CareSource®

2019 MyCare Prior Authorization List

Services are provided as outlined by CMS within the benefit limits of the member's enrollment:

- **All Inpatient Care- including Skilled Nursing Facility, Acute, Inpatient Rehabiliatation, Long Term Acute Care (LTAC) and Respite Care**
- **All Inpatient Behavioral Health admissionsTranscranial Magnetic Stimulation**
- **Intensive Home Based Treatment (IHBT)**
- **Assertive Community Treatment (ACT)**
- **Substance Use Disorder (SUD) Partial Hospitalization Program (PHP) > 30 visits per calendar year**
- **SUD Residential > 30 consecutive days for the first 2 stays. Additional stays to require a prior authorization for the entire stay.**
- **SUD Partial Hospitalization > 30 consecutive days**
- **High Intensity Residential Benefit**
- **Ambulance/Ambulette transportation (with HR modifier)**
- **Fixed Wing (Airplane) Transportation**
- **Chiropractic Visits > 15 visits per calendar year**
- **Contact Lens and Fittings**
- **Cosmetic procedures and plastic surgery**
- **Dental Services- please reference our Dental Services Handbook for a list for services that require review for prior authorization, https://www.CareSource.com/providers/ohio/**
- **Durable Medical Equipment over $750.00 billed charges**
  - **All powered or customized wheelchairs**
  - **Prosthetic/Orthotics devices over $750.00 billed charges (Note: all custom orthotics require prior authorization.)**
  - **Hearing Aides**
  - **All miscellaneous codes (i.e.: E1399)**
  - **All CPAPs**
- **Food supplements/nutritional supplements/enteral feeds > 30 cans per month**
- **Genetic Testing**
- **Hearing Aids**
- **Podiatry Visits > 8 visits per calendar year**
- **Homecare Services:**
  - **All Private Duty nursing hours**
  - **All Home Health Aide visits**
  - **Skilled Nurse visits > 3 visits/year**
  - **Physical Therapy visits > 3 visits/year**
  - **Occupational Therapy visits > 3 visits/year**
  - **Speech Therapy visits > 3 visits/year**
  - **Social Worker visit > 2 visits/year**
- **Hospice Care (hospice benefit is for room and board only)**
- **Skilled Nursing Facility Services**
- **Occupational Therapy visits > 30 visits per calendar year in an outpatient setting and under Part B**

- **Organ transplants**
- **Pain Management Services**
  - **Facets**
  - **Epidurals**
  - **Facets Neurotomy**
  - **Trigger Points**
  - **SI Joints**
- **Physical Therapy visits > 30 visits per calendar year in an outpatient setting and under Part B**
- **Partial Hospitalization Program services > 30 visits per calendar year**
- **Speech Therapy visits > 30 visits per calendar year in an outpatient setting and under Part B**

Important Information:

- **Any health care provider who is not participating with CareSource must obtain prior authorization for all non-emergency services rendered to a CareSource member with the one exception of RAPHL providers.**
- **Providers are responsible for verifying eligibility and benefits before providing services. Except for an emergency, failure to obtain a prior authorization for the services on this list may result in a denial for reimbursement.**
- **Authorization is not a guarantee of payment for services.**
- **CareSource does not require Prior Authorization for unlisted procedure CPT codes. However, we require a signed, clinical record be submitted with your claim to review the validity of the unlisted procedure CPT code. Claims submitted without clinical records for unlisted procedure CPT codes will be denied. Denials will be reconsidered through the claims appeal process with pertinent clinical records and should be sent directly to claims for consideration.**
- **Please reference our Dental Services Handbook for the Prior Authorization list for services that require review for prior authorization.**

For Providers Only: Please contact NIA at 1-800-424-5660 or their web portal at www.radmd.com for all CT, CTA, MRI, MRA or PET scans. Additional services requiring a prior authorization include myocardial perfusion imaging (MPI), MUGA scan, Echocardiography and Stress Echocardiography

MyCareOhio
Connecting Medicare + Medicaid

CareSource® MyCare Ohio (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Ohio Medicaid to provide benefits of both programs to enrollees.

<Full Non-Discrimination Notice/MLI>

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