



TO: BHSD County Contracted Providers (CCPs)
FROM: Tova Sweet, PMIII, Utilization Management ^{DS} TS
RE: Authorization Request Form Changes
DATE: January 24, 2025 (**Revised 2/21/25 - Updated Links**)

Summary:

Effective 2/3/25, the authorization request form ([Authorization Request Form](#)) has been updated due to updated regulations and feedback from providers. The changes include:

1. Additional page to track outcomes of referral:
 - a. Last page contains a section where rendering providers **accept or decline** the authorization, (this will help show that the rendering provider has been able to accept the referral and begin the process of intake).
 - b. If Accept is selected, then the rendering provider will sign the form prior to it being sent back to UM and the referring provider.
 - c. If Decline is selected the provider will be prompted to choose a reason and then provide a more detailed response and specific to the member being declined, including what could be done by the member to be accepted in the future (if applicable). This will also be sent back to UM and the referring provider.
 - d. The staff of the rendering provider that is declining the referral will need to provide their name and signature.
 - e. After accepting or declining the referral please have a way to save a copy for your records.
2. **Retrospective Authorization** has been added to the Request Type and can be requested under one of the following specific circumstances (BHIN 22-016, Page 9).
 - a. **Retroactive Medi-Cal** eligibility determinations.
 - b. **Inaccuracies in the Medi-Cal Eligibility Data System.**
 - c. Authorization of services for beneficiaries with **other health care coverage** but will need to show evidence of other health coverage, including dual-eligible beneficiaries.
 - d. **Beneficiary's failure to identify payer.**
3. The mandated **Authorization Request Form Overview** is now offered every 3rd Thursday through SCCLearn. You must register:
 - a. County Employees: [Authorization Overview Session](#)
 - b. Partner Users: www.sccgov.org/scclearn-partner
4. Authorization forms **not** completed correctly will not be able to be processed. **This does not affect programs that do not require authorization,** such as some outpatient and urgent care services.



Authorization Request Form Directions can be found in our Provider Portal: [authorization-request-form-directions.pdf](#)

Any questions regarding these updates, or authorization generally should be directed to the Utilization Management (UM) email: BHSDUM@hhs.sccgov.org