documentation with submission