

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	2022-2023		
Begin Date	07/01/2022	End Date	06/30/2023		
Description	(4140) Personal Supports				
Service Code	S5130UC	Units Per	36.00		
Ratio	1:1	Unit of Measure	Calendar Day		
Rate	\$5.47	Unit Type	15 mins		
Max Approved Amt	\$71875.8	Max Units	13140		

Prior Authorization Data

SA Status	Approved	PA Number	8522102188
PA Status	Approved	PA Assign Date	
Authorization ID	571767	PA Reject Reason	

Notes

Please approve 36QH P/D X 365 = 13140 units of personal support per year

Service provided in accordance with current support plan. Documentation must be provided in accordance with the iBudget Waiver Handbook. [Rate Change 2309]

07/15/2022