



TO: All Providers

RE: Medical Authorization Portal

Effective December 19, 2020, Community Health Network of Connecticut, Inc. (CHNCT) will transition the current HUSKY Health medical authorization platform and Clear Coverage™ to a new prior authorization (PA) system and medical portal. The new system is a web-based tool that will support the secure exchange of clinical documentation. Please note there will be no changes to the submission of radiology PA requests.

Authorizations Currently Submitted via Phone or Fax

Providers who currently submit prior authorization requests to CHNCT via phone or fax will continue to follow the current process by:

- Calling the HUSKY Health Provider Line at 1-800-440-5071 and following the prompts to medical authorizations, or
- Faxing the HUSKY Health Outpatient PA Form to CHNCT at (203) 265-3994.

Authorizations Currently Submitted through Clear Coverage

- Beginning December 19, 2020, hospitals, home health agencies, medical equipment, device and supplies providers (MEDS), independent therapy providers and rehabilitation clinics who currently submit prior authorization requests through Clear Coverage will no longer submit authorization requests through this portal. All requests will

be submitted through the new medical authorization portal.

- Providers will not be able to view their previous authorizations in Clear Coverage *after* 7:00 pm December 31, 2020. After that time, providers will need to request previous authorization information by calling the HUSKY Health Provider line at 1-800-440-5071 and following the prompts to medical authorizations. *As a reminder, providers can view approved PAs from their secure portal on the www.ctdssmap.com Web site regardless of the date of submission of the PA. The PA information available from this site includes the services authorized, the dates they were authorized for, and the units/dollars approved, used and remaining on the authorization.*

Services Requiring PA

No changes will be made to the services that currently require PA. Services currently requiring PA will continue to require PA.

Changes to Authorization Letters and Numbers

Provider authorization letters will be reformatted and continue to contain all the same essential information. Medical authorization numbers will begin with the letters “KG”, replacing the current “KC”, “K1” and “K4” authorization numbers.

These changes are in effect for authorization requests submitted by phone or fax as of December 1, 2020.

The letter and authorization number changes will be in effect for requests submitted via the new medical authorization portal, on or after December 19, 2020.

HUSKY Health PA Forms

To access the HUSKY Health Outpatient Prior Authorization Form, go to www.ct.gov/hh, and click the *For Providers* button located at the bottom right hand corner of page. Once on the HUSKY Health home page, click *Provider Home* in the upper left hand corner. Once on the provider home page, click on *Prior Authorization Forms and Manuals* under the *Prior Authorization* sub-menu and scroll down to the *Forms* section of the page.

Provider Training for the New Medical Authorization Portal

An invitation for providers to attend web-based training sessions for the new medical authorization portal will be sent to those providers registered and currently using Clear Coverage.

Training will be recorded for future reference on the HUSKY Health Web site.

Training sessions will cover the following:

- Registration process
- Navigation within the new module
- Verification of client eligibility
- Creation and submission of authorization requests
- Where to locate:
 - Reference numbers for authorization requests
 - Authorization status (i.e., approved, denied, pending)
 - Determination letters
- Upload of clinical documentation