

ORGANIZATIONAL PROCEDURE

PROCEDURE # 13.2a	EFFECTIVE DATE	REVISED DATE
TITLE: CHILDREN’S HOME AND COMMUNITY BASED WAIVER (CWP) PRIOR REVIEW AND APPROVAL REQUEST PROCEDURE	9/17/2020	1/24/2023
ATTACHMENT TO	REVIEW DATES	
POLICY #: 13.2	5/19/2022	
POLICY TITLE: CHILDREN’S HOME AND COMMUNITY-BASED WAIVER (CWP)		
CHAPTER: SERVICE DELIVERY		

I. PURPOSE

To establish a process for prior review and approval request for beneficiaries of the Children’s Home and Community Based Waiver (CWP).

II. PROCEDURES

- A. Specific services as part of the Children’s Home and Community-Based Services Waiver (CWP) program require prior authorization. These services include:
 1. Environmental Accessibility Adaptations (EAAs)
 2. Fencing
 3. Specialized Medical Equipment and Supplies

- B. The CMHSP must complete and submit an original Prior Review and Approval Request (PRAR) form and the following documentation for each prior authorization request:
 1. Original current (within 365 days) prescription signed by a physician.
 2. Narrative justification of need completed by an appropriate professional.
 3. Documentation that the requested item, device, or modification is essential to the implementation of the child’s individual plan of services and is of direct medical or remedial benefit to the child.
 4. A copy of the habilitation program (i.e., goals, objectives, and methodologies) as related to the request and identified in the individual plan of services (IPOS).
 5. Written denial of funding from other sources, including private insurance, Medicaid, or Children’s Special Health Care Services (CSHCS) when applicable, charitable or community organizations, and housing grant programs. If the private insurance carrier requires prior authorization to determine coverage, a request for prior authorization must be submitted to the carrier before submitting the PRAR.
 6. Three similar bids for requests costing equal to or more than \$1,000; only one bid is required for requests less than \$1,000. If fewer than three bids are obtained for requests costing equal to or more than \$1,000, documentation must describe what efforts were made to secure the bids, and why fewer than three bids were obtained.

C. LRE Clinical Review Team

The completed PRAR and supporting documentation must be submitted by the CMHSP to Lakeshore Regional Entity (LRE) for review.

1. The LRE Clinical Review Team will meet monthly to review all complete HSW PRAR Requests.
 - a. Upon acceptance by the LRE Waiver Staff, the PRAR packet will be submitted to the Clinical Review Team. All requests must be submitted for review no less than 14 calendar days prior to the regular monthly meeting.
 - b. Packets received after the 14-day period will be reviewed at the next month’s regularly scheduled meeting of the Clinical Review Team.
 - c. Exceptions to the 14-day requirement and/or expedited requests will be considered on a case-by-case basis.
2. LRE will provide a written response to the recipient and CMHSP within 45 days of receipt of a complete PRAR packet.

The completed PRAR and supporting documentation must be submitted by the CMHSP to Lakeshore Regional Entity (LRE) for review and submission to Michigan Department of Health and Human Services (MDHHS). Decision will be communicated to the CMHSP via the Waiver Support Application (WSA).

III. APPLICABILITY AND RESPONSIBILITY

This procedure applies to LRE Staff, member CMHSPs, and the LRE Provider Network.

IV. MONITORING AND REVIEW

This procedure will be reviewed by the LRE CEO or Designee on an annual basis.

V. DEFINITIONS

CWP: Children’s Home and Community-Based Services Waiver Program

WSA: Waiver Supports Application

VI. RELATED POLICIES AND PROCEDURES

- A. LRE Service Delivery Policies and Procedures

VII. REFERENCES/LEGAL AUTHORITY

- A. MDHHS Medicaid Specialty Supports and Services Contract
- B. Michigan Medicaid Provider Manual

VIII. CHANGE LOG

Date of Change	Description of Change	Responsible Party
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9.2021	New	LRE CEO or Designee