

## iConnect Service Authorization

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

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**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** 08/01/2020**End Date** 06/30/2021**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** \$16468.8**Max Units** 5640

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**Prior Authorization Data****SA Status** Approved**PA Number** 5020220135**PA Status** Approved**PA Assign Date****Authorization ID** 335556**PA Reject Reason**

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**Notes**

Please approve 120 QH P/W X 46= 5606 units of Life Skills Level 1 (Community Inclusion) per year

*Hugo B Ortiz 08/10/20*