

Updated: 08/07/20

Will the outpatient pre-authorizations and pre-authorizations for scheduled elective admissions be extended longer than 90 days? If so, by how much?			
Answer to Question:			
Aetna	Varies 03/30/20	Prior authorization approvals are valid for at least 45 calendar days from the date of approval. However, authorization approval for most elective medical/surgical procedures are valid for 6 months.	<p>Aetna has published "Temporary Changes in Prior Authorization/ Precertification and Admissions Protocols" for COVID19 here:</p> <p>https://www.aetna.com/content/dam/aetna/pdfs/aetnacom/prior-authorization-notification.pdf</p> <p>Additionally, when an enrollee is determined to be ready for discharge from a hospital and insufficient time exists for prior approval of long-term care or home health care, we will deem this to be an extenuating circumstance. Please refer to our extenuating circumstance policy located here:</p> <p>http://www.aetna.com/healthcare-professionals/documents-forms/washington-extenuating-circumstances-policy.pdf</p>
Amerigroup - DSNP	Yes 04/21/20	Extending the length of time, a prior authorization is in effect for elective inpatient and outpatient procedures to 90 days. Amerigroup auth update	
CHPW - Medicare Advantage	Yes 04/21/20	CHPW is extending all 2020 authorizations to 12/31/2020.	

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Cigna	Yes 05/04/20	Effective March 25, 2020 and forward, for all requests received for all Cigna lines of business, we are temporarily increasing the authorization window for all elective outpatient services from three months to six months and will continue until at least May 31, 2020. Elective outpatient prior authorization decisions made between January 1, 2020 and March 24, 2020 will be assessed when the claim is received and will go payable as long as it is within six months of the original authorization.	Cigna waives preauthorization requirement for medications until June
Coordinated Care - Commercial	TBD 03/27/20	We are still researching this question.	
First Choice (TPA and PPO)	TBD 03/27/20	Extensions will be considered on a case by case basis.	
HCA – Apple Health	See Medicaid FFS and MCO responses below		
Medicaid FFS	Yes 03/27/20	Most authorization are 6 months/ 12 months depending on the services. If by chance, the authorization is less than 6/12 months the provider can request an extension.	
Amerigroup	May 03/24/20	Amerigroup is extending the length of time a prior authorization is in effect for elective inpatient and outpatient procedures to 90 days. Longer extensions will be considered on a case-by-case basis.	
CHPW	Yes 04/21/20	CHPW is extending all 2020 authorizations to 12/31/2020.	
Molina	Yes 03/30/20	Prior authorization has been extended to 09/01/20	
Coordinated Care	TBD 03/27/20	We are still researching this question.	
UHC Community Plan	Yes 08/07/20	We are moving back to unsuppressed reviews of inpatient hospital admissions and prior authorization for elective procedures that are on our PA list. That was effective June 1. Beginning June 18 as per the previous HCA guidance, we	

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		stopped doing the \$100 above and beyond the contracted SNF rate for our members discharging to a nursing facility for a skilled or custodial stay. Those authorizations already in place for 180 days will remain in place as needed for the LTC assessment to be completed.	
KP-NW	Yes 3/31/20	<ul style="list-style-type: none"> Standard process is to review initial and extension requests based on eligibility and medical necessity. Authorizations will have an immediate start date, and an extended expiration date of 12/31/20 (extended from the typical 3-6 months), WITH the following language included with the authorization: "Due to the COVID-19 pandemic, please be aware that all elective, routine, non-urgent care may be delayed in accordance with emergency orders issued. The authorization expiration date has been extended to allow adequate time for routine care to be provided once emergency orders have been lifted." All current, open authorizations will be revised to extend the expiration date to 12/31/20. Exceptions include those authorizations in which all visits have been exhausted, inpatient, and residential which are based on days, and dialysis which is already setup on a continuing 12-month cycle based on member's birthday. 	
KP-WA	Yes 04/24/20	At this time, for prior authorizations expiring between 3/15/20 and 4/30/20, these authorizations will be extended for 3 additional months, subject to some exclusions. Current plan quantity limits are still applicable.	
Labor & Industries	Yes 5/20/20	As a general rule L&I would add 30 days unless there is a specific date for which the provider is asking. L&I will extend the dates, but we always have a specific time as it would depend on the claim. If there were significant changes in the	

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		IWs condition or claims issues it would be have to be considered on a case by case basis.	
Molina - Marketplace	Yes 03/30/20	Prior authorization has been extended to 09/01/20	
Pacific Source	Yes 07/09/20	Pre-authorized services and prior authorizations in existence when the pandemic emergency was declared are extended through October 1, 2020. We will adjust depending on the length of the pandemic and update our provider manual and coverage endorsements to reflect any revised dates.	
Premiera	Yes 03/31/20	Extended the effective date out to 6 months from the initial approval date.	
Providence	Yes 06/15/20	Approved prior-authorizations and referral requests received between 2/1/2020-6/15/2020 will be extended until 9/30/2020	
Regence	Yes 04/28/20	<p>Effective immediately, if hospitals need to transfer a patient quickly due to the COVID-19 impact and do not have time to secure pre-authorization for post-acute care settings or home-based care (i.e., skilled nursing facilities, long-term acute care hospitals and inpatient rehabilitation), we will waive the pre-authorization requirements.</p> <p>If a patient has services that are delayed, we will extend pre-authorizations for elective inpatient admissions or outpatient elective services. Providers need to contact us to request an extension to their expiring pre-authorization request.</p> <p>AIM Specialty Health (AIM) and eviCore healthcare (eviCore) are extending authorizations for six months.</p> <p>Any emergency room visit that results in an in-patient admission, directly related to COVID-19, does not require a pre-authorization</p>	

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		<p>All pharmacy pre-authorizations that are due to expire between March 23, 2020 and June 30, 2020 will be extended six months from the date of the current expiration date to alleviate work by providers' offices.</p> <p>https://www.regence.com/provider/library/whats-new/covid-19#care-management</p>	
UHC - Commercial	Varies 04/28/20	UHC will provide a 90-day extension, based on original authorization date, of open and approved prior authorizations with an end date or date of service between March 24, 2020 and May 31, 2020, for services at any care provider setting.	