MINES
& ASSOCIATES
A National Business Psychology Firm

Additional Authorization Requests
Provider Handbook

Table of Contents

EAP Counseling Model Expectations and Assumptions 3
EAP Provider Role 3
EAP Allowance for Additional Authorizations 3
Definitions 3
Separate and Distinct Life Situation 3
Examples of life situations include: 3
ICD Code 4
Modality 4
Treatment modality 4
Therapy modality 4
Decision Tree 4
Insurance and Self-pay Life Situation Examples to be Assessed and Referred 4
Diagnoses 5
Client Discussions 5
How do I know if it is appropriate to request a new authorization or not? 5
How do I ethically determine how to best help the client? 5
Additional considerations 6
MINES Support Around Requests 6
Contact MINES Case Management 6
How to Request Additional Authorizations 6
ICD Code determination 6
How to describe a separate and distinct life situation/issue 7
Start Date 7
Backdated Requests 7
MINES Review Process 7
Review of request 7
Approval 7
Denial 7
Why do we deny? 8
What are the next actions you can take? 8
Follow up with questions 8
Final Notes 8

EAP Counseling Model Expectations and Assumptions

EAP is a session-limited solution-focused, assess and refer counseling model. Clients may be referred for a variety of needs and life situations. They may come into the EAP sessions with multiple and complex issues. From the first session, the EAP provider is expected to assess with the client what are their needs and goals. If the goals can be accomplished in a session-limited model, the provider should proceed. However, if the life situation or diagnosis requires more resources in terms of sessions or payment options then the client should access those resources based on the assessment and with the consultation assistance of the provider.

EAP Provider Role

It should be clear from the beginning that if the client's goals and needs cannot be met within the session limit, they will need to be either referred and transferred to insurance, self-pay, or to community resources. MINES can assist the provider in helping the client with this process. Review the decision tree and examples below to assist in determining if the life situation the client is addressing is ongoing or a situation that can be resolved within the session-limited EAP counseling model.

EAP Allowance for Additional Authorizations

The EAP does allow for a new authorization within the same contract year for a new, separate, and distinct life situation. This "per life situation" benefit is intended to offer the EAP support to clients that encounter a new life situation without them having to wait for the contract renewal. It is not the intended purpose of the "per life situation" benefit to continue the counseling for related issues that have been uncovered in the course of the initial EAP sessions. This frequently occurs in the course of counseling and is considered a clear continuation of the course of treatment and thus needs to be treated outside of the EAP model.

Definitions

Separate and Distinct Life Situation

A distinct, separate, and new event that is has led the client to seek EAP services. Clients may seek EAP support initially for any life situation. Conditions and needs that arise from the initial course of treatment should be seen as ongoing counseling and referred to insurance, private pay, or community resources. **Requests for continuation of sessions by definition will be denied.**

Examples of life situations include:

- Divorce
- Marriage
- Pregnancy/Birth/Adoption of a child(ren)
- Change in financial or legal status
- Recent loss and grief
- Geographic relocation
- Work stress related to a specific event at work
- Health issues
- Injury
- Caregiving
- Career decisions/changes

- Family tragedy/events
- Recent suicide ideation or attempt
- Climactic events or natural disasters directly affecting the person
- Societal events directly affecting the person
- Child(ren) having problems in school/home
- Physical or verbal harassment from either within or outside the workplace
  Dealing with a major emergency, such as a car accident or an injured loved one

ICD Code

MINES utilizes the ICD-10 for all EAP authorization. You will generally utilize an F or Z code from the ICD-10 to identify what the client is working on. The ICD-10 replaced the DSM V coding criteria. One free online resource you can utilize to help you identify an appropriate ICD code is https://www.icd10data.com/.

Modality

Treatment modality does not define a new life situation. A related issue treated in a different modality would not a constitute new life situation e.g. relationship struggles focused on in individual sessions and evolved to couples counseling would not constitute a new authorization. A new life situation requiring a different treatment modality would be approved for a new authorization. For example, couples counseling that was resolved in EAP sessions and then an unexpected death of a family member can be treated in individual counseling and could be authorized.

Therapy modality exclusions will not be authorized. Examples would be play therapy. If a child requires play therapy, the child can be assessed and referred in an EAP session-limited benefit to a play therapist that can be accessed through insurance (if covered by insurance) or private pay. Play therapy, biofeedback, acupuncture, psychiatric care, hypnotherapy, massage therapy, and equine/animal therapy are excluded services in MINES EAP contracts.

Decision Tree

This table can be used as a guideline for MINES' EAP providers in determining if it is appropriate to request a new authorization within a client's EAP contract year. All requests for new authorization will be reviewed by MINES' clinical team according to these guidelines.

Insurance and Self-pay Life Situation Examples to be Assessed and Referred

These are examples in which a provider would assess and refer as they cannot be ethically or professionally treated in a session-limited benefit and require assessment and referral from the EAP into resources that clinically are more appropriate with ongoing care options:

- Family or Parent/child concerns where there are major diagnoses requiring care beyond the session-limited benefit. Examples would be sexual abuse, mental illness, and drug alcohol diagnoses.
- Societal events directly affecting the person where there are major diagnoses requiring care beyond the session-limited benefit.
- Relationship changes where there are major diagnoses requiring care beyond the session-limited benefit. Examples may include personality disorders, or the major diagnostic areas listed below.

- Urgent or emergency mental health or substance use disorders symptoms can access the EAP for assessment, stabilization, and referral into resources for longer-term therapy.
- Sexual identity change, new transition, this would be an example of assess and refer because of the ongoing transition over an extended period of time.

Diagnoses

These are examples of diagnoses that cannot be ethically or professionally treated in a session-limited benefit and require assessment and referral from the EAP into resources that clinically are more appropriate with longer care options:

- Major Depression
- Anxiety Disorders versus situational anxiety of a subacute nature
- PTSD
- SUDS
- Mood disorders
- Psychotic disorders
- Fetishes
- Eating Disorders
- Autism
- Asperger
- Developmental issues of childhood
- Personality Disorders

Client Discussions

MINES expects you as a MINES EAP Provider to be able to represent our criteria to our clients as well as assisting the client in understanding the purpose of EAP vs. ongoing care.

How do I know if it is appropriate to request a new authorization or not?

Review the decision tree and the exclusions above. If it does not meet those criteria, it is not appropriate to request a new authorization.

How do I ethically determine how to best help the client?

Be clear with the client from the start of counseling that the intent of EAP is a session-limited solution-focused model and assess and refer counseling.

We recognize that many clients that are referred to our EAP affiliates may have a variety of issues, needs, and concerns that they present to the EAP affiliate. Many clients come into counseling with the expectation that all or most of these “issues” will be addressed and hopefully resolved in the EAP sessions. They may well say that they have a “per issue” or “per problem” benefit and that “HR has told them they can utilize as many separate issues as they need”. The best way to address this with clients is to go over and clarify the EAP process as described in this manual. Life situation should be defined for the client and from the start of counseling; let the client know what will occur when their sessions are coming to an end. Always feel free to consult with MINES’ clinical team when needed.

If the client’s presenting problem clearly cannot be resolved within the session model, explore the options for continued outpatient counseling with yourself through insurance or self-pay, referral to

other levels of care, or referrals to other outpatient providers if you are not an option. You can continue to see the client as a support to get the client connected to other care if this is an option. You can also work with MINES to help find resources/referrals for the client outside of the EAP.

Additional considerations

- If related issues emerge as you are working within the EAP sessions, consider and assess the same criteria as above.
- It is not ethical and clinically indicated to treat an underlying issue in limited treatment episodes e.g. underlying issue is depression and requests are for anxiety, relationship, early trauma, etc.
- Clients typically have difficulty with forming a relationship with a provider and then needing to "tell their story" to a new person if they need to see someone in their insurance. This is why it is important to be clear about the expectations of EAP counseling from the beginning. It is ethical to consider the client's ongoing needs throughout the process and be mindful of your relationship throughout the progression of EAP.
- It is not appropriate to advocate for the client to get as many 'free sessions" as possible if the client's life situation does not meet the criteria.
- If you are not in the client's insurance network and you recognize that the client will need ongoing therapy, you may want to discuss with them about finding a new referral who is in their insurance vs. continuing through the EAP and transitioning into self-pay.

MINES Support Around Requests

Contact MINES Case Management

MINES is here to support you as a clinician and can review clinical needs as they arise to help you determine how to talk to a client about their life situation, how to support them besides using the EAP, or how to help you keep the boundary and integrity of the EAP model. You are welcome to call or email MINES to discuss additional authorization requests or treatment options at any time. If you utilize email, please only use the authorization number to identify the client unless you are using secure and encrypted email to protect HIPAA information.

How to Request Additional Authorizations

For additional help on how to request additional authorizations, please check out this step by step process.

ICD Code determination

In the billing for the original authorization, there should always be an ICD code listed. This defines the primary concern for each EAP session. In the request for a new authorization, the ICD code should reflect the new life situation. This will typically be a different ICD code unless the new situation happens to meet the same diagnosis. This would be unusual. Z codes are acceptable and appropriate for EAP counseling.

You can choose from Z codes depending on what the client is dealing with. To select this in the request, type in the letter Z or F, and the drop-down list will appear for you to select the code you are looking for.

How to describe a separate and distinct life situation/issue

Clearly state what the initial issue was, distinctly state what the new life situation is; if necessary, how and why it is separate, distinct, and new from the initial life situation.

Start Date

The separate and distinct life situation should have occurred between the last session date and the "start date" requested. Please note that most life situations do not occur back to back and we may have questions relating to if it is really a separate and distinct life situation versus a continuation of care. This means in most cases there will be a lapse of time between the last session date and the "start date" requested. Please note that just because you selected a start date, it does not mean that we will be able to honor that date particularly in the cases that it occurred prior to the request being made or prior to the time that case management has reviewed the request. New authorization requests must be approved before starting new sessions unless it is an absolute emergency. If there is an absolute emergency and you feel the client must be seen, please call the MINES' case management staff to inform them. If you have any questions about this, please contact MINES Clinical staff by calling us at 800-873-7138 or email providerinfo@minesandassociates.com so we can assist you in choosing a start date.

Backdated Requests

Any requests made for us to backdate a new authorization for a new life situation will not be approved to a previous date. We will only authorize from the date we reviewed and approve the request or a future date after. **Any sessions between the date requested as the start date and the date the review is completed will not be covered as they occurred during a time when there was not an authorization in place.**

MINES Review Process

Review of request

Once you have submitted the request on the provider portal, it goes directly to the MINES Clinical Case Management Team for review. Please allow 5-7 business days to review your request as this timeline is dependent on how many requests have been received and other needs that the team is working on. Once the review has been completed by looking at the previous session notes, authorizations, and other documentation we may have about the client, we will either make a determination if it is approved or denied, or if we need additional information prior to the determination.

Approval

If it is determined it is a new life situation, two things will happen:

1. A new authorization will be written.
2. You and the client will receive an email stating a new authorization has been written.

Denial

If it is determined it is not a new life situation, you will receive an email that it was not approved. MINES clinical case management staff will also outreach the client to inform them of the decision and explore their options.

Why do we deny?

We would deny solely based on the criteria stated above.

What are the next actions you can take?

If you feel that it really is a different life situation and somehow it wasn't communicated in a way MINES understood it as that, you are welcome to call in and discuss with one of our clinicians or the clinical supervisor about the decision.

Follow up with questions

If it is determined that more information is needed, the MINES clinician reviewing the request will outreach you as the provider through email to ask for more information about how they are different life situations. The request will be pended until we have heard back from you as the provider. **If we do not hear back from you within 14 business days of the request, we will deny the request on the basis that not enough information was provided to determine if it was a different life situation and follow the denial process described above.**

Final Notes

Thank you for being an EAP provider for us. We appreciate you taking care of our clients and their needs. If you have any additional questions about this process, our criteria, or our expectations, please outreach MINES by emailing providerinfo@minesandassociates.com or calling us at 800-873-7138. We are here to support you.