## Updated: 08/11/20

Will health plans ease authorization requirements for key components of after-hospital care, such as admission to SNFs or rehab, providing home health visits, during this COVID period?			
Follow Common Direction?		Pre-authorization will be waived when a patient is ready for discharge from a hospital, and insufficient time exists for long-term care facility or home health services that will follow discharge to receive approval prior to delivery of care.	
Aetna	Most 04/03/20	Aetna has published "Temporary Changes in Prior Authorization/ Precertification and Admissions Protocols" for COVID19 here: <u>https://www.aetna.com/content/dam/aetna/pdfs/aet</u> <u>nacom/prior-authorization-notification.pdf</u>	Self-insured plan sponsors will be able to opt-in to this program at their discretion.
Amerigroup - DSNP	Yes 04/21/20	Amerigroup auth update	
CHPW - Medicare Advantage	Yes 3/20/20	Effective 3/20/2020 CHPW has temporarily waived the prior auth requirements for Home Health, ventilators, CPAP/BiPAP services. Prior Authorization is not required for any respiratory DME or supplies currently. In addition, CHPW is approving all DME needed for discharge from an inpatient setting without prior authorization. We are requesting notification, but it can be sent after discharge of the services provided. CHPW is waiving the prior authorization requirement for admissions to post-acute facilities (SNF, LTAC, and Inpatient Rehab). In addition, no prior authorization is currently needed for any lateral transfer from one inpatient facility to the next.	
Cigna	Most 04/01/20	Cigna waives prior authorizations for the transfer of its non-COVID-19 customers from acute inpatient hospitals to in-network long term acute care hospitals.	Self-insured plan sponsors will be able to opt-in to this program at their discretion.
Coordinated Care - Commercial			

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First Choice (TPA and PPO)	Varies by our Payers' Plans 03/27/20	<u>COVID Provider page</u>	<ul> <li>First Choice Health is a PPO network that does not define the benefits. Please reach out to the individual Payers to confirm benefits.</li> <li>As an administrator for our self-funded health Plans, we are complying with the Families First Coronavirus Response Act, specifically the "Health Provisions" and the CARES Act-Health Provisions Coronavirus Aid, Relief and Economic Security (CARES) Act.</li> <li>FCH is encouraging all FCH payors to waive patient responsibility for COVID-19 diagnostics, including testing services, performed in accordance with the Families First Coronavirus Response Act.</li> </ul>
HCA – Apple Health	N.A. 04/13/20	The Department of Social and Health Services has issued guidance to hospitals re: SNF placements when DSHS is the payer. See MCOs responses.	
Medicaid FFS	N.A. 04/13/20	DSHS is responsible for managing Skilled care for Medicare clients and FFS clients	
Amerigroup	Yes 04/08/20	We are waiving (for in and out of network regardless of diagnosis) prior authorization for admissions to SNFs, IP rehab, and long-term acute care hospitals. Though we are requesting voluntary notification. We are also waiving prior auth for home health related to patient transfers.	

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CHPW	Yes 3/20/20	As it relates to DME for COVID-19 diagnoses, prior auth requirements are suspended for DME effective March 26, including oxygen supplies, respiratory devices and continuous positive airway pressure (CPAP) devices for patients diagnosed with COVID-19, along with the requirement for authorization to exceed quantity limits on gloves and masks. Amerigroup is not waiving DME authorizations at this time for non-COVID19 diagnoses. Effective 3/20/2020 CHPW has temporarily waived the prior auth requirements for Home Health, ventilators, CPAP/BiPAP services. Prior Authorization is not required for any respiratory DME or supplies currently. In addition, CHPW is approving all DME needed for discharge from an inpatient setting without prior authorization. We are requesting notification, but it can be sent after discharge of the services provided. CHPW is waiving the prior authorization requirement for admissions to post-acute facilities (SNF, LTAC, and Inpatient Rehab). In addition, no prior authorization is currently needed for any lateral transfer from one inpatient facility to the next.	
Coordinated Care Molina	Yes 04/17/20	Molina waives (for participating and non- participating) prior authorization for admissions to SNFs, IP rehab, and long-term acute care hospitals. We are requesting voluntary notification, and we	

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Follow Common Direction?		home health visits, during this COVID period? Pre-authorization will be waived when a patient is ready for discharge from a hospital, and insufficient time exists for long-term care facility or home health services that will follow discharge to receive approval prior to delivery of care.	
UHP Community Plan	Yes 08/11/20	T1030, T0131, G0151, G0152, and 92507 are suspended from PA during the pandemic emergency. For other home health codes such as RN, PT and OT, we follow NCQA requirements. We do not authorize LTC settings since the requirement ended. SNF doesn't require prior authorization, only notification and medical records review at day three.	
KP-NW	Yes 04/03/20	Expedited authorization for DME would apply and in certain circumstances authorization for DME may be waived.	
KP-WA	Yes 04/03/20	Expedited authorization for DME would apply and in certain circumstances authorization for DME may be waived.	Self-insured plan sponsors will be able to opt-in to this program at their discretion.
Labor & Industries	No 05/20/20	Long term care placements and/or nursing home placements are authorized by L&I Occupational Nurse Consultants.	
Molina - Marketplace	Yes 04/17/20	Molina waives (for participating and non- participating) prior authorization for admissions to SNFs, IP rehab, and long-term acute care hospitals. We are requesting voluntary notification, and we negotiate a rate with non-participating providers. We currently allow home health visits (evaluation + 6 visits) without prior authorization in order to facilitate discharge.	

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Pacific Source	Most 04/03/20		Self-insured plan sponsors will be able to opt-in to this program at their discretion.
Premera	Most 04/03/20	COVID Provider page	Self-insured plan sponsors will be able to opt-in to this program at their discretion.
Providence	Most 04/03/20		Self-insured plan sponsors will be able to opt-in to this program at their discretion.
Regence	Most 04/07/20	We are committed to removing barriers in order to quickly discharge our members to alternate settings to accommodate care needs of critical members. We are available to support discharge needs and providers should contact our care management team if they are encountering any discharge barriers at 1 (866) 543- 5765 from 7 a.m. to 5 p.m. Monday through Friday.	Self-insured plan sponsors will be able to opt- in to this program at their discretion.
UHC - Commercial	Most 04/28/20	Prior authorization requirements for admissions to a post-acute care setting are suspended from March 24, 2020 through May 31, 2020.	Self-insured plan sponsors will be able to opt-in to this program at their discretion.