



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

New Hampshire Medicaid Program

To: All Providers
From: NH Medicaid's Fee-for-Service Program
Date: November 1, 2021
Subject: Fee for Service - Service Authorizations Form Changes and Submission Requirements

The NH Medicaid's Fee-for-Service program is changing the service authorization request forms. Forms can be found at <https://nhmmis.nh.gov>, under *Documentation, Documents and Forms, Service Authorization for Fee-for-Service*. The service authorization request forms are electronically fillable PDF documents and include instructions on filling out and submitting forms. It is the hope that this will be a more efficient process as well as reduce the amount of paper used by both you and the Department. The new forms go into effect immediately.

NH Medicaid's Fee-for-Service (FFS) program is continuing to provide secured email chains and a dedicated email box for submission of service authorizations to the Medicaid Medical Services Fee-for-Service Department. This is the preferred method for sending in your requests. The Department will communicate with you through these emails as to the status of your request. **If you have a current process for securing HIPAA protected health information, you should continue to use it to submit authorization requests.** If you do not have a process to secure attached information, Providers should continue to use the email address ServiceAuthorizationFFS@dhhs.nh.gov to request a secured email link. If you choose to continue to use our fax to return requests, please note that the approval process may be delayed.

NOTE: All HIPAA protected information **must be encrypted**. Please follow these steps when sending information to this address to ensure encryption.

1. Providers must complete the usual *Request for Service Authorization Form* for the services they are requesting for Fee-for-Service members. You can do this by requesting a secured email link, for one time use, by emailing ServiceAuthorizationFFS@dhhs.nh.gov. In the subject line write Requesting Approval for: then choose DME, Incontinence, Therapy etc. The forms with instructions will be emailed to you ASAP. (If you choose to continue using our fax, these are on the MMIS website, <https://nhmmis.nh.gov>, under *Documentation, Documents and Forms, Service Authorization for Fee-for-Service*.)
2. Fill out the form sent to you and attach all the required documentation you would normally send with your request. The forms are PDF files. We are able to process .doc, .jpeg, .pdf formats.
3. Send these documents to FFS Department by replying to the encrypted email the documents were sent with. The address should be ServiceAuthorizationFFS@dhhs.nh.gov. The subject line should say [SoNH Encrypt]. Do not change any of the words in the subject line except to add the member's initials. This ensures the encryption stays in place as you communicate with the Department.
4. You will receive a return email confirming your authorization or requesting more information.
5. If you have a secure email software through your company, you may use that. You would not need to request a secured email link.

Please print this notice for future reference.

If you have questions about submitting Service Authorizations, please contact Medicaid Fee-for-Service Provider Services at 866-291-1674.

If you have questions regarding this notice, please contact Sandy Davidson Medical Consultant II at 603-271-9632 or by email at Sandra.N.Davidson@dhhs.nh.gov.