

Behavioral Health Prior Authorization Requirements for United Healthcare Community Plan of Minnesota

Please see the list of Revenue/CPT/HCPC codes that require Prior Authorization for United Healthcare Community Plan of Minnesota Members

Optum Clinical completes the review for Prior Authorization requests for Residential, Inpatient, ABA/EIDBI, and non-routine outpatient services.

***For ABA/EIDBI Prior Authorization Requirements and information please visit: MN Medicaid EIDBI Program (providerexpress.com)

<u>Mental</u>	Health
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Revenue Code 101 - Psychiatric Residential Treatment Facility (PRTF)

Revenue Code 114 - MH Acute Inpatient R/B Private Psychiatric

Revenue Code 124 - MH Acute Inpatient

Revenue Code 134 - MH Acute Inpatient

Revenue Code 204 - MH Acute Inpatient, Intensive Care Psychiatric

Revenue Code 912/913 - MH Partial Hospitalization

CPT 90867, 90868, and 90869 -Therapeutic Repetitive Transcranial magnetic stimulation treatment (TMS)

CPT 90870 - Electroconvulsive therapy (ECT)

SUD

Revenue Code 116 - Detoxification, ASAM Level 3.7

Revenue Code 118 - ASAM Level 3.5

Revenue Code 126 - Detoxification, ASAM Level 3.7

Revenue Code 128 - Rehabilitation, ASAM Level 3.5

Revenue Code 136 - Detoxification, ASAM Level 3.7 or Level 4.0

Revenue Code 138 - ASAM Level 3.5, Clinically Managed Residential

Revenue Code 146 - ASAM Level 3.7 Medical Managed High Intensity IP Treatment

Revenue Code 148 - ASAM Level 3.5, Clinically Managed Residential



Mental Health Continued

HCPCS H0018 - Behavioral health; short-term residential (non-hospital residential treatment program), without room and board, per diem: Adult Crisis Stabilization, residential

HCPCS H0019 - Behavioral health; long-term residential (non-medical, non-acute care in a residential treatment program where stay is typically longer than 30 days), without room and board, per diem

HCPCS H0019 - Children's Mental Health Residential Treatment

HCPCS H0035 - Partial Hospitalization, all ages

SUD Continued

Revenue Code 156 - ASAM 3.7 and 4.0 Withdrawal Management Detox

Revenue Code 158 - ASAM 3.7 SUD IP Intensive

Revenue Code 900 - ASAM Level 3.2 Withdrawal Management Clinically Managed

Revenue Code 919 - ASAM Level 3.7 Withdrawal Management Medically Monitored

HCPCS H2036 - ASAM Level 3.1, 3.3, and 3.5 SUD Residential Treatment (Multiple modifiers included)

All codes listed above will require the provider to call 877-440-9946 to request a Prior Authorization except for TMS and ECT.

TMS and ECT prior authorization can be requested by visiting the Minnesota Landing Page on Provider Express - <u>Welcome Minnesota (providerexpress.com)</u> – and then selecting the drop down of Authorization forms.

- DISCLAIMER Prior Authorization requirements are subject to change
- Provider should refer to their individual contracts for codes and coding combinations
- For questions related to Prior Authorizations please reach out to the Provider Advocate assigned to your county or Health System - nmMN (providerexpress.com)
- For all other lines of business Prior Authorization requirements please call the number located on the back of the members ID card