Prior authorization requirement changes due to semi-annual Medicaid cost of care review

Effective December 1, 2019, prior authorization (PA) requirements are changing for all of the codes listed below. The list of codes will require PA by UniCare Health Plan of West Virginia, Inc. Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage. Noncompliance with new requirements may result in denied claims.

PA requirements are being added to the following:

- All lower extremity prosthesis — shank foot system with vertical loading pylon (L5987)
- Wheelchair, pediatric size — tilt-in-space, folding, adjustable, without seating system (E1234)
- Wheelchair, pediatric size — tilt-in-space, rigid, adjustable, without seating system (E1233)
- Wheelchair accessory — ventilator tray, gimbaled (E1030)

To request PA, you may use one of the following methods:

- Web: https://www.availity.com
- Fax: 1-855-402-6983 (medical)
- Phone: 1-866-655-7423 (medical)

Not all PA requirements are listed here. Detailed PA requirements are available to contracted and noncontracted providers on our provider website (www.unicare.com > Providers > State Sponsored Plan providers > West Virginia - Medicaid Managed Care > Authorization and Preservice Review > Precertification Look UP Tool [PLUTO]>). Providers may also call us at 1-800-782-0095 for PA requirements.