Authorization Page

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TEMPORARY ADMINISTRATIVE RULES

Oregon Health Authority, Division of Medical Assistance Programs	410
Agency and Division	Administrative Rules Chapter Number
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Upon filing.

Adopted on

12/01/2015 thru 05/28/2016

Effective dates

RULE CAPTION

OHP FFS Program, Begin Requiring Prior Authorization for Billing Out-of-Hospital Birth Services

Not more than 15 words

RULEMAKING ACTION

ADOPT:

AMEND: 410-130-0200

SUSPEND:

Stat. Auth. : ORS 413.042

Other Auth.:

Stats. Implemented: ORS 414.025 & 414.065

RULE SUMMARY

This rule specifies the medical billing codes for which the OHP FFS medical surgical program requires prior authorization (PA) for reimbursement. The codes for which PA is required are listed in Table 1 of the rule. The amendment to the rule adds the billing codes used for out-of-hospital birth services to the list of codes requiring prior authorization.

STATEMENT OF NEED AND JUSTIFICATION

The amendment of OAR 410-130-0200

In the Matter of

- OAR 410-130-0240, which gives authority to withhold payment for out-of-hospital birth services if the pregnancy was not low risk. http://arcweb.sos.state.or.us/pages/rules/oars_400/oar_410/410_130.html
- Oregon Birth Outcomes, by Planned Birth Place and Attendant, 2012 report https://public.health.oregon.gov/BirthDeathCertificates/VitalStatistics/birth/Documents/PlannedBirthPlaceandAttendant.pdf

Documents Relied Upon, and where they are available

The Oregon Health Authority has authority to withhold payment for out-of-hospital births in cases where the pregnancy was not low risk. It is best to evaluate for risk before the birth and prior authorize the best method to do this. Using prior authorization and evaluating risk before the baby is born both promotes public safety and provides timely feedback to practitioners regarding the likelihood of payment. A revision to OAR 410-130-0200 is needed to give authority for the Oregon Health Authority to require prior authorization for out-of-hospital birth services.

Need for the Temporary Rule(s)

The Authority finds that failure to act promptly will result in serious prejudice to the public interest, the Authority, and providers. These rules need to be adopted promptly so that the Authority may evaluate risk through prior authorization to protect the public. We know from past years when risk assessment is not applied babies have died. In 2012 eight babies died in Oregon during planned out-of-hospital births. Six of the eight would not have been eligible for payment by Medicaid in and out-of-hospital setting if the current OARs had been in place. For 90 percent of Medicaid eligible members, this risk assessment is taking place because it is associated with a request for disenrollment from a CCO. For the members that are not CCO enrolled, however, this rule is urgently needed to give OHP the authority to evaluate for risk before the baby is born.

Justification of Temporary Rules

Rhonda Busek | Rhonda Busek | 11-23-15

Authorized Signer | Printed Name | Date

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Secretary of State

STATEMENT OF NEED AND JUSTIFICATION

A Certificate and Order for Filing Temporary Administrative Rules accompanies this form.

Oregon Health Authority (Authority), Division of Medical Assistance Programs (Division) 410-130-0200

Agency and Division Administrative Rules Chapter Number

OHP FFS Program, Begin Requiring Prior Authorization for Billing Out-of-Hospital Birth Services

Rule Caption: (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

In the Matter of: The amendment of OAR 410-130-0200

Statutory Authority: ORS 413.042

Other Authority:

Stats. Implemented: ORS 414.025 & 414.065

Need for the Temporary Rule(s): The Oregon Health Authority has authority to withhold payment for out-of-hospital births in cases where the pregnancy was not low risk. It is best to evaluate for risk before the birth and prior authorize the best method to do this. Using prior authorization and evaluating risk before the baby is born both promotes public safety and provides timely feedback to practitioners regarding the likelihood of payment. A revision to OAR 410-130-0200 is needed to give authority for the Oregon Health Authority to require prior authorization for out-of-hospital birth services.

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Rhonda Busek Rhonda Busek 11-23-15

Authorized Signer Rhonda Busek Date

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97310.

410-130-0200

Prior Authorization

(1) For fee-for-service (FFS) clients, prior authorization (PA) is required for all procedure codes listed in Table 130-0200-1 regardless of the setting in which they are performed. For details on where to obtain PA, download a copy of the Medical-Surgical Services Supplemental Information booklet at: http://www.dhs.state.or.us/policy/healthplan/guides/medsurg/med-surgsupp0912.pdf

(2) For clients enrolled in a prepaid health plan (PHP), providers must obtain PA from the client's PHP.

(3) The Division shall authorize for the level of care or type of service that meets the client's medical need consistent with the Health Evidence Review Commission's (HERC) Prioritized List of Health Services (Prioritized List) and guideline notes, as referenced in OAR 410-141-0520.

(4) Codes for which medical need has not been specified by the HERC shall be authorized based on medical appropriateness as that term is defined in OAR 410-120-0000.

(5) For bariatric surgery, PA is required from both of the following:

(a) The primary care provider prior to referral to a bariatric surgery center, and

(b) The bariatric surgery center prior to surgery.

(6) For clients with both Medicare and Medicaid coverage PA is not required in most instances. PA may be required when a service is covered by Medicaid but not by Medicare and PA is required for the following regardless of Medicare coverage:

i) Bariatric surgery evaluations,

ii) Bariatric surgeries,

iii) And most transplants;

(7) PA is not required:

(a) For kidney and cornea transplants unless they are performed out-of-state;

(b) For emergent or urgent procedures or services;

(c) For hospital admissions unless the procedure requires PA.

(8) The Division may request a second opinion before PA is given for a surgery.

(9) Treating and performing practitioners are responsible for obtaining PA.

(10) Refer to Table 130-0200-1 for all services and procedures requiring PA.

(11) **Table 130-0200-1**

Table 130-0200-1 Prior Authorization

For numbers followed by (*#):

(*1) Authorized for facial lesions only, if meets other PA requirements

(*2) PA not required for clients under age 21

(*4) PA is only required for out-of-hospital births

S2053	21175	22600	26562	38208
S2065	21179	22610	27447	38209
S2118	21180	22612	28340	38210
S2142	21181	22614	28341	38211
S2150	21182	22630	28344	38212
S2350	21183	22632	28345	38213
S2351	21184	22633	29800	38214
00580	21188	22634	30400	38215
00796	21193	22800	30410	38230
00938	21194	22802	30420	38240
01990	21195	22804	30430	38241
11960	21196	22808	30435	38243
11970	21198	22810	30450	40840
15822	21199	22812	30460	40842
15823	21206	22818	30462	40843
17106 (*1)	21208	22819	32851	40844
17107 (*1)	21209	22840	32852	40845
17108 (*1)	21256	22841	32853	41899
20910	21260	22842	32854	42820
21050	21261	22843	32855	42821
21120	21263	22844	32856	42825
21121	21267	22845	33933	42826
21137	21268	22846	33935	42830
21138	21270	22847	33944	42831
21139	21275	22848	33945	42835
21141	21280	22849	33976	42836
21142	22532	22851	33979	43631
21143	22534	22856	33981	43632
21145	22548	22857	33982	43633
21146	22551	22861	33983	43634
21147	22552	22862	33990	43641
21150	22554	22864	33991	43644
21151	22556	22865	33992	43645
21154	22558	23472	33993	43770
21155	22585	23473	38204	43771
21159	22586	23474	38205	43773
21160	22590	26560	38206	43775
21172	22595	26561	38207	43842

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43843	54400	58542	63043	63196
43846	54401	58543	63044	63197
43847	54405	58544	63045	63198
43848	54408	58548	63046	63199
44135	54410	58550	63047	63200
44715	54411	58552	63048	63250
44720	54416	58553	63050	63251
44721	54417	58554	63051	63252
47135	56805	58570	63055	63265
47136	57267	58571	63056	63266
47140	57283	58572	63057	63267
47141	57284	58573	63064	63268
47142	57288	58660	63066	63270
47143	57291	58661	63075	63271
47144	57292	58672	63076	63272
47145	57335	58673	63077	63273
47146	58150	58720	63078	63275
47147	58152	58940	63081	63276
47562	58180	59400 (*4)	63082	63277
47563	58200	59409 (*4)	63085	63278
47564	58210	59410 (*4)	63086	63280
47570	58240	59610 (*4)	63087	63281
47600	58260	59612 (*4)	63088	63282
47605	58262	59614 (*4)	63090	63282
47610	58263	62351	63091	63285
47612	58267	63001	63101	63286
47620	58270	63003	63102	63287
48160	58275	63005	63103	63290
48551	58280	63011	63170	63295
48552	58285	63012	63172	63295
48554	58290	63015	63173	63300
48556	58291	63016	63180	63301
49000	58292	63017	63182	63302
49329	58293	63020	63185	63303
51840	58294	63030	63190	63304
51841	58400	63035	63191	63305
51845	58410	63040	63194	63306
54360	58541	63042	63195	63307

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63308
65125
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