



## **Site of Service Medical Necessity Reviews and Revised Prior Authorization Requirements for Speech, Occupational and Physical Therapy Services, Effective Sept. 15, 2019**

UnitedHealthcare Community Plan of Nebraska aims to improve cost efficiencies for the overall health care system. One way we'll do that is by conducting site of care medical necessity reviews, consistent with the member's benefit plan and applicable state law, for all speech, occupational and physical therapy services. We're also revising our existing prior authorization requirements.

### **Site of Care Medical Necessity Reviews**

For dates of service on or after **Sept. 15, 2019**, once prior authorization for speech, occupational, or physical therapy services is requested in accordance with our prior authorization requirements, we'll determine whether the site of service is medically necessary consistent with the member's benefit plan and applicable state law. Site of care reviews will be conducted only if the service will be performed in an outpatient hospital.

The coverage determination guidelines we use to help facilitate our site of service medical necessity determinations for these therapy services will be available at [UHCprovider.com/policies](http://UHCprovider.com/policies) > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan > Speech Language Pathology Services or Outpatient Physical and Occupational Therapy.

Site of care reviews will apply to the following UnitedHealthcare Community Plan of Nebraska benefit plans:

- UnitedHealthcare Community Plan – Heritage Health

Site of care reviews will apply to all speech, occupational and physical therapy procedure codes that are currently subject to prior authorization requirements. You can find the list of services that are subject to prior authorization requirements at [UHCprovider.com/NEcommunityplan](http://UHCprovider.com/NEcommunityplan) > Prior Authorization and Notification > UnitedHealthcare Community Plan Prior Authorization Requirements.

### **Prior Authorization Requirement Changes**

For dates of service on or after Sept. 15, 2019, we're making the following changes to our prior authorization requirements for speech, occupational and physical therapy services:

- In order to support the physician's role in managing member care, the referring care provider (the member's primary care provider or appropriate specialist) will be required to submit prior authorization requests for evaluations and re-evaluations. Currently, these types of prior authorization requests for therapy services are often submitted by therapy providers.
- We will require that additional documentation be submitted to us as part of the prior authorization process for evaluations and re-evaluations. The additional documentation requirements are in the coverage determination guidelines.
- After a prior authorization request is approved for an evaluation or re-evaluation, the treating therapy provider can submit the prior authorization requests for subsequent treatment visits.

The coverage determination guidelines we use to facilitate our medical necessity determinations for these therapy services will be available at [UHCprovider.com/policies](https://UHCprovider.com/policies) > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan > Speech Language Pathology Services or Outpatient Physical and Occupational Therapy.

As a reminder, please complete the prior authorization process in one of the following ways:

- **Online:** Use the Prior Authorization and Notification tool on Link at [UHCprovider.com/paan](https://UHCprovider.com/paan).
- **Phone:** 866-604-3267

### **On-Demand Care Provider Training**

UHC On Air has on-demand video broadcasts created specifically for you with information on requesting prior authorization, clinical coverage criteria, and documentation requirements.

- To access UHC On Air:
  - Sign in to Link by clicking on the Link button in the top right corner of [UHCprovider.com](https://UHCprovider.com).
  - Select the UHC On Air tile from your Link dashboard.
    - Choose the Nebraska channel to find the UnitedHealthcare Community Plan Therapy Site of Care Medical Necessity Review programming

### **We're Here to Help**

If you have questions, please call us at **866-331-2243**. Thank you.

If you do not want to receive future faxes from us, please notify us by calling us at 866-464-4404 and use ID 7768 or faxing us at 855-729-2830. Failure to comply with your request within 30 days is unlawful.

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