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To: All Providers

Subject: Clarification of Prior Authorization Policies for System Update Requests

Overview

This bulletin clarifies current prior authorization (PA) policies and processes for system update requests. It is intended to better define when to update an existing PA or submit a new PA request for fee-for-service and *Care Select* members.

> *Note: Providers requesting PA from the risk-based managed care (RBMC) delivery system should contact the managed care organization (MCO) directly for specific policy and processes.*

Per *RFS 7-62, Section 1.4*, care management organizations (CMOs) are responsible for processing PA requests for their membership. The PA update request is defined as the following: "A PA request that has been changed after the initial receipt of the request is to be considered a PA update." **When a new service is being requested, a new PA must be submitted**. A new PA request is defined as the following: "An initial provider submitted request for PA to perform specified services and a mechanism to determine the medical necessity of selected non-emergency, Medicaid-covered, medical services prior to delivery (and retroactively in special cases)."

Prior Authorization System Update Requests

System update requests may be submitted on the *Prior Authorization System Update Request Form* or on the provider's letterhead stationery with **PRIOR AUTHORIZATION SYSTEM UPDATE** written boldly across the top. Pertinent information, such as member identification (RID), PA number, and information to be corrected, changed, or updated must be included. Based on the program assignment of the member, the request is sent to one of the following addresses:

ADVANTAGE Health Solutions^{SM}-FFS
Prior Authorization Department
P.O. Box 40789
Indianapolis, IN 46240
FAX: 1-800-689-2759

ADVANTAGE Health Solutions-CS
Prior Authorization Department
P.O. Box 80068
Indianapolis, IN 46280
FAX: 1-800-689-2759

MDwise
Prior Authorization Department
P.O. Box 44214
Indianapolis, IN 46244-0214
FAX: 1-877-822-7186

The *Prior Authorization System Update Request Form* is available on the *Forms* page of the IHCP Web site at http://www.indianamedicaid.com/ihcp/Publications/forms.asp.

Examples of Prior Authorization System Update Requests

Listed below are examples of when to submit a PA system update request:

- Clerical errors in the PA data in the system. The provider may call or write to request the correction of the system.

- Transportation request for additional units for currently requested codes and dates of service must be submitted by written request.

- Extending the dates on an approved surgery because rescheduling was necessary is appropriate for a telephone update.

When the system is updated, a system-generated *Indiana Prior Review and Authorization PA Update Decision* form is sent automatically to the requesting provider and the member.

Contact Information

Questions about this bulletin should be directed to the appropriate prior authorization department listed above.

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