Prior Authorization Guidance – Effective 2/1/2021

UPDATED 2/23/2021

- The current prior authorization (PA) guidance is extended through April 30, 2021. DMS will re-evaluate this guidance at the end of March. Thirty (30) days’ notice will be given prior to any change in PA guidance.

- Medicaid Fee-for-Service (FFS) and Managed Care Organizations (MCOs) will not require PAs for all inpatient Medicaid services provided by Kentucky Medicaid enrolled inpatient hospitals (Provider Type 01). For MCOs, this includes both participating and non-participating providers.

- FFS and MCOs will not require PAs for all Medicaid covered substance use and behavioral health services.

- FFS and MCOs may require a PA for an outpatient or other Medicaid service based on their Utilization Management program, except for individuals with a COVID diagnosis. Examples may include durable medical equipment, home health, physical therapy or radiology. Please refer to the FFS or MCO’s specific PA guidelines.

- PAs will remain in place for all pharmacy benefits and products listed on the physician administered drug lists, except for medication assisted treatment (MAT) products (i.e. Sublocade).

- PAs should be lifted for all preferred drug products that fall into the below drug classes IF an automatic prior authorization process (smartPA) cannot be completed by 2/1/2021. Once the smartPA is created, it may be placed on the below drug classes.
  - Central Nervous System: Anticonvulsants
  - Central Nervous System: Antipsychotics: Second Generation: Second Generation (Atypical) and Injectable
  - Central Nervous System: Stimulants and Related Agents

- Notification requirements will remain in place for inpatient services in order to facilitate care management, COVID reporting/tracking, and discharge planning.

- The Concurrent Review process will remain in place for non-COVID diagnoses to support discharge planning, placement of members, care management, and facility capacity.

- In order to facilitate provider payment, requirements for prior authorization of non-Kentucky Medicaid enrolled providers will remain in place.

- FFS and MCOs will continue to monitor for fraud, waste, and abuse (FWA) activity.