

PROVIDER ALERT

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Prior Authorization Guidance Due to COVID-19 (Revised)

Guidance Regarding Prior Authorization Extension:

The Centers for Medicare & Medicaid Services (CMS) is using the flexibilities afforded under Section 1135 that allow for waiver or modification of pre-approval requirements to permit services approved to be provided without a requirement for a new or renewed prior authorization, through the termination of the public health emergency (PHE), including any extensions (up to the last day of the emergency period under Section 1135(e) of the Act), for members with a permanent residence in the geographic area of the public health emergency declared by Health and Human Services Secretary Alex M. Azar II.

- **For CalOptima's Community Network (CCN)**

CalOptima is extending all pre-existing authorizations received during the COVID-19 public health emergency to ensure members continue to have access to the services they need throughout this PHE.

- **What providers should know about prior authorization extension**

CCN's current and unused member authorizations approved during the COVID-19 PHE, will continue to be extended for the duration of the COVID-19 PHE.

Guidance Regarding Prior Authorization for COVID-19 Testing and Treatment Services:

- **For CCN and its delegated health networks**

The Department of Health Care Services (DHCS) is exercising this authority and **requiring** managed care plans (MCPs), like CalOptima and its delegated health networks, to waive prior authorization requirements for COVID-19 related testing and treatment services.

Please refer to the "Fee-for-Service (FFS) Prior Authorization – Section 1135 Waiver Flexibilities" guidance, including any subsequently released updates to this guidance, which is available on the DHCS COVID-19 Information for Providers & Partners webpage located at:

<https://www.dhcs.ca.gov/Pages/COVID-19-Pro-Part.aspx>.

For questions, contact CalOptima Care Coordination at **714-246-8686**.

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