

SECTION 4 PRIOR AUTHORIZATION

Prior Authorization

Providers are required to seek prior authorization for certain specified services **before** delivery of the services. In addition to services that are available through the traditional MO HealthNet Program, expanded services are available to participants under the age of 21 through the Healthy Children and Youth (HCY) Program. Some expanded services also require prior authorization.

The following general guidelines pertain to all prior authorized services.

- A Prior Authorization (PA) Request form must be completed and mailed to Wipro Infocrossing Healthcare Services, Inc., PO Box 5700, Jefferson City, MO, 65102. Providers should keep a copy of the original PA request form as the form is not returned to the provider.
- The provider performing the service must submit the PA request form. Sufficient documentation or information must be included with the request to determine the medical necessity of the service.
- PA requests are not to be submitted for services prescribed to an ineligible participant. State Consultants review for medical necessity only and do not verify a participant's eligibility.
- Expanded HCY (EPSDT) services are limited to participants under the age of 21 and are **not** reimbursed for participants 21 and over even if the prior authorization request is approved.
- Payment is **not** made for services initiated before the approval date on the PA request form or after the authorization deadline. For services to continue after the expiration date of an existing PA, a new PA request **must** be completed and mailed to Wipro Infocrossing Healthcare Services.
- An approved prior authorization **does not** guarantee payment.

Whether the prior authorization is approved or denied, a disposition letter will be mailed to the provider containing all of the detail information related to the PA request. All other documentation submitted with the PA request will not be returned, with the exception of study models submitted with requests for orthodontia treatment. Requests for changes to an approved PA must be indicated on the disposition letter and submitted to Wipro Infocrossing at the address stated above. A new PA request for changes to an approved PA should not be submitted. Denied or incomplete PA requests must be resubmitted to Wipro Infocrossing with additional documentation as needed. Providers do not have to obtain a new PA request form signed by the prescribing practitioner, but may submit a legible copy of the original PA request.

Instructions for completing the PA request form are found in Section 8 of the MO HealthNet *Provider's Manual* available on the Internet at <http://www.dss.mo.gov/mhd/providers/index.htm>. Instructions are also self-contained on the back of the PA request form.