

Authorization and Notification Guidance for Behavior Health Needs

Effective 01/01/2025

Inpatient or Outpatient	Level of Care	Ways to Submit
Inpatient Notifications		
Inpatient	Inpatient - Psych	Please fax completed notification form to 617-673-0302 You may also submit by phone or secure portal
Inpatient	Inpatient - SUD/Detox	Please fax completed notification form to 617-673-0302 You may also submit by phone or secure portal
Inpatient	Acute Residential Treatment (ART) - Psych	You may submit through the secure Portal or by phone
Inpatient	Acute Residential Treatment (ART) - SUD	
Inpatient	Community-Based Acute Treatment (CBAT) - Psych	
Inpatient	Community-Based Acute Treatment (CBAT) - SU	
Inpatient	Partial Hospitalization (PHP) - Psych	
Inpatient	Partial Hospitalization (PHP) - SUD	
Inpatient	Intensive Community-Based Acute Treatment (ICBAT)	
Inpatient	Clinical Stabilization Services (CSS)	
Faxed Form Required - Fax to 1-800-232-0816		
OutPatient	ABA	Please Fax Completed Form
OutPatient	CSA (intensive Care Coordination) (All FI and some SI)	
OutPatient	Methadone Treatment	
OutPatient	Outpatient Request - Out of Network Provider	
OutPatient	Psych/Neuropsych Testing Request	
OutPatient	rTMS Request	
OutPatient	ECT	
Call Provider Services to Speak with Clinician: 1-800-708-4414		
OutPatient	CSA ongoing (intensive Care Coordination)	Call to speak with Clinician for any of these services
OutPatient	Early Intensive Behavioral Intervention (EIBI)	
OutPatient	Family Stabilization Team (FST)	
OutPatient	Family Partner FS&T (All FI and some SI)	
OutPatient	Therapeutic Mentor (TM) (All FI and some SI)	
OutPatient	In Home Behavioral Services (IHBS) (All FI and some SI)	
OutPatient	In Home Therapy (IHT) (All FI and some SI)	
OutPatient	Intensive Outpatient Program (IOP) - Prior Auth for Out of Network Providers Only	