

STATE OF OKLAHOMA OKLAHOMA HEALTH CARE AUTHORITY

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 <u>www.okhca.org/bh</u>. 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

Melody Anthony, MS State Medicaid Director