



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

Steven L. Beshear
Governor

275 E. Main Street, 6C-B
Frankfort, KY 40621
(502) 564-6511
Fax: (502) 564-3852
www.chfs.ky.gov

Janie Miller
Secretary

Elizabeth A. Johnson
Commissioner

April 23, 2010

TO: Providers of Hospital Services (01)
Provider Letter A-242

RE: Acute Care Hospital Prior Authorizations

Dear Kentucky Medicaid Provider:

Effective July 1, 2010 the Department for Medicaid Services will be enhancing the Prior Authorization process for DRG hospitals. Requestors may be required to provide more in-depth, clinical information for some admissions than they have in the past.

Elective procedures, procedures which may be considered cosmetic and services that could be performed in a lower level of care setting may require additional clinical information. Interqual criteria will continue to be utilized for medical necessity determinations.

Please be prepared to provide relevant ICD-9 diagnosis and ICD-9 procedure codes during the request.

Sincerely,

A handwritten signature in black ink, appearing to read "Elizabeth A. Johnson".

Elizabeth A. Johnson
Commissioner

EAJ/RDD/jrh/dc00930

