

iConnect Service Authorization

Authorization Details**iConnect ID** 42962**PIN** 0000200595

Consumer Erick Pastrana**Recipient ID** 7767058573**Provider** UNITED FAMILY HEALTH CARE INC**Provider Medicaid ID** 103690700**WSC** Hugo Ortiz**iConnect Provider Id** 18575**Fiscal Year** 2021-2022**Begin Date** 07/01/2021**End Date** 06/30/2022**Description** (4080) Life Skills Development - Level 1 (Community Inclusion)**Service Code** S5135UC**Units Per** 120.00**Ratio** 1:1**Unit of Measure** Week**Rate** \$2.92**Unit Type** 15 mins**Max Approved Amt** \$18270.44**Max Units** 6257

Prior Authorization Data

SA Status Approved**PA Number** 5221179121**PA Status** Approved**PA Assign Date****Authorization ID** 474767**PA Reject Reason**

Notes

Please approve 120 QH P/W X 52 = 6240 units of Life Skills Level 1 (Community Inclusion) per year

Service provided in accordance with current support plan. Documentation must be provided in accordance with the iBudget Waiver Handbook.

Hugo B Ortiz 06/13/2021
