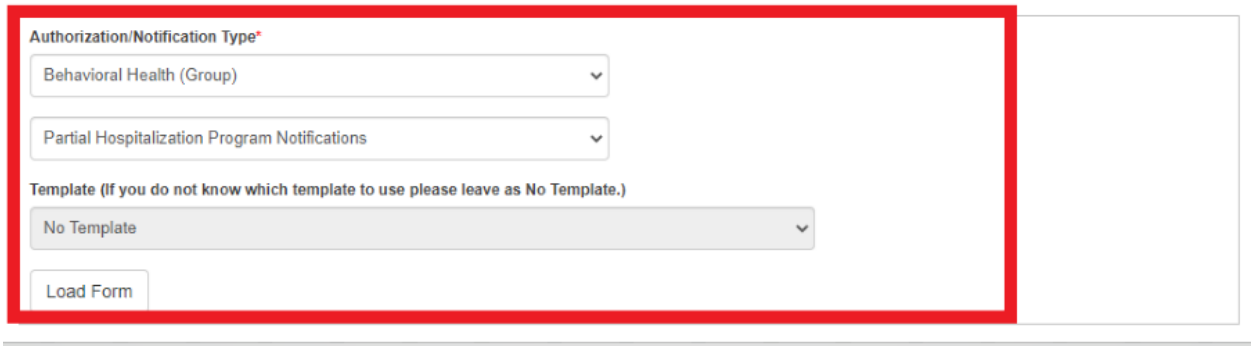
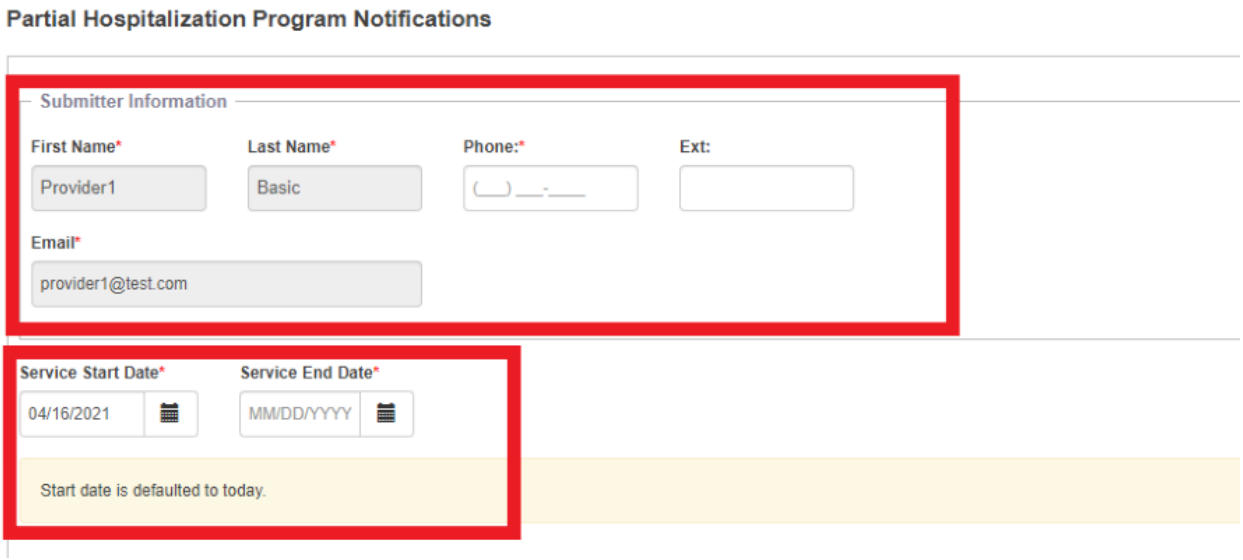
Partial Hospitalization Program

Create a new notification or edit member information (see *Getting Started*).
Note: All fields with a red asterisk are required.

Select *Behavioral Health (Group)* from the first "Authorization/Notification Type" dropdown menu and select *Partial Hospitalization Program Notifications* from the second dropdown menu. Then, click the "Load Form" button.



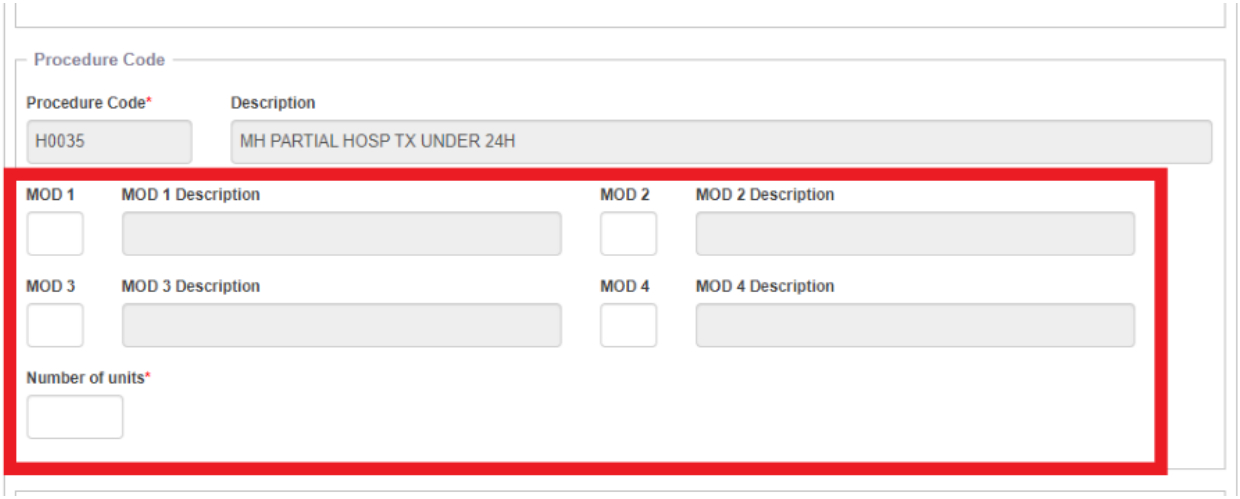
Fill out the submitter information in full and enter the services start date and service end date.
Note: Service start date will always default to the date the notification is entered.



Select the facility in which the services are being provided and enter the facility phone number.

Enter diagnoses.

Enter modifiers and units.
Note: The procedure code H0035 will always auto populate.



Enter additional comments and attachments, then submit the notification to PrimeWest Health.