

1/18/2022

Program Update: Upcoming Change for All Certificate of Need Referrals

Change is coming for the information collected with the **North Dakota U21 Certificate of Need referrals, submitted to Maximus through the web-based system**. Per state guidance, Maximus will no longer be using Social Security Number (SSN) as the primary unique identifier. As a result, the SSN field from all referral screens will be removed and you will no longer be required to enter it. Another change we'd like to outline is the **Medicaid Identification Number, which will be adjusted to Member ID**.

Beginning on **January 25, Medicaid ID will be replaced with the North Dakota Member ID Number**. This field will have the ability to accept the child's MMIS ID number, which is preferred number to use, which begins with ND (NDXXXXXXXX). If for any reason that number isn't available for use, please use the child's **Member ID**, which begins with 000 (000XXXXXXXX). Most providers are currently entering the **MMIS ID number** at the time of referral (NDXXXXXXXX), and if you are, no change to your standard procedure will take place.

***Note:** the North Dakota **Member ID field will be a required field**, as this unique identifier will prevent duplicate records in the North Dakota web based system.*

SUPPORT: Contact the ND Under 21 Help Desk

Email: NDUnder21@maximus.com

Phone: 629.230.5024

4/11/2022

Quarterly Newsletter: Best Practice on Clinical Information + Sharing Contact Updates + New AssessmentPro System Preview

REMINDER: Share Contact Phone or Fax Updates

If your name, email, work phone number/extension number or fax number has recently changed, be sure to notify Maximus to ensure we have the accurate information in the system for your facility. Given outcomes are provided two ways (e.g., called on and faxed), it's vital that Maximus has the most up-to-date contact details on file. Please note, if your name is not explicitly listed on your voicemail box, Maximus is not able to leave any information pertaining to the outcome on your voicemail.

BEST PRACTICE: Submitting Clinical Information

Providing the best clinical picture of a child's current symptoms and behaviors, as well as previous episodes and incidents, play a significant part in Maximus making accurate clinical determinations. As a result, we continue to request providers to submit detailed clinical information, including timeframes/timelines to delineate between historical and present.

SNEAK PREVIEW: System Transition Planned for Later in 2022

Exciting things are ahead later this year, as planning moves forward on a system transition for ND Under 21 program to **AssessmentPro**, the industry leading online system for the management of Maximus assessments. As we move closer toward this launch, we will keep you connected with important updates and resources.

Stay tuned in the coming months for more information on next steps, including:

- **Process Guides:** Understand what's changing, with a helpful overview of AssessmentPro processes and procedures.
- **System Benefits:** Walkthrough of the positive impact this new tool can have for the provider community and most importantly, those we serve together across Connecticut.
- **Account Registration:** Step-by-step instructions to create your new account for the new system.
- **Learning Opportunities:** Dates and registration details for both webinars and on-site events.

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6/8/2022

System Update: IP Address for AscendAMI to be Updated on Wednesday, June 15, 2022

On the evening of **Wednesday June 15**, the Maximus IT team will **update the IP address** for [AscendAMI.com](https://www.ascendAMI.com). This change is not expected to affect any existing bookmark or site access for the majority of all system users.

In the unlikely event this change does affect your ability to access the site after the transition date, please contact your organization's IT support team. Notify them that you require updated access to the AscendAMI site and forward the information below so that they can add the information to their list of approved IP addresses.

Web Domain: www.ascendAMI.com

New IP Address: 52.176.156.181

4/11/2022

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9/13/2022

ATTN PRTF Providers – Quarterly Newsletter: Certificate of Need Best Practices | Branding Updates Notice

BEST PRACTICE: Certificate of Need (CON) Guidance

When referencing dates and timelines, Maximus is requesting approximate dates. For example, for items requesting prior inpatient or outpatient treatment dates, last treatment dates, dates pertaining to onset of symptoms requiring PRTF level of care - all of these can be approximate dates and **do not need to reflect exact (to the day) dates.**

Keep an eye out for an additional communication regarding other CON review updates, such as transitioning several items to “optional” when completing the PRTF review.

To provide additional clarification, the only attachment or supporting documentation requirement that pertains to the PRTF CON process is described on page 16 of the [North Dakota Under 21 Provider Manual](#):

*Provider submits the **most recent psychiatric assessment/evaluation** [dated within ninety (90) days prior to proposed admission date] delineating the child's mental, emotional or behavioral disorder requiring the intensity of services offered in an inpatient setting. The purpose of the psychiatric assessment/evaluation is to **establish medical necessity for all CON reviews** completed by the Maximus Utilization Review team.*

A letter can be provided in lieu of an available assessment/evaluation note; however it **must include the following items:**

- *Composed on the hospital or office letterhead of the physician dated within ninety (90) days of proposed admission date*

- *Description of subjective/objective observations, diagnosis(es), current psychotropic medications and recommendations*

New policy: if neither an assessment/evaluation or a letter is available to submit with the admission review, the child will be approved for an **initial fifteen (15) days** in order for the treating facility to complete a psychiatric assessment. A CSR must be completed, and include the psychiatric assessment, with the Continued Stay Review (CSR), if length of stay requires additional time.

1. **SELF CARE DEFICIT:** Basic impairment of needs for nutrition, sleep, hygiene, rest, stimulation due to a DSM-IV diagnosis.
 - a. Self-care deficit severe and long standing enough to prevent participation in any alternative setting in the community, including refusal to comply with treatment (i.e., medications).
 - b. Self-care deficit placing the individual in a life-threatening physiological imbalance without skilled intervention and supervision, including dehydration, starvation states, exhaustion due to extreme hyperactivity.
 - c. Sleep deprivation or significant weight loss.
2. **IMPAIRED SAFETY, THREAT TO SELF OR OTHERS:** Verbalizations or gestures of intent to harm self or others, caused by the mental disorder.
 - a. Threats accompanied by one (1) of the following:
 - Depressed mood (irritable mood in children, weight loss, weight gain)
 - Recent loss
 - A recent suicide attempt or gesture (or past history of multiple attempts or gestures)
 - Concomitant substance abuse
 - Recent suicide or history of multiple suicides in family or peer group
 - Aggression toward others
 - Cruelty to animals
 - b. Verbalization escalating in intensity; or
 - c. Verbalization of intent accompanied by gesture or plan.
3. **IMPAIRED THOUGHT PROCESS:** Inability to perceive and validate reality to the extent the individual cannot negotiate basic environment or participate in family/school life (such as paranoia, hallucinations or delusions). Indicators include:
 - a. Disruption of safety to self, family, peer, or community group.
 - b. Impaired reality testing sufficient to prohibit individual's participation in any community educational alternative.
 - c. Individual is not responsive to outpatient trial of medication or supportive care.
4. **SEVERELY DYSFUNCTIONAL PATTERNS:** Family, environmental, or behavioral processes placing the individual at risk.
 - a. Documentation by mental health professional of family environment that is causing escalation of child's symptoms or places the child at risk.
 - b. A family situation not responsive to outpatient or community resources and intervention.
 - c. Escalation of instability or disruption.
 - d. A situation that does not improve with the provision of economic or social resources.
 - e. Severe behavior, such as habitual runaway, prostitution, and repeated substance abuse, prohibits participation in a lower level of care.

Criterion C: The services can reasonably be expected to improve the recipient's condition or prevent further regression so that the services will no longer be needed. To meet this requirement, ALL of the following conditions must be met.

1. **The provider describes an PRTF treatment plan that meets all of the following:**
 - Addresses the assessed need(s) and diagnosis(es) of the child
 - Sets out reasonable treatment goals that can be used to demonstrate improvement over the authorization period
 - Includes a comprehensive discharge plan with discrete mental, emotional, and/or behavioral criteria, expected discharge date, and identified outpatient provider for any continuing community-based treatment
2. **The psychiatric assessment delineates mental, emotional, or behavioral disorder that requires the intensity of services offered in an inpatient setting.** The psychiatric assessment identifies the recipient's requirement for additional therapeutic interventions, intensive milieu therapy, and a therapeutic environment and reflects the need for inpatient psychiatric care.

UPDATE: New Maximus Branding

You may notice some small changes to this communication, as well as revisions made to the [ND Under 21 Tools and Resources web page](#) in recent months. This includes updates to the company logo, headers, and other graphic elements.

This evolution of the global Maximus brand is intended to visually emphasize the active partnership we have with program stakeholders like you to positively impact the lives of those we serve together.

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