OHCA 2019-17

September 9, 2019

RE: No Prior Authorization (PA) Requirement for Psychiatric or Medical Detoxification Services Received in a Non-Psychiatric Unit of a Hospital for Adults

Dear Provider,

This is a reminder to all SoonerCare providers that the PA requirement for adult acute inpatient psychiatric admissions (effective September 17, 2018) ONLY applies when psychiatric or medical detoxification services are provided in a psychiatric unit of a general hospital. However, there is no PA requirement for psychiatric or medical detoxification services provided to adults in a non-psychiatric unit setting of a general hospital. For example, if a member who was admitted to the ICU or other hospital medical bed after an attempted suicide by alcohol overdose, has withdrawal symptoms complications, receives medical care and a psychiatric consult, and does not transfer to a psychiatric unit, a PA request is NOT required.

IMPORTANT: Claim Denials received between September 17, 2018 and August 29, 2019. Providers who filed a claim with a mental health or substance abuse principal diagnosis for members who received services in a non–psychiatric unit setting and received a denial with the following explanation “NO PA ON THE DATABASE” should refile the claim immediately to receive payment, assuring all other requirements are met.

PA Requirement for Inpatient Psychiatric Services for Adults:

A PA is required for adults with Medicaid or Insure Oklahoma who are admitted to an inpatient psychiatric unit of a general hospital for psychiatric and medical detoxification services. Members with a Medicare Advantage HMO plan and/or members with Medicaid as a secondary coverage will require a PA. Medicaid members with a traditional Medicare PPO plan do not require a PA. The PA must be received by the Oklahoma Health Care Authority (OHCA) no later than 5 p.m. the following business day after admission.

A PA for extensions of care beyond the approved admission dates will not be required; however, when the member discharges, facilities are required to fax both the Discharge Notification Form and the member’s aftercare instructions with follow-up appointments to the OHCA. Failure to fax a member’s discharge date and summary may result in claim denial(s). The Discharge Notification Form can be found on the Behavioral Health Services webpage at www.okhca.org/bh. Please refer to the Medical Necessity Criteria manual for further details. PA requests and discharges should be faxed to (405) 530-7260.

For further questions, contact OHCA provider services at (800) 522-0114, option 1.

Thank you for your continued service to Oklahoma’s SoonerCare and Insure Oklahoma members.

Sincerely,

Melody Anthony, MS
State Medicaid Director