



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

New Hampshire Medicaid Program

To: NH Medicaid Enrolled Providers
From: NH Division of Medicaid Services
Date: August 17, 2023
Subject: Fee for Service - Service Authorizations Form Changes and Submission Requirements

Please share this notice with those in your organization who fill out Service Authorization Requests.

The NH Medicaid Fee-for-Service (FFS) program has released new service authorization request forms, effective immediately. The service authorization request forms are electronically fillable PDF documents, submitted through email as described below. Forms, along with instructions, can be found at <https://nhmmis.nh.gov>, under *Documentation, Documents and Forms, Service Authorization for Fee-for-Service*. **Please note the new fax number (603-314-8101) for submission of forms.**

All information sent electronically, that contains Protected Health Information (PHI), must be sent encrypted. **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 information, providers may continue to use the email address ServiceAuthorizationFFS@dhhs.nh.gov to request a secured email link. **Please note there is a new fax number (603-314-8101).**

NOTE: All HIPAA protected information **must be encrypted**. The Department will not open any unencrypted emails.

Please follow these steps when sending information to the Department to ensure encryption.

1. Providers must complete the *Request for Service Authorization Form* for the services they are requesting for Fee-for-Service members. These forms and instructions are on the MMIS website, <https://nhmmis.nh.gov>, under *Documentation, Documents and Forms, Service Authorization for Fee-for-Service*.
2. If you have a secure email software through your company, you may use that. You would not need to request a secured email link. If needed, you may request a secured email link, by emailing ServiceAuthorizationFFS@dhhs.nh.gov. In the subject line write "Requesting Approval for" then choose your service, i.e. DME, Surgery, Therapy, etc. The forms with instructions will be emailed to you as soon as we are able.
3. These forms are in .pdf format. If you open them with Adobe Reader, on the right side of the window is the icon for "Fill & Sign." Clicking there makes these forms electronically fillable. Fill out the form and attach all the required documentation. We are able to process .doc, .jpeg, .pdf formats.
4. Send these documents to the FFS Department by emailing ServiceAuthorizationFFS@dhhs.nh.gov or replying to the Department's encrypted email used to send the form to you. If you are replying to the Department's email, do not change the subject line. This ensures the encryption stays in place as you communicate with the Department.
5. You will receive a return email confirming your authorization or requesting more information.

Please print this notice for future reference.

If you have questions regarding this notice or about submitting Service Authorization requests, please contact Medicaid Medical Services Unit at 603-271-9384 or by email at ServiceAuthorizationFFS@dhhs.nh.gov.

If there are any questions on this notice, please contact the Provider Relations Unit at (603) 223-4774 or (866) 291-1674.

Thank you,

NH Medicaid Provider Relations