New York Essential Plan (EPP)

Effective Oct. 1, 2023

Overview

The table below outlines the behavioral health services that require prior authorization for the New York Essential Plan contract.

Please check this list before you provide services to UnitedHealthcare Community Plan members. Additional information about prior authorization for behavioral health services can be found in the Optum Behavioral Health National Network Manual (pages 38-40). If you have additional questions, please call the Customer Service number on the back of the member's ID card.

Note: All out-of-network (non-participating) providers must obtain prior authorization approval before providing behavioral health services. Prior authorization is not required when rendering emergency services.

Prior authorization requirement ending on Nov. 1, 2023

Service Description	Procedure Code	Additional Information
ECT, single seizure and Multiple seizure *per day*	90870	

Prior authorization continues to be required for these codes

Service Description	Revenue Codes	Modifiers	Additional Comments
All-inclusive room and board plus ancillary	100		
Inpatient Psychiatric	0114, 0124, 0134,		
Substance Abuse: Medically Supervised Residential Inpatient Withdrawal Management ASAM 3.7W	0116, 0126, 0136, 0146, 0156		
Medically Monitored Intensive Inpatient Services, ASAM 3.7	158		
Chemical Dependency Rehab ALOC	169		

Service Description	Procedure Codes	Modifiers	Additional Comments
Mental Health intensive outpatient (note: NOT State Plan)	0905		
Intensive OP Services - Psychiatric	906		
Mental Health partial hospitalization	0912/0913		
Mental Health Residential Treatment	1001		

Service Description	Procedure Codes	Modifiers	Additional Comments
Preparation of Reports of patient's psychiatric status, history	90889		
Unlisted Psych Service (Programs)	90899		
Psychological testing evaluation	96130, 96131		7/1/19 Per State update eff 7/1/19 96131 no longer reimbursed by Medicaid Fee for Service. 1/1/19 System should be configured with an effective date of 1/1/2019 for Authorization Requirements. Authorization requirements were not enforced until after 3/1/2019.
Psychological & Neuropsychological testing administration/scoring	96136, 96137,		• Auth Required – Only if the Admin & Scoring codes are submitted with Psychological Testing Eval Codes 96130 & 96131 • No Auth Required - If the Admin & Scoring codes are submitted with Neuropsychological Testing Eval Codes 96132 & 96133
Mental Health Assessment by Non-Physician (60 Min)	H0031		
Partial Hospitalization - 4 hours	H0035	U4 + UA	
Partial Hospitalization - 5 hours	H0035	U5 + UA	
Partial Hospitalization - 6 hours	H0035	U6 + UA	
Partial Hospitalization - 7 hours	H0035	U7 + UA	
Partial Hospital Collateral - 1 hour	H0035	U1, HR or HS	
Partial Hospital Collateral - 2 hours	H0035	U2, HR or HS	
Partial Hospital Group Collateral - 1 hour	H0035	U1, HQ, HR or HS	
Partial Hospital Group Collateral - 2 hours	H0035	U2, HQ, HR or HS	