

INFORMATIONAL LETTER NO. 2147-MC-FFS

DATE: July 8, 2020

TO: All Iowa Medicaid Providers

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Universal Prior Authorization (PA) Forms for Medical Requests

EFFECTIVE: July 1, 2020

As part of the Legislation outlined in [IL 2107-MC-FFS¹](#), the IME and the Managed Care Organizations (MCOs) have worked together to create a set of universal forms to request medical PAs.

Starting, July 1, 2020, providers for both MC and FFS may begin using the new universal forms for requesting medical PAs. The new universal forms include one PA request form for [outpatient services²](#), another PA form for [inpatient services³](#), and a [supplemental form⁴](#) for additional provider addresses, member diagnosis, and procedure codes. All three universal forms can be downloaded and printed from the [DHS website⁵](#).

To allow additional time for providers to become familiar with the new universal PA request forms, and update their systems, if necessary, the MCOs and the IME will accept either the new universal PA request forms, or the current MCO, or FFS specific ones, for any PA request through September 30, 2020. **Effective October 1, 2020, all medical PA requests must be submitted on the new universal forms.**

The three new forms are universal, which means the form can be filled out and sent to either MCO or to the IME for FFS. Providers are still expected to check a member's eligibility and submit the PA requests to the correct entity, but going forward there will no longer be separate PA request forms for each MCO and the MCO may no longer deny the PA request for being on the wrong form.

¹ https://dhs.iowa.gov/sites/default/files/2107-MC-FFS_Uniform_PA_Process.pdf

² <https://dhs.iowa.gov/sites/default/files/470-5595.pdf>

³ <https://dhs.iowa.gov/sites/default/files/470-5594.pdf>

⁴ <https://dhs.iowa.gov/sites/default/files/470-5619.pdf>

⁵ <https://dhs.iowa.gov/ime/providers/claims-and-billing/PA>

The only change to the PA process is the request forms. **There will be no change to any of the current PA requirements or approvals that are already in place. Additionally, there is no change to the authorization timeframes that have always existed.** The timeframes of 14 calendar days for standard authorization decisions, and within 72 hours after receipt for expedited authorization decisions that are listed on the PA forms are the federal requirements for authorization decisions.

Also, how providers submit authorization requests and how they receive notification of an approval or denial is not changing.

As both in network and out of network providers will be using the same universal forms going forward, the MCOs have included a comprehensive list of authorizations for a range of services and providers. There are no new authorization requirements for behavioral health services that are listed on the form. Some services listed on the form may only be applicable to out of network providers. Again, only the form to request an authorization is changing.

Only the forms for requesting medical PAs is changing. All pharmacy requests will continue to use the current forms. Because of the new universal medical PA request form, [Form 470-0829](#)⁶ that was previously used for FFS PA requests has been revised to now only include dental PAs.

If you have additional questions, contact the respective MCO or FFS Provider Services listed below

Provider Services:

- IME: 1-800-338-7909
- Amerigroup: 1-800-454-3730
- Iowa Total Care: 1-833-404-1061

⁶ https://dhs.iowa.gov/sites/default/files/470-0829_NEW.pdf