1. **WE HAVE A QUESTION ABOUT OUR APPLICATION. WHO DO I CONTACT FOR HELP AND WHEN CAN WE REACH THEM?**

   The ABH Provider Relations Department is your best resource and first point of contact for any questions that may arise regarding your organization’s application. Provider Relations staff is available to assist you by calling toll-free: 1-800-606-3677, Option 3, between 8:30 a.m. – 5:00 p.m., Monday through Friday, with the exception of holidays when our offices are closed.

2. **WHERE DO WE SEND THE COMPLETED APPLICATION?**

   Mail your completed application to ABH, Attn: Provider Relations, 213 Court Street, Middletown, CT 06457.

3. **WHAT HAPPENS AFTER WE SEND OUR APPLICATION TO ABH? HOW LONG DOES IT TAKE TO LEARN THE RESULTS?**

   Providers may expect to receive DMHAS notification of approval/denial outcomes within 4 – 6 weeks of ABH’s receipt of the completed application.

4. **WHEN DO PROVIDERS NEED TO SUBMIT A CHANGE FORM AND/OR CERTIFICATION APPLICATION PACKET?**

   Whenever a GA BHP Provider anticipates changes regarding administrative, billing and/or program site addresses, OR plans to add or close a level of care, ABH Provider Relations should be contacted to obtain a CTGA Provider Change Request Form. After the Provider has completed and returned the Change Request Form to ABH, the Provider Relations Director will alert DMHAS to the Provider’s request. DMHAS will then make a determination and advise ABH on whether to proceed with the Provider’s Change Request and/or certification application. If the requested change is for new level(s) of care, upon DMHAS approval, ABH will send a new certification application packet to the provider.

5. **MAY INDIVIDUALS APPLY TO BE CERTIFIED?**

   DMHAS does not currently certify or contract with individuals for the provision of GA BHP services.

6. **HOW LONG DO WE HAVE TO COMPLETE OUR ORGANIZATION’S APPLICATION? IS THERE A DEADLINE?**

   Providers have 30 days from the date of receipt to complete GA BHP Program Profile certification applications. ABH Provider Relations staff will provide follow-up outreach at 10- and 20-day intervals to offer assistance with the timely completion of the application. In the event that an application is not received within 30 days, Providers may ask ABH to request an extension from DMHAS on their behalf. ABH will notify the Provider of the DMHAS decision.
7. **CAN I SEND MY AGENCY’S APPLICATION AND/OR CHANGE REQUEST DIRECTLY TO DMHAS?**

All Provider Change Request Forms and certification applications are to be mailed to the attention of the ABH Provider Relations Director at: ABH, 213 Court Street, Middletown, CT 06457. The Provider Relations Director then initiates tracking and review processes.

8. **WHAT IS INVOLVED IN THE REVIEW PROCESS? HOW LONG WILL IT TAKE FOR OUR CHANGE REQUEST AND/OR CERTIFICATION APPLICATION TO BE REVIEWED?**

When a Change Request or Program Profile certification application is received by ABH, Provider Relations staff will check for accuracy and receipt of all required support materials. The ABH Certification Committee will review the application within 10 business days and forward recommendations to DMHAS for review. The DMHAS Certification Committee makes the final determination regarding approval or denial, and notifies the Provider and ABH of its determination. On average, Providers may anticipate receiving notification of the results within 46 weeks of submitting their completed application. A Providers’ omission of any required support materials or other necessary information may cause delays in the initiation of the review process.

9. **HOW WILL WE KNOW IF OUR ORGANIZATION’S CHANGE REQUEST OR CERTIFICATION APPLICATION IS APPROVED OR DENIED?**

DMHAS will notify ABH regarding approval of change requests or new contracts and will distribute contracts or contract amendments as needed. ABH will work with Providers directly to respond to any questions regarding the outcome of all Program Profile certification and Change Request reviews. DMHAS will release contracts or contract addendum for signature by the provider.

10. **OUR APPLICATION WAS DENIED. IS THERE AN APPEAL PROCESS?**

The decision to certify and contract with an agency for behavioral health services for the GA Behavioral Health Program is the responsibility of DMHAS. Any request to appeal a contracting decision should be made directly to DMHAS within ten (10 days) of receipt of the denial.

11. **HOW WILL WE KNOW WHEN APPROVED CHANGES AND/OR NEW CERTIFICATION GO INTO EFFECT?**

After approving a Change Request and/or Program Profile Certification Application, DMHAS will send a contract amendments or new contract to the Provider that includes specific terms and conditions, including approved service dates. Providers must consistently adhere to the terms and conditions of the contract in order to participate in the GA BHP.

12. **WHAT ARE PROVISIONAL AUTHORIZATIONS?**

When there is a lengthy period of time required for review of change requests, DMHAS may instruct ABH to issue “provisional authorizations”. Provisional authorizations require that a provider follow review guidelines for the level of care being provisionally authorized. Authorization letters are issued within 2-5 business days following the DMHAS decision to move the provider from provisional to fully contracted status for the level(s) of care.