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To: Coordinated Care Organizations

From: Dave Inbody, CCO Operations

Manager

Re: Response to Prior Authorization Requirements

Date: May 1, 2020

The Oregon Health Authority received 1135 waiver authority to suspend prior authorization (PA) requirements for members enrolled in Fee-for-Service and in Coordinated Care Organizations (CCOs). At this time, CCOs are not required to suspend all PA requirements and may suspend PA requirements at their discretion. OHA provides additional guidance below for specific areas that could benefit from PA adjustments during COVID-19.

OHA encourages CCOs to temporarily allow retroactive authorization requests for services that require prior authorizations. In addition, CCOs should consider extending authorization approval date ranges for elective inpatient and outpatient procedures an additional 180 days from the original end date.

The PA duration extension may also be useful to members and providers in other areas such as medical supplies (e.g., diabetes test strips) and medications. For medications that can be pharmacist prescribed, it may be helpful to waive PA requirements that might be in place for these medications (e.g., birth control, Naloxone).

CCOs should consider suspending prior authorization requirements for DME needed due to COVID-19 discharge from an inpatient setting. During COVID-19, it may also be useful to waive prior authorization for patient transfers from inpatient acute settings to skilled nursing facilities, rehabilitation hospitals, long-term acute hospitals, and behavioral health residential/partial hospitalization programs, and to home health. Accepting facilities can notify the CCO when the member is admitted to support members' care coordination and case management.

Although these changes are not required, they may be helpful in easing provider burden, managing CCO staff resources, and ensuring member access to necessary care during the COVID-19 pandemic. OHA reserves the right to develop further guidance on this topic.