

Provider Memorandum

Outpatient Therapy (Physical, Occupational, Speech) & Home Health Care Require PA

Molina Healthcare of Illinois (Molina) is reminding providers that Outpatient Therapy (Physical, Occupational, and Speech Therapy) and Home Health Care **require a separate** Prior Authorization (PA) for all services delivered to Medicaid members **on or after May 12, 2023**, as follows:

- Outpatient Therapy requires a separate PA for each type of therapy (Physical, Occupational, or Speech) only after 12 visits have been completed in the calendar year.
- Home Health Care **requires** PA for Medicaid members **only after** an evaluation **and** six (6) visits have been completed in the calendar year.
- The member's calendar-year benefits began on January 1, 2023.

Requirements for PA Request

Please check **all** of the following **before** submitting a PA request:

✓ For Outpatient Therapy: Has the patient had an evaluation **and** completed 12 visits for **any diagnosis code** this calendar year?

OR

For Home Health Care: Has the patient had an evaluation **and** completed six (6) visits for **any diagnosis code** this calendar year?

- ✓ Does the patient need more visits for this diagnosis?
- ✓ Did you create a separate request form for each type of therapy requested?
- ✓ Did you identify this as a standard request?

If you answered "yes" to all of the questions above, please submit the following information with your PA request:

- Total number of Outpatient Therapy or Home Health Care visits completed in 2023 (if available).
- Number of visits completed in 2023 for this episode of care (this diagnosis).
- Dates of first and last visit completed for this episode of care (this diagnosis).
- Care plan and/or recent clinical information documenting the member's progress (and/or specific goals not met).
- Note: For Home Health Care, please include Form CMS-485 (Home Health Certification and Plan
 of Care) when completed.

If you answered "no" to any of the questions above, please see below.

Outpatient Therapy

No PA is required for any Outpatient Therapy for the evaluation and the first 12 visits for in-network (PAR) providers completed in the calendar year.

Please **only** submit your PA request **before** the 13th visit if additional visits are requested. Each type of therapy (Physical, Occupational, or Speech) requires a **separate** PA form to be submitted.

Home Health Care

No PA is required for the Home Health Care evaluation and the first six (6) visits for in-network (PAR) providers.

Please **only** submit your PA request **before** the seventh visit if additional visits are requested.

Important: Speech therapy requests should be submitted based on **number of visits—not units—**as these requests are **not** based on 15-minute increments/unit. This only applies to outpatient (non-Home Health Care) requests.

Turnaround Time

To ensure a timely response, please send a **separate request** for **each type** of service being provided to the member (i.e., skilled nursing; in-home physical therapy, occupational, and speech therapy, etc.).

Example: Your patient requires both skilled nursing and physical therapy. These PA requests **must** be submitted on two different forms.

Molina's standard turnaround time is **four** calendar days; this is typically sufficient for therapy requests. Do **not** use "urgent" or "expedited" as a tool to obtain a response sooner.

"Urgent" is defined as a treatment or service that is critical in preventing the member from experiencing:

- A serious deterioration of health or
- An impact to the ability to regain maximum function.

Our goal is to provide a timely response to those who are in critical need. Reference this provider memo for additional details.

Inappropriately identifying a request as "urgent" or "expedited" and/or failure to provide all of the necessary clinical information at the time of submission may lead to unwanted and unintended consequences for providers and members.

Questions?

We're here to help. Contact your dedicated Provider Network Manager or email the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com. For help identifying your dedicated Provider Network Manager, visit Molina's Service Area page at MolinaHealthcare.com.

Provider Portal Alert

We are in the process of sunsetting the Molina Legacy Provider Portal. Ensure that you and your staff have access to streamlined claims management, authorizations, eligibility/benefit verification, and more. Get started with Availity Essentials Provider Portal today! <u>Click here</u>.

Get Critical Updates

Receive news and updates about Molina services and plan requirements delivered straight to your inbox! Click here to receive Molina's provider updates.

Note: Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.