



**Louisiana Department of Health
Informational Bulletin 15-18
October 29, 2015**

Authorization of Specialized Behavioral Health Outpatient Services - Effective Dec. 1, 2015

Service Type	End Date for Most Recent Authorization by Magellan	Transition "Grace" Period	Out of Network Provider	Responsible Payer for DOS 12/1/15 and After
Outpatient Services for Children and Adults	PA, Assessment or Eligibility for Service <u>Expires</u> 11/30/15 through 12/29/15	30 Days Through 12/30/15 No PA Required Transition "Grace" Units: Units for this period only will be based upon a monthly pro rata share of the total units last authorized by Magellan	Claim will not be denied because provider is not in network on date of service	Managed Care Plan
	PA, Assessment, or Eligibility for Service <u>Expires</u> 12/31/15 Thru 2/29/16	Follow Managed Care Plan's Authorization Requirements	Claim will not be denied solely because provider is not in network on date of service	Managed Care Plan
	PA, Assessment, or Eligibility for Service <u>Expires</u> 3/1/16 or After	Follow Managed Care Plan's Authorization Requirements	Claim may be denied because provider is not in network on date of service	Managed Care Plan
	<i>*This notice is NOT applicable to intensive outpatient substance use, non-ambulatory, detox, inpatient psychiatric, substance use residential (ASAM levels 3.1, 3.3, 3.5, 3.7 and 3.7D) or psychiatric residential treatment and therapeutic group home services.</i>			