

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** 2020-2021**Begin Date** 06/24/2021**End Date** 06/30/2021**Description** (4080) Life Skills Development - Level 1 (Community Inclusion)**Service Code** S5135UC**Units Per** 125.00**Ratio** 1:1**Unit of Measure** Week**Rate** \$2.92**Unit Type** 15 mins**Max Approved Amt** \$365**Max Units** 125

Prior Authorization Data

SA Status Approved**PA Number** 5021196412**PA Status** Approved**PA Assign Date****Authorization ID** 483798**PA Reject Reason**

Notes

Consumer needs 125QH P/W x 1 = 125 Units of Life Skills Level 1

Hugo B Ortiz 07/20/21
