

SPECIAL BULLETIN

FOR HEALTH OPTIONS PROFESSIONAL LTSS PROVIDERS

JUNE 3, 2015

ATTENTION: PROVIDERS OF LONG TERM SERVICES AND SUPPORTS

HIGHMARK HEALTH OPTIONS: LONG TERM SERVICES AND SUPPORTS TO REQUIRE AUTHORIZATION, EFFECTIVE JUNE 15, 2015

Highmark Health Options advised you on March 30, 2015, that the authorization requirement for Long Term Services and Supports (LTSS) to be provided for Medicaid Health Options members would not go into effect on April 1, 2015. Highmark Health Options is now prepared to authorize these services beginning June 15, 2015.

LTSS with dates of service on and after June 15, 2015, must be authorized before you perform those services for Health Options members.

Please refer to *The Health Options Provider Manual*, Chapter 5, Health Care Management, for more information about authorization requirements. You can find the provider manual online, under *Providers > Training* at **www.highmarkhealthoptions.com**. You can also view the manual on the Highmark Delaware Provider Resource Center (accessible via NaviNet® or **www.highmarkbcbsde.com**). Select *Administrative Reference Materials* from the menu on the left and then choose *The Health Options Provider Manual*.

If you have questions about how to submit authorizations for LTSS, please contact Highmark Health Options Provider Service at 1-844-325-6252. You may also contact your Provider Relations Representative for assistance.

