



## Referral Process

	What Ascellus is Doing	Business Days	Tips for Easier and Faster Processing
<b>Verification</b>	<ul style="list-style-type: none"><li>• Review case and enter referral information into our secure systems.</li><li>• Confirm that we have the clinical information we need to provide a clinical assessment.</li></ul>	1-2 days	<p>We know that sending the right amount of information can be tricky. To provide a thorough evaluation, we've attached a list of requirements of information we need to set up the referral and perform the assessment. Don't hesitate to call if you have questions.</p>
<b>Confirmation</b>	<ul style="list-style-type: none"><li>• Confirm authorization and treatment request.</li><li>• Contact referrer when we have successfully opened the case.</li></ul>	1-2 days	<p>Approve emailed authorization and treatment request from Ascellus to ensure timely care.</p>
<b>Outreach</b>	<ul style="list-style-type: none"><li>• Obtain recovering workers consent to treat.</li><li>• Schedule recovering workers assessment based on clinician availability.</li><li>• Contact referrer when we have successfully scheduled the assessment.</li></ul>	1-3 days	<p>Injured workers are most likely to respond to our outreach when referrer has been informed that Ascellus will be reaching out to schedule an appointment.</p>
<b>Care Delivery</b>	<ul style="list-style-type: none"><li>• Recovering worker completes assessment.</li><li>• Coordinate teleconference(s) between our clinicians and claims team to discuss care path.</li><li>• Contact referrer if authorization for additional treatment sessions is needed.</li><li>• Send referrer a progress report for each treatment session.</li></ul>	10-15 days from date scheduled (can take up to 3 weeks)	<p>For teleconferences and additional treatment authorizations, timely response to scheduling email will ensure continuation of care.</p>
<b>Case Closure</b>	Final Discharge Summary Report	7-10 days	<p>Notify Ascellus immediately when the customer is requesting closure.</p>



# Ascellus™

addresses behavioral health to speed recovery

## Information Needed to Start Referral Process

- **Patient Demographics:** Name, contact info, state of residence and claim, DOB (required for billing & confirms adult status)
- **Claim Details:** State of claim, claim number
- **Primary Contact:** Adjuster, NCM information
- **Accepted Claim Type:** Physical, Physical/Mental, Mental/Mental, Mental/Physical (or) Mechanism of injury, claim-related body parts/diagnoses if no claim type accepted
- **Referral Reason:** Brief description
- **WS/Causation:** If work-status needs to be addressed, and if causation should be addressed.

## Information Needed Before Evaluation

- **Required Documents:** Doctor's First Report, First Report of Injury, or other primary treating provider documentation detailing referral reasons
- **Injury Details:** Mechanism of injury, claim-related body parts
- **Medical Records:** Relevant records, treating physician/provider records, qualified/independent/agreed medical evaluations
- **Medication List:** Most recent 6 months (when not included in medical records)
- **Additional Contacts:** (Nurse) Case Manager, primary/authorized treating provider, attorneys on file

Send us a Referral

referrals@ascellus.com fax: 561.833.9333

Expediting  
Return to  
Function and  
Work