



JOB AID: Process for Authorization Requests to a Skilled Nursing Facility (SNF)

Pertains to: Advantage MD, Priority Partners, Employer Health Programs (EHP), and US Family Health Plan (USFHP)

Johns Hopkins Health Plans expeditiously approves the transfer of a member from an acute inpatient facility for five (5) days at an in-network* Skilled Nursing Facility (SNF) when the hospital meets the following conditions:

- Identify the SNF where the member will be transferred.
- Provide the appropriate supporting clinical documentation to Johns Hopkins Health Plans in the authorization request, along with a valid diagnosis.
- Fax an authorization request to Johns Hopkins Health Plans for the SNF transfer. Requests must be submitted with a completed Authorization Request Form, accompanied by complete clinical documentation. When requests are received without clinical documentation, Johns Hopkins Health Plans intake staff will fax the hospital and request the required documentation.
- Clinical documentation must include, at a minimum:
 - PT and OT notes
 - Wound management (if applicable)
 - Respiratory management (if applicable)
 - Progress notes
 - History and physical
- Bed level must be entered at the time of the request. If not, Johns Hopkins Health Plans will enter the case at the lowest level.
- When a member requires non-emergent ambulance transportation to a SNF, the hospital must also submit a separate ambulance authorization request when it is medically necessary.
 - Non-emergent ambulance transportation requests require the submission of a Physician Certification statement from the hospital. Requests submitted without this form will be pended for clinical review.
- Fax the request and supporting clinical documentation to Johns Hopkins Health Plans at **410-424-2703 during regular and extended hours.**
 - During regular business hours, a dedicated Utilization Management (UM) representative is available at 410-762-5210 to answer questions.

When the above conditions are completed and Johns Hopkins Health Plans approves the 5 days, a Concurrent Review Task is created for the appropriate Johns Hopkins Health Plans UM reviewer with a case follow-up date, and an approval letter is sent by Johns Hopkins Health Plans to the member, along with a fax to the hospital. If the above conditions are not met, the request will be pended for a Johns Hopkins Health Plans UM nurse to review. If Johns Hopkins Health Plans receives a request beyond the 5-day expedited approval, the UM department will reach out to the hospital as part of their concurrent review for medical necessity.

***NOTE:** *If a request is submitted for an out-of-network SNF, the request will be pended for a UM nurse to review*