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**Alert #** BHO-CT PN 2020-02  
**To:** CT IICAPS Provider Network

**Issued:** July 16, 2020  
**Re:** Limited Benefit (D05) Process - Voluntary Care Management

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Dear Provider,

This notice is being distributed to CT providers who offer IICAPS services and support to children and their families. The below information details how Voluntary Care Managers (VCMs), DCF, and IICAPS providers collaborate to process a Limited Benefit (D05) application through Beacon's Voluntary Care Management Program.

When IICAPS is identified as the appropriate service by the Voluntary Care Management Program, the following steps will take place to obtain Limited Benefits (D05) after all other insurance options have been exhausted:

**1. Application Process:**

*Beacon VCM will:*

- Identify a provider with the family.
- Complete and send the D05 fax cover sheet, application and DCF release form to DCF medical assistance unit.

*DCF will:*

- Review forms for completion and take the necessary steps to obtain the Limited Benefit to support the services requested.
- Alert Beacon VCM of the approval

**2. Application Approval & Provision of Services:**

*Beacon VCM will:*

- Notify the family and the identified provider of the approval and will send a hard copy of the approval to both family and provider.
- Notify the Office of the Healthcare Advocate (OHA) of the approval, the child's information and the provider.

*IICAPS Providers will:*

- Deliver the identified service.
- Process authorization requests using the CT BHP issued Provider ID and password for Provider Connect
- Submit claim requests to DXC Technologies accordingly.
- Notify DCF and VCM upon discharge with the child's name and Limited Benefit Number to [DCF.MedicalAssitance@ct.gov](mailto:DCF.MedicalAssitance@ct.gov) and [ctchildandfamily@beaconhealthoptions.com](mailto:ctchildandfamily@beaconhealthoptions.com)



# PROVIDER NOTICE

**Please note: commercial insurance should be exhausted prior to the use of the Limited Benefit.**

We thank you for your participation and look forward to working with you.

If you have any questions concerning this transmittal, please feel free to contact the Provider Relations/Network Operations Department with the subject line ***Provider Inquiry*** to:

 [CTChildandFamily@beaconhealthoptions.com](mailto:CTChildandFamily@beaconhealthoptions.com)

Sincerely,

Provider Relations/Network Operations  
Beacon Health Options