

Molina Complete Care Prior Authorization List

Announcement: Molina Complete Care (MCC) and Availity are proud partners in bringing you a better way to submit service authorization requests. **We are requesting all inpatient authorization requests now be submitted through our new Availity portal.**

If you need training, please visit our Provider Tools->Training page to view our [recorded training](#) about the Availity provider authorization portal.

Sign up for the Availity provider portal if you are not yet registered:

1. Go to www.Availity.com
2. Click “Register” in the upper right-hand corner
3. Follow the prompts to register your account

Call Availity at 1-800-828-4548 if you have any issues registering.

If you are already submitting requests via the portal please complete the following steps to submit for a concurrent review:

1. Go to “Auth Inquiry” OR “Clinical Update.”
2. Enter in the previous authorization number.
3. Attach continued stay clinical documentation.

Your pending request for concurrent review will then be routed to the Utilization Management (UM) team.

If you are still submitting requests via phone or fax, please fax all supporting documentation with the request.

Please use the prior authorization request form on MCCofVA.com for all requests.

Inpatient Services

- Inpatient care (medical and behavioral)
- Long-term acute care
- Inpatient rehabilitative

- Skilled nursing facility
- Transplants
- Long stay hospital

Outpatient Services

- Cosmetic and plastic procedures
- Chiropractic services for <21 years of age
- Genetic testing
- Outpatient procedures
- Outpatient surgeries
- Hyperbaric oxygen treatment
- Transplants evaluation and services
- Physical therapy visits*
- Occupational therapy visits*
- Speech therapy visits*
- Cardiac rehabilitation
- Pulmonary rehabilitation
- Cardiac Resynchronization Therapy (CRT)
- Implantable Cardioverter Defibrillator (ICD)
- Transthoracic Echocardiography (TTE)
- Transesophageal Echocardiography (TEE)
- Stress echocardiography
- Heart catheterization
- Pacemaker insertion
- Sleep disorder treatment initiation and management
- Sleep study attended
- Interventional pain management
- Epidurals
- Facets
- Radiofrequency neurolysis
- High-tech radiology
- Positron Emission Tomography (PETS)
- Magnetic-Resonance Imaging (MRIs)

- Magnetic Resonance Angiography (MRAs)
- Multigated Acquisition (MUGAs)
- Computed Tomography (CTs)
- Computed Tomography Angiography (CTAs)
- Nuclear cardiology study
- Low dose CT for lung cancer screening
- Radiation oncology therapy/treatment
- Lumbar and cervical spine surgeries
- Fusions
- Microdiscectomy
- Decompression
- Artificial discs

** An authorization request form is required for all outpatient physical, occupational or speech therapy before start of care for any visit.*

Please note that notification of enrollment, dis-enrollment and re-certification for all hospice services is required.

Home Care Services (skilled)

- Home health aides
- Private duty nursing
- Skilled nurse visits
- Physical therapy visits
- Occupational therapy visits
- Speech therapy visits
- Social worker visits
- Skilled respite services

Mental Health Services (MHS)

All services:

- Behavioral therapy/Applied Behavioral Analysis (ABA)
- Mental Health Partial Hospitalization Program (MH-PHP)

- Assertive Community Treatment (ACT)
- Intensive Outpatient Services (IOP)
- Psychosocial rehabilitation
- Therapeutic Day Treatment for Children
- Mental Health Skill-Building Services
- Intensive In-Home
- Multisystemic Therapy (MST)
- Functional Family Therapy (FFT)
- ARTS Intensive Outpatient, ARTS 2.1
- ARTS Partial Hospitalization, ARTS 2.5
- Clinically Managed Low Intensity Residential Services, ARTS 3.1
- Clinically Managed Population Specific High Intensity Res Services, ARTS 3.3
- Clinically Managed High-Intensity Residential Services, ARTS 3.5
- Medically Managed Intensive Inpatient Services, ARTS 3.7
- Medically Managed Intensive Inpatient Services, ARTS 4.0

Authorization required on initial and then **registration** for a continued stay request:

- Intensive community treatment

Registration required on initial and then **authorization** for a continued stay request:

- Mental health peer support services/Family support partners individual and group
- Community Stabilization
- Residential Crisis Stabilization Unit

Registration only required:

- Mental Health Case Management
- Mobile Crisis Response
- BH Individual Peer Support Service – ARTS
- BH Group Peer Support Service – ARTS
- ARTS Case Management
- 23-Hour Crisis Stabilization

Other Services

- Experimental and investigational services

- Fixed wing transports
- Hearing aids – members < 21 – no coverage for adults (unless a FAMIS member)
- Nutritional Supplements / Enteral Formula Prosthetics and orthotics >\$500 – and/or if code requires a prior authorization
 - >\$500 billed – include invoice
 - Note: orthotics are covered for members < 21 (no coverage for adults). The only exception is when it is recommended as part of an approved intensive rehabilitation program.
- Durable Medical Equipment >\$500 – and/or if code requires a prior authorization
 - >\$500 billed – include invoice

If there are any questions about what requires a prior authorization, please call the MCC UM department at the number below:

- Commonwealth Coordinated Care Plus: 1-800-424-4524
- Medallion 4.0: 1-800-424-4518

Unskilled Long-term Services and Supports (LTSS)

- Adult day health care
- Assistive technology
- Environmental Modification (EM)
- Personal care - unskilled
- Personal Emergency Response System (PERS)
- Respite care - unskilled
- Specialized care
- Transition services

All non-participating providers require an authorization before services are rendered except for family planning, new member continuity of care, emergent dialysis, deliveries and emergency care.

Services requiring registration to assist in care coordination:

- Deliveries
- Early interventions (must include the completed Individualized Family Service Plan (IFSP))

- Nursing facility stays (custodial)
- Peer recovery supports

Ready to join our network? Please visit the provider page of MCCofVA.com and select *Join Our Network*. We look forward to hearing from you!

Transportation services - Will be provided through Veyo (1-833-273-7416)

Dental benefits – Provided through the DMAS Dental Benefits Administrator (1-888-912-3456)

Vision benefits – Will be provided through VSP (1-800-877-7195)

Authorizations are not a guarantee of payment, but are based on medical necessity review, appropriate coding and benefits. Benefits may be subject to qualifications and/or limitation and will be determined when the claim is received for processing. Payment is contingent upon the eligibility of the member at the time of service, services billed must be within the provider's scope of practice as determined by the applicable payment/fee schedule and the claim timely filing limits. For further questions, please contact Molina Complete Care at the number below:

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- Medallion 4.0: 1-800-424-4518