

## Prior authorizations — transitional authorization period

**Note: This is part one of a two-part provider communication regarding prior authorization (PA) requirements.**

To allow for an intermediate approach to submitting and entering required PAs, Summit Community Care is implementing a transitional authorization waiver period for services such as behavioral health outpatient, certain home- and community-based services, speech/occupational/physical therapies, personal care and medical outpatient services through October 31, 2019. Participating and nonparticipating providers are required to submit authorization requests within this 60-day period and beyond, but claims will not be denied due to a lack of PA for dates of service through October 31, 2019. This transitional period does not impact services currently under authorization requirements (e.g., inpatient, residential care, partial hospitalization/intensive outpatient program, major medical procedures, etc.)

### Purpose

- Offer providers sufficient time (60 days) to gain familiarity with the authorization requirements
- Offer providers sufficient time to learn Summit Community Care systems — Interactive Care Reviewer (web portal), fax, document requirements, authorization/denial communication, processes, etc.
- Offer providers sufficient time to assess their members for medically necessary services
- Offer providers the opportunity to build internal systems accordingly
- Allow Utilization Management (UM) and Provider Relations staff at Summit Community Care to collect information and communicate effectively with providers regarding trends, troubleshooting and best practice approaches to the authorization process

### What to expect

- During the transitional phase, providers should submit PA requests for required services, and our UM department will review.
  - Services for members can and should continue during the authorization transitional period even if PA is not obtained. Your claims for covered services during the transitional authorization period (September 1, 2019, through October 31, 2019) will continue to be processed per policy.
- Providers will receive notification of approval (or denial) during this time.
  - Approved authorizations will begin and end on the dates communicated by the UM department.
  - Providers will not be penalized for denied authorization requests during the transitional authorization period.
    - Information regarding the denial will be communicated to help you better understand the denial process.

- Effective November 1, 2019, denied authorization requests and/or services billed without a valid PA will result in claims denial.

It is imperative that providers use this full 60-day transitional authorization period to obtain authorizations for services requiring prior or extended authorization.

Part two of this communication will be sent no later than August 23, 2019, and will provide more details on PA service codes/requirements and training/webinar dates.