EVERNORTH

Instructions for next day appointments

For Washington 988 Crisis Providers - Next Day Appointment Referral Tool

If you have a patient who has coverage through **Cigna or Evernorth** and they require a next day behavioral appointment you can contact us one of the following ways:

• Call Cigna's Behavioral Program 800.554.6931

If calling Monday - Friday, from 7:30 a.m. - 7 p.m. CST, please follow the instructions below:

- 1. When prompted, press **3** for **Health Care Professional**
- 2. When asked, press 1 to indicate that is for a behavioral plan
- 3. When asked for the nature of the call, say Authorization
- 4. When asked if this is to request a new authorization, say Yes
- 5. When asked if this if for inpatient or a higher level of care, say No
- 6. When asked for your TAX ID number, say I don't have it
- 7. You'll reach a personal advocate who will be able to help you coordinate a next day appointment

If calling outside Monday - Friday, from 7:30 a.m. - 7 p.m. CST, please follow the instructions below:

- 1. When prompted, press 3 for Health Care Professional
- 2. When asked, press 1 to indicate that is for a **behavioral plan**
- 3. When asked for the nature of the call, say Authorization
- 4. When asked if this is to request a new authorization, say Yes
- 5. When asked if this if for inpatient or a higher level of care, say Yes
- 6. You'll reach a personal advocate who will be able to help you coordinate a next day appointment
- Fax completed Washington referral form to fax #833.213.9312
 - Please indicate if a telehealth appointment may be appropriate/acceptable
 - 988 Provider or customer will receive a call back from an Evernorth Behavioral Health Triage Team Member within two hours
- Electronically submit completed Washington referral form by registering for access to the online prior authorization tool.
 - Please indicate if a telehealth appointment may be appropriate/acceptable
 - 988 Provider or customer will receive a call back from an Evernorth Behavioral Health Triage Team Member within two hours

To initiate registration, send an email to <u>PMAC@Cigna.com</u> and include the following information:

- o State WA 988 Crisis Provider/Facility
- o Provider of facility name
- Mailing address
- Email address
- o Contact name
- o Contact telephone number

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Next day appointment referral tool



To be completed by the crisis worker making the referral.

The tool below has been requested by commercial insurance carriers to document the need for a next day appointment (NDA) and provide clinical information about the person in crisis to assist in their care. This tool is meant to give a snapshot to the insurance carrier and is not meant to replace any existing documentation.

A This tool is only to be used once the person is clinically assessed as appropriate for an NDA and the person agrees to an NDA.

Below are definitions of Urgent and Next Day Appointment to use in your clinical judgment and intervention. If you identify a person would benefit from an NDA, please follow these steps:

- 1. Ensure the person is clinically appropriate for an NDA and they agree to one.
 - a. Ensure the person can stay safe until the appointment.
 - b. Ensure the NDA will help resolve the crisis.
 - c. If a support person is helping to coordinate the appointment, ensure the person is available to consent with the plan.
 - d. Not all plans have NDAs available. Check the referral guide to confirm their plan participates.
- 2. Ask the person in crisis for insurance information.
 - a. If they are unable to provide this information and do not have Medicaid and there is no ability to look up carrier, an NDA may not be appropriate at this tim.
 - b. If the person is uninsured BH-ASOs may have NDA appointments available. Use the referral tool to identify what is available.
- 3. Look up the carrier's referral information in the referral cheat sheet
- 4. Contact the carrier following the method in the cheat sheet.
- 5. Develop a safety plan while they wait for an NDA.
- 6. Submit this tool to the carrier using information from the referral sheet.

Please copy and paste notes from the crisis documentation (if you are able) into the form and submit to the plan using the referral cheat sheet.

Definitions

Urgent: "Urgent Behavioral Health Condition" means a behavioral health condition that requires attention and assessment within 24-hours, but which does not place the person in immediate danger to self or others and the person is able to participate and attend appointments.

Next Day Appointment: A Next Day Appointment (NDA) means an appointment that a person can access the next day or in an agreed timely manner that will help the person resolve the problems that contribute a person being in an Urgent Behavioral Health Condition. These appointments are not intended to be ongoing crisis interventions or stabilization provided by crisis workers. They are meant to be a step to resolving the crisis and lead to further services. Appointments may be provided by telehealth or by any medical professional operating within their scope of practice. Examples may include:

- Medication consults
- Appointments with PCP, clinician, or prescriber
- Intake assessments
- Other consults

Contact

For questions on this process contact: HCAProgram1477@hca.wa.gov

▲ This mailbox is not for crisis concerns or emergencies because it is not checked regularly.

1	Personal information	
Person's preferred name		Person's date of birth
Name on plan		
2	Clinical notes	
Clinical observations		
Overall presentation		

Presenting problem

Safety concerns

Safety plan

NDA justification

Using your clinical judgement based on the factors above, why does the person meet the definition of *urgent*?

Why does an NDA solve the presenting problem?

3	Follow up notes				
Is there a plan for crisis follow u	o services?	No			
If yes, who will follow up? Follow up plan:					
Do you wish to receive notificati	on the person attends their NDA?			Yes	No
Do you want information about the outcome of the NDA (ROI permitting)?				Yes	No
If yes to a follow up, please prov	ide your contact information.				
Name			Phone		

Email