

Emergent Department/Urgent Admission Notification

Unless otherwise specified, information in this policy does not apply to members with the Choice or Choice Plus products offered through Passport ConnectSM. For UnitedHealthcare's related policies/procedures, please go to www.UnitedHealthcareOnline.com or call 800-708-4414.

Emergent/Urgent Admissions

Harvard Pilgrim covers emergency services that are medically necessary to screen and stabilize a member in a medical or behavioral health emergency. Members who believe they are having a medical or behavioral health emergency are encouraged to seek care at the nearest emergency facility. Admission from an emergency department to acute inpatient care does not require prior authorization or referral from a PCP. This does not preclude concurrent review of the appropriateness and medical necessity of the continued stay, following admission.

Admitting hospitals are responsible for notifying Harvard Pilgrim if a member requires emergent/urgent inpatient admission to an acute hospital or behavioral health facility from an emergency room/department (see *Notification Policy*).

Inpatient admissions will be subject to review using InterQual criteria to determine appropriateness of setting (i.e., inpatient admission vs. observation admission). Harvard Pilgrim may contact a facility for additional clinical information to perform review. If information is not received in a timely manner, the decision will be based on the available clinical information and could result in denial of the inpatient admission request.

Note: Massachusetts providers are also required to perform the Emergency Psychiatric Inpatient Admission (EPIA) Protocol Escalation Steps as outlined in the EPIA Protocol 3.0 for inpatient behavioral health and substance use disorder admissions.

Action Required

The admitting hospital is responsible for notifying Harvard Pilgrim within two business days following a member's emergent/urgent admission.

Notification may be communicated through one of the following channels.

Electronic

Submit a transaction record with required information using the *HPHConnect* or NEHEN transaction service.

- Detailed *HPHConnect* instructions are available at www.harvardpilgrim.org/providers. (Refer to the user guides at *HPHConnect*/User Guides.)
- For NEHEN instructions, refer to your NEHEN documentation.

Harvard Pilgrim Response

An immediate confirmation is available online.

Telephone or Mail

Send required information to Harvard Pilgrim's Referral/Authorization Unit. Referral, Notification, and Authorization—Notification Elective Admission Notification.

Fax: 800-232-0816

Phone: 800-708-4414

Harvard Pilgrim Response

Harvard Pilgrim will update the system and confirm via fax or phone within two (2) business days.

Emergent/Urgent Inpatient Behavioral Health Admissions

Send required information to Harvard Pilgrim's Referral/Authorization Unit: by fax to 800-232-0816 or by phone at 800-708-4414. Prior authorization is not required. Prior Authorization is also not required for Post-Stabilization services at an acute (24-hour) level of care facility following an Emergent Inpatient Behavioral Health Admission.

Urgent/emergent acute behavioral health admissions must be reported within 72 hours by facilities in Massachusetts. In all other states urgent/emergent acute behavioral health admissions must be reported within two (2) business days by facilities.

Information Required

The following information is required for notification of an emergent/urgent admission.

- Member's name and Harvard Pilgrim identification number
- Admitting provider's name and National Provider Identifier number (NPI)
- Hospital's name, location and National Provider Identifier (NPI)
- Diagnosis
- Service requested (i.e., admission, procedure, etc.)
- Admission date (must be the actual date the member was admitted to inpatient status)

All requests for services must be submitted with a valid NPI for the requesting and servicing providers.

PUBLICATION HISTORY

11/22/11	updated telephone information
01/01/12	removed First Seniority Freedom information from header
06/15/12	reviewed; edits made for clarity
08/15/14	reviewed; edits made for clarity
06/15/17	reviewed; added inpatient admissions information
03/01/18	reviewed; no changes
10/01/18	reviewed; clarified behavioral health referral and authorization requirements
01/09/19	clarified inpatient level of care reviews
01/01/23	reviewed; no changes
09/01/23	updated for behavioral health insourcing effective on 11/01/23