

Changes to Therapy Prior Authorization Guidelines for Texas Medicaid Effective April 1, 2014

Information posted March 28, 2014

Note: *This article applies to claims submitted to TMHP for processing. For claims processed by a Medicaid managed care organization (MCO), providers must refer to the MCO for information about benefits, limitations, prior authorization, and reimbursement.*

Some prior authorization guidelines will change for acute, Comprehensive Care Program (CCP), and home health physical therapy (PT), occupational therapy (OT), and speech therapy (ST) services for prior authorization requests received on or after April 1, 2014.

Prior Authorization Guidelines for Acute, CCP, and Home Health Therapy Services

The following guidelines will change for acute, CCP, and home health PT, OT, and ST services:

- The *initial* prior authorization request for therapy services must be received no later than five business days from the date that the therapy treatments are initiated. *Initial* prior authorization requests received after the five business-day period will be denied for dates of service that occurred before the date that the request was received.
- The therapy evaluation submitted with an *initial* request for prior authorization of services will be considered current when performed within 60 days before the initiation of therapy services.
- Requests for *revisions* to an existing authorization for therapy services must be received no later than five business days from the date that the revised therapy treatments are initiated. Requests received after the five business-day period for *revisions* to an existing authorization for therapy services will be denied for dates of service that occurred before the date that the request was received.

The prior authorization guidelines for requesting subsequent therapy services will not change. However, the guidelines have been clarified as follows:

- A prior authorization request for subsequent services must be received no more than 30 days before the current authorization expires. Prior authorization requests for subsequent services received after the current authorization expires will be denied for dates of service that occurred before the date that the submitted request was received.
- A therapy evaluation or re-evaluation for subsequent services is current when performed within 30 days before the prior authorization request is received.

For example:

- If an authorization period ends on July 31, 2014, TMHP must receive the prior authorization request for subsequent services between July 1, 2014, and July 31, 2014.
- The therapy evaluation or re-evaluation for subsequent services can be performed up to 30 days before the date that TMHP receives the prior authorization request.
 - If TMHP receives the prior authorization request for subsequent services on July 1, 2014, the evaluation or re-evaluation can be performed June 1, 2014, through July 1, 2014.

- If TMHP receives the prior authorization request for subsequent services on July 31, 2014, the evaluation or re-evaluation can be performed July 1, 2014, through July 31, 2014.

Prior Authorization for Acute and CCP Therapy Services

Prior authorization requests for acute and CCP PT, OT, and ST services may be requested with either a weekly frequency or monthly frequency, not both.

A week includes the day of the week on which the prior authorization period begins and continues for seven days. The number of PT, OT, and ST services authorized for a week must be provided in that prior authorization week.

A month includes the day of the month on which the prior authorization period begins and continues for 30 days. The number of PT, OT, and ST services authorized for a month must be provided in that prior authorization month.

Claims for services that exceed those authorized for the prior authorization week or month are subject to recoupment.

Form changes

The *Request for Outpatient Physical, Occupational, or Speech Therapy (PT, OT, ST) Special Medical Prior Authorization Form* and [Instructions](#) have been updated with the changes identified in this article. The *Request for Outpatient Physical, Occupational, or Speech Therapy (PT, OT, ST) Special Medical Prior Authorization Form* must be used for all acute PT, OT, and ST prior authorization requests. The form can be found [here](#).

The *Request for Initial Outpatient Therapy (Form TP-1)* and *Request for Extension of Outpatient Therapy (2 Pages) (Form TP-2)* prior authorization forms have been discontinued. A new form, the *Request for CCP Outpatient Therapy*, will replace the TP-1 and TP-2 forms. The *Request for CCP Outpatient Therapy form* should now be used to request prior authorization for CCP therapy services. The form can be found [here](#).

Providers may begin using the revised *Request for Outpatient Physical, Occupational, or Speech Therapy (PT, OT, ST) Special Medical Prior Authorization Form* and the new *Request for CCP Outpatient Therapy* prior authorization form immediately.

TMHP will continue to process prior authorization requests that are received on the old forms through June 30, 2014. Beginning July 1, 2014, a request that is received on an old form will be returned to the provider with instructions to resubmit the request on the correct form.

As a reminder, prior authorization requests must be submitted with a client-specific comprehensive treatment plan that was established by the ordering physician or therapist to be followed during treatment. The treatment plan must include all of the following:

- Date and signature of the licensed therapist
- Diagnosis(es)
- Treatment goals that are related to the client's individual needs for the therapy discipline and associated disciplines requested
- A description of the specific therapy disciplines that are being prescribed
- Duration and frequency of therapy
- Date of onset of the illness, injury, or exacerbation that requires the therapy services

- Requested dates of service

Prior authorization requests for subsequent services must also include a brief summary of the outcomes of the previous treatment as it relates to the client's debilitating condition.

For more information, call TMHP Contact Center at 1-800-925-9126.