Web Announcement 227

Attention Provider Types 14 and 82 Regarding Form FH-11A

The Division of Health Care Financing and Policy (DHCFP) and First Health Services are currently revising form FH-11A, which is used for behavioral health prior authorization (PA) requests. Until the form is revised, providers must use the FH-11A Interim, which is currently posted at https://medicaid.nv.gov/providers/forms/forms.asp. “FH-11A Interim” appears along the bottom of each page.

Once the form is revised and posted to the website, providers may utilize either the revised form or FH-11A Interim for 15 working days. At the end of the 15 days, providers must begin using the revised FH-11A. Please monitor these announcements for additional updates.

Reminders regarding FH-11A:

- Initial requests must be submitted within 15 calendar days of the start date of service. Please include the date services started on all initial requests.
- First Health Services will only communicate with the Coordinating QMHP. First Health Services will fax back page 6 of FH-11A to the Coordinating QMHP. The Coordinating QMHP will then be responsible for forwarding page 6 to the servicing providers. Consequently, requests for additional clinical information will be submitted to the Coordinating QMHP for submission. The QMHP will be responsible for informing servicing providers of the services authorized.
- Unscheduled Revision: Check this box at the top of the form to request an unscheduled revision. Unscheduled revisions may be requested when a significant change in the recipient’s condition warrants a change to the rehabilitation plan and previously authorized services. The request must document these changes and offer clinical support for any requested change in services. An unscheduled revision in services may be requested during the current authorization period prior to delivery of requested service changes. The start of these services may be from the time of a complete unscheduled revision request submission forward. Services must be anticipated and requested before they are provided during the authorization period. Once these services are authorized, the end date for the new PA remains the same as the original authorization.