



## North Sound BH-ASO

2021 E. College Way, Suite 101, Mt. Vernon, WA 98273

Phone: (360) 416-7013 Fax: (360) 899-4754

[www.nsbhaso.org](http://www.nsbhaso.org)

North Sound BH-ASO Memorandum 2022-03

**DATE:** 2/22/2022  
**TO:** North Sound BH-ASO Provider Network, North Sound Counties  
**FROM:** Margaret Rojas, Assistant Director  
**RE:** Retro Authorizations and Invoicing Instructions

This Numbered Memorandum is a continuation of Numbered Memorandum 2021-09 *Invoicing Terms* found on our website [here](#).

For the ASO to comply with the Health Care Authority's directive we are clarifying the invoicing terms at the end of every fiscal year, June 30<sup>th</sup>.

Federal Block Grant payments cannot cross grant periods, services occurring within grant period must be invoiced and/or fee for service encounters received by the end of the grant year (June), invoices received after 30-days will be denied or go through an exception process, explained below.

### **Invoices**

Provider must notify the ASO of a pending invoice prior to June 30th at [fiscal@nsbhaso.org](mailto:fiscal@nsbhaso.org)

For payment the following exceptions will be considered:

1. Provider has demonstrated workforce shortages contributing to late invoicing
2. Provider has demonstrated their subcontractor's inability to invoice in a timely manner, resulting in Provider's late invoicing or
3. Rare circumstances outside of provider's control, such as a catastrophic event

All exceptions will be presented and approved by the Executive Director and reported to BOD at their monthly G&O meeting

### **Fee for Service Encounters**

Submitting Authorization Requests-Change in Policy

Retrospective (“post-service”) request for outpatient or residential services must be submitted to North Sound BH-ASO within sixty (60) day from the date of first service provided. Requests that fall beyond sixty (60) days from the date of first service provided may occur in rare situations where circumstances beyond the control of the provider prevented the provider from seeking authorization from North Sound BH-ASO.

Retrospective authorization requests must be received and approved by June 1<sup>st</sup> to guarantee payment.

Retrospective authorization request exceptions to the sixty (60) day requirement may include, but not limited to:

- Provider has documented evidence of pursuing in good faith a third-party payer or any other payer in which the client was not eligible for or had no active benefit/coverage for the services requested.
- Provider has documented evidence that the person’s Medicaid, Medicare, or private insurance benefit coverage was inaccurate at the time of initiating services.
- Provider has documented evidence that at the time of initiating services the individual’s last primary residence was outside the North Sound Regional Service Area (RSA) and provider pursued authorization from another ASO. Upon further review or information, the individual’s residence was confirmed to be North Sound RSA.

Retrospective Authorization requests that do not meet our exception criteria would result in the ASO issuing a Notice of Adverse Authorization Determination (NOAAD) (“Denial”) to the provider and individual.

North Sound BH-ASO *Policy 1594.00 Utilization Management* has been updated to include these new authorization timeframes.

Cc: North Sound BH-ASO Staff