Authorization of IOP, Detox, TGH and Inpatient Specialized Behavioral Health Services - Effective Dec. 1, 2015

<table>
<thead>
<tr>
<th>Service Type</th>
<th>End Date for Most Recent Authorization by Magellan</th>
<th>Transition “Grace” Period</th>
<th>Out of Network Provider</th>
<th>Responsible Payer for DOS 12/1/15 and After</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intensive Outpatient Substance Use</td>
<td>PA expires on or after 12/1/15</td>
<td>7 days</td>
<td>Claim will not be denied solely because provider is not in network on date of service</td>
<td>Split Billing (or until expiration of Magellan PA if earlier than 12/7/15)</td>
</tr>
<tr>
<td>Non-Ambulatory Detox</td>
<td></td>
<td></td>
<td></td>
<td>Magellan - 12/1/15 – 12/7/15</td>
</tr>
<tr>
<td>In-Patient Psychiatric Services</td>
<td></td>
<td></td>
<td></td>
<td>Healthy Louisiana - Day following expiration of Magellan’s authorization</td>
</tr>
<tr>
<td>Substance Use Residential (ASAM Levels 3.1, 3.3, 3.5, 3.7 and 3.7D)</td>
<td>PA expires on or after 12/1/15</td>
<td>14 days</td>
<td>Claim will not be denied solely because provider is not in network on date of service</td>
<td>Split Billing (or until expiration of Magellan PA if earlier than 12/14/15)</td>
</tr>
<tr>
<td>Psychiatric Residential Treatment Facility and Therapeutic Group Home</td>
<td>PA expires on or after 12/1/15</td>
<td></td>
<td></td>
<td>Magellan - 12/1/15 – 12/14/15</td>
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<td></td>
<td></td>
<td></td>
<td>Healthy Louisiana - Day following expiration of Magellan’s authorization</td>
</tr>
</tbody>
</table>

*This notice is NOT applicable to other outpatient services for children and adults, please refer to IB 15-18 for other outpatient services.