

Utilization Management/Authorization For CFTSS: OLP, CPST, PSR Information presented below was provided by plans.							
Plans	Notification Required	Notification Process (call, email, submit form via portal, etc.)	Additional Information (for example contact person, link to form, etc.)	Pre-authorization Required (Visits 1-3)	Concurrent Review Required	Concurrent Review Process (call, email, contact person, submit form via portal, etc.)	Additional Information (for example contact person, link to form, etc.)
Affinity	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
Amida	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
Capital District	Yes	Fax notice to: 518-641-3601	Contact: Jeremy Boyce (Jeremy.Boyce@cdphp.com)	No	No	CDPHP will review all treatment plans and services as part of a quality/outlier review process. Fax treatment plans to 518-641-3601.	Jeremy Boyce (Jeremy.Boyce@cdphp.com)
Crystal Run	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
Emblem	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
Empire BlueCross Blue Shield HealthPlus	No	No notification required	Martha Ruff; Martha.Ruff@empireblue.com	No	No	No concurrent review process	Amanda Haider; Amanda.Haider@empireblue.com
Excellus	Yes	Yes (call and email)	1-844-694-6411	No	Yes	Call 1-844-694-6411 or fax 844-878-6989	For additional information or if provider needs additional guidance they should contact: Yaimara Torres (585) 485-6161 yaimara.torres@excellus.com
Fidelis	Yes	Call or Fax	Danielle Thomas, (718) 685-5238 dthomas3@fideliscare.org	No	Yes	Call or Fax	Danielle Thomas, (718) 685-5238 dthomas3@fideliscare.org

HealthFirst	Yes	online portal, call, fax	Lisa O'Keefe, (212) 547-2597, LO'Keefe@Healthfirst.org Christine Hohenleitner, (212) 209-6423 CHohenleitner@Healthfirst.org	No (PAR Only, OON providers need authorization for all 3 services)	OLP - NO CPST - Yes PSR-Yes (PAR only, all OON providers need authorization for all services)	online portal, call, fax	Lisa O'Keefe, (212) 547-2597, LO'Keefe@Healthfirst.org Christine Hohenleitner, (212) 209-6423 CHohenleitner@Healthfirst.org
Amerigroup for BlueCross BlueShield of WNY Medicaid & CHP	No	N/A	N/A	No (for in network providers) OON providers, preauth required post first 90 days	No (for in network providers) OON providers, yes, required post first 90 days	Submit form with request for op svcs via fax BH OP Fax line: 877.866.5229 For Additional Information call Provider Service:18662310847	BH OP Fax line: 877.866.5229 For Additional Information call Provider Service:18662310847
Independent Health	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
MetroPlus	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
MVP	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
Molina HealthCare of New York Inc. (Formerly TotalCare)				No			
United Healthcare	No (PAR Only)	No notification required	Juliet Skeete (juliet.skeete@uhc.com)	No (PAR Only)	No concurrent review process required	N/A	Juliet Skeete (juliet.skeete@uhc.com)
Wellcare	No	No notification required	Kerri Gunn Kerri.Gunn@wellcare.com	No	Yes	Online portal, call 1-800-288-5441 or fax 1-855-713-0591 for Patient Authorization	n/a

VNS	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
YourCare	No	No notification required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)	No	No	No concurrent review process required	Raechel Schwartz (raechel.schwartz@beaconhealthoptions.com)
	Plan has not provided information.						

Have additional questions for Managed Care Plans around Utilization Management or other topics?
Find the appropriate contact information on the MCO Plan Matrix at www.matrix.ctacny.org