




ISSUE DATE July 1, 2022	EFFECTIVE DATE November 1, 2022	NUMBER 05-22-02, 16-22-01
SUBJECT Reinstatement of Prior Authorization Requirements for Shift Care Services for Beneficiaries Under 21 Years of Age		BY  Sally A. Kozak, Deputy Secretary Office of Medical Assistance Programs

IMPORTANT REMINDER: All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISE to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: <https://www.dhs.pa.gov/providers/Providers/Pages/PROMISE-Enrollment.aspx>.

PURPOSE:

The purpose of this bulletin is to inform providers that the Department of Human Services (Department) will reinstate the prior authorization requirements for shift care services provided to beneficiaries under the age of 21 in the Medical Assistance (MA) Fee-for-Service (FFS) delivery system.

SCOPE:

This bulletin applies to providers enrolled in the MA Program who render shift care services to MA beneficiaries under the age of 21 in the FFS delivery system. MA Managed care organizations (MCOs) may reinstate the prior authorization requirements for these services provided to children under the age of 21. Providers rendering services in the managed care delivery system should contact the appropriate MCO regarding any questions related to prior authorization requirements.

BACKGROUND/DISCUSSION:

On April 9, 2020, the Department issued Provider Quick Tip #241 to advise providers that in response to the COVID-19 pandemic, authorization requirements were suspended for certain services, including shift care services provided to beneficiaries under 21 billed using procedure codes S9122, S9123, and S9124.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The appropriate toll-free number for your provider type.

Visit the Office of Medical Assistance Programs website at:

<https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/Contact-Information-for-Providers.aspx>.

On April 30, 2021, the Department issued MA Bulletin 99-21-03, "Reinstatement of Prior Authorization Requirements for Certain Services", effective July 1, 2021. The bulletin advised providers of the reinstatement of the MA FFS prior authorization requirements that were in place on February 29, 2020. This applied to all services that were suspended in Provider Quick Tip #241, with the exception of shift care services provided to beneficiaries under the age of 21. Beneficiaries under 21 who were authorized through the prior authorization process to receive shift care services prior to or after the issuance of Quick Tip# 241 have continued to receive the authorized hours of services without the need for reauthorization.

Prior authorization is required prior to the initiation of shift care services for beneficiaries under 21 who are not currently receiving shift care services and for requests to increase the number of hours beyond what was authorized.

On April 12, 2022, the federal COVID-19 public health emergency (PHE) was extended to July 15, 2022. In an effort to support providers during the unwinding of the PHE flexibilities, the Department is providing advance notice of the reinstatement of the authorization requirements for shift care services provided to beneficiaries under the age of 21. Authorization requirements for these services are being reinstated even though the federal COVID-19 PHE may be extended.

On April 18, 2022, the Department issued MA Bulletin 05-22-01, "Additions to the Medical Assistance Fee Schedule for Personal Care Services Provided to Beneficiaries Under the Age of 21", which advised providers, in part, of the addition of procedure code S9122 to the MA Program Fee Schedule, effective May 1, 2022. Prior authorization is required for procedure code S9122. Prior to May 1, 2022, procedure code S9122 was only available for use through the Department's 1150 Administrative waiver (program exception) process.

PROCEDURE:

Effective November 1, 2022, the Department will reinstate the prior authorization requirements for shift care services provided to beneficiaries under the age of 21 that were in place on February 29, 2020. Services that continued to be authorized without the need for a request for reauthorization during the suspension of prior authorization requirements must be reauthorized. In order for services to be reauthorized, providers must submit the Outpatient Services Authorization Request Form (MA 97) before the end of the current authorization period, which is indicated on the notice of decision. In FFS, where the current authorization is in effect based only on the extension of the federal PHE, providers must submit a new authorization request before November 1, 2022, if there is not already an authorization period that extends past that date.

The Department requires prior authorization for all shift care services billed using procedure codes S9122, S9123, and S9124 requested for beneficiaries under the age of 21. Providers submitting requests for prior authorization of these services are required to submit a signed MA 97 and supporting documentation. Providers will only receive payment for services rendered after the request for prior authorization has been approved. Providers can submit requests up to 60 days in advance of the current authorization end date. For additional

information on prior authorization, providers may access the applicable provider handbook on the Department's website at:

https://www.dhs.pa.gov/providers/PROMISe_Guides/Pages/PROMISe-Handbooks.aspx.

For questions regarding prior authorization for shift care services in the MA FFS program, providers may call 1-800-537-8862, option 2, option 3, option 8 to leave a voice mail message.

For questions regarding MA FFS claims please contact 1-800-537-8862, option 2, option 6, option 1.