

FAQs for outpatient, physical, occupational and speech therapies

Mid-year change effective July 1, 2023

- 1. Do the 30 visits that do not require prior authorization restart on July 1, 2023?**
 - a. **No.** Members are allowed 30 visits (120 units) per calendar year, per therapy service. Calculations after July 1, 2023, will include units/visits used since Jan. 1, 2023.
- 2. Is it 30 visits (120 units) per therapy?**
 - a. **Yes.** Each therapy (PT, OT, ST) is allowed 30 visits before prior authorization is required.
 - b. Evaluation and reevaluation do not count toward the visits/units.
 - c. If evaluation and therapy are provided on the same day, therapy would count toward the visits/units.
 - d. Please ensure prior authorizations and claims are submitted using appropriate modifiers
 - i. GO: Occupational therapy.
 - ii. GP: Physical therapy.
 - iii. GN: Speech therapy.
- 3. Can providers get paid for services that were originally denied or where claims were denied for no authorization?**
 - a. **No.** The authorization requirement does not change until July 1, 2023.
 - b. Visits that were denied will continue to be denied.
- 4. What will happen to the authorizations that Samaritan Health Plans has already approved?**
 - a. All prior approved authorizations will have an end date of June 30, 2023.
- 5. Will providers receive notice of the change in effective dates on the prior authorization?**
 - a. **Yes.** Any change will prompt a new letter.
 - b. The prior authorization number will remain the same. Only the effective dates will change.
- 6. Will there be diagnosis restrictions for the first 30 visits?**
 - a. Services should be medically appropriate. Claims may pay on below-the-line diagnosis. A chart review may be requested to review for medical necessity.
 - b. Below-the-line and non-pairing are not applicable for children (ages 0 to 20) per EPSDT.
- 7. Should providers continue to submit prior authorizations until the effective date?**
 - a. **Yes.** Please only submit the number of units/visits your patient may need prior to July 1, 2023.
 - b. After July 1, 2023, authorization will be needed if the cumulation of units/visits since Jan. 1, 2023, is over 30.
- 8. Will providers be able to use the current authorizations they have on file after the 30 visits which require no prior authorization, are used or do providers need to submit another authorization after those 30 visits are used?**
 - a. **No.** Approved authorizations made prior to the mid-year change were based on a review of the member's situation at that time. Please submit a new prior authorization as you get closer to 30 visits/120 units

9. **What do providers do if they receive a denied claim for a needed prior authorization but they didn't know the member used some of the 30 visits with another provider?**
 - a. A member appeal is required or the provider's office needs the member's permission to appeal on their behalf. For assistance with appeals, contact SHP Customer Service at **541-768-5207**, Monday through Friday, 8 a.m. to 8 p.m.
10. **What happens to an authorization submitted on or after July 1, 2023?**
 - a. If the member is not close to using their 30 visits, the authorization will be voided because no authorization is needed for in-network providers.
 - b. Out-of-network providers still require prior authorization.
11. **Are denied prior requests that were submitted for 2023 between Jan. 1 and June 30 going to be allowed and claims reprocessed?**
 - a. **No.** Any 2023 visits that occurred between Jan. 1 and June 30 will remain denied and claims will not be reprocessed.
 - b. Prior authorization from Jan. 1 to June 30 is still applicable during this time frame.
12. **If services were denied prior to July 1, 2023, can I continue to treat the member after July 1, 2023?**
 - a. **Yes.** If the provider feels that it is medically appropriate to continue therapy past the initial 10 visits and is below the 30 visits limit, the member can continue to see the provider for therapy.
13. **Are retroactive 2023 authorizations that were denied between Jan. 1 and June 30 going to be reprocessed?**
 - a. **No.** The prior authorization requirements did not change. Retroactive criteria apply for any retroactive authorization requests.
 - i. The prior authorization requirements for prior authorization after the first 10 visits are applicable during the 2023 dates of **Jan. 1 through June 30.**