DRAFT - Resumption of Preauthorization (PA) for Behavioral Health Services

Critical Issues

- Managed Care Organizations (MCO)s should ensure consistency of application of their specific medical necessity criteria and provide information regarding how they insure fidelity across reviewers.
- To address the need for MCOs to know when their enrollees are entering levels of care such as psychiatric inpatient, a process of provider notification should be developed, and the Health Information Exchange (HIE) should be considered as an approach to obtain this information.
- The impact of H2027 and Peer limitations is being monitored. A second round of review will begin in April with an emphasis on prioritizing appropriate clinical approaches. This type of continuous review and iterative process will be applied to the reimplementation of PA described in this document.
- The return PA outpatient services will be evaluated going forward but is not authorized yet.

Reintroduction of Preauthorization (Goal of May 1 after appropriate notification) on service categories below will be permitted:

- Crisis and emergency services shall not require PA of services.
- Inpatient psychiatric hospital services (free standing and distinct part hospital) for youth and adults for stays longer than 3 days. MCO may/shall require notification at time of admission with approved protocol for notification requirements.
- Psychiatric Residential Treatment Facilities*
- Psychiatric Residential Treatment Facilities Level II*
- Partial hospitalization for Substance Use Disorder or Mental Health for services exceeding 30 days with authorizations for minimum 30 days periods thereafter (notification may/shall be required).
- Services exceeding recently communicated limits for psychoeducation and peer support.
- Therapeutic Rehabilitation Program (TRP) for MH services with minimum periods of authorization of 3 months (notification may/shall be required)
- Applied Behavioral Analysis (ABA) services exceeding 30 days
- Targeted Case Management (TCM) Services exceeding 3 months in duration with a minimum of 3-month authorizations
- Intensive Outpatient Programs exceeding 30 days (notification may/shall be required)
- MCOs and providers may come to an agreement that eliminates all PA based on provider performance. (e.g. gold card)

• PA may be required for Out-of-Network Providers as long as the MCO is in compliance with network adequacy standards.

^{*}Excludes foster children in Supporting Kentucky Youth (SKY)