



Department of Developmental Disabilities

John Kasich, Governor
John L. Martin, Director

To: SSA Directors, COG Directors, Superintendents, Business Managers

From: Lori Horvath

Date: April 3, 2014

Subject: Rate Increase Prior Authorization Process

The purpose of this communication is to share information related to the expedited prior authorization process developed in consultation the Ohio Association of County Boards. This process will be used effective April 14, 2014 for requests necessitated by the homemaker/personal care, on-site/on-call, and transportation rate increases.

The expedited process described below is applicable only when all of the following conditions are met:

- An individual's funding range will be exceeded SOLELY as the result of the rate increase(s);
- No changes are proposed to the number of units of homemaker/personal care, transportation, or on-site/on-call; and
- The initial prior authorization request or budget adjustment is needed for the individual's current waiver span.

The steps below are required by the county board when requesting a new prior authorization or budget adjustment that meets the expedited criteria:

1. Create a new cost projection summary that reflects no changes in the number of units authorized and the increased costs resulting from the higher rates.
2. Create a new Individual Request Form (IRF) in MSS
 - The individual's name, Medicaid number, and DODD number should auto-populate.
 - The PA contact name, phone, number, and e-mail must be entered.
 - A county board must be selected.
 - Select an "I live with" option.
 - Enter the requested dollar amount.
 - Enter a signature date that is the date of the PA submission. It is not necessary to obtain the individual's/guardian's signature when the PA request is the result of the rate increase

- All other sections on page 1 may be left blank.
 - On page 2, mark “yes” to the first four questions and to the question related to the county board supporting the request.
 - The individual rationale must state “rate increase.”
 - The criteria for PA should be “medical condition.”
 - The county board rationale must state “rate increase.”
3. Send an e-mail to Kisha.Smith@dodd.ohio.gov
- The subject line of the e-mail should state “Rate increase” and include the PA #.
 - Paste a screen shot of the CPT budget summary with all ODDP fields expanded in the body of the e-mail.
 - In the body of the e-mail include an attestation that the board is submitting the request for prior authorization as a result of the rate increase, and that no changes are being made to the individual’s service authorization.

The county board will receive a reply to the e-mail indicating that the prior authorization request has been processed.

Please note that all prior authorization requests for new/annual ISP spans must be submitted using the standard process and are not eligible for this expedited review.

Feel free to contact Jeanne Gregory-Kaepfner at J.Gregory-Kaepfner@dodd.ohio.gov with any questions.

Thanks!