



# NETWORK *Notification*

**Notice Date:** January 22, 2021  
**To:** Indiana HHW/HIP Providers  
**From:** CareSource  
**Subject:** UPDATE – Prior Authorization Requirements  
**Effective Date:** January 1, 2021

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## Summary

We're committed to streamlining operations for providers and recognize the impact COVID-19 has on many practices and facilities. To support our providers in care for patients during the pandemic, and to provide more flexibility regarding our prior authorization list, **CareSource has decided to waive new prior authorization requirements until April 1, 2021.**

## Impact

From Jan. 1, 2021, until April 1, 2021, CareSource's systems will be configured to waive the new prior authorization requirements that you were previously notified of that go into effect Jan. 1, 2021. During this period, claims will continue to adjudicate according to 2020 prior authorization requirements.

CareSource's prior authorization requirements may be viewed [here](#). The Procedure Code Look Up tool will be available starting Jan. 14, 2021.

## Importance

CareSource continues to monitor the impact of the COVID-19 pandemic on our members and providers. The decision to waive new prior authorization requirements is intended to ease the administrative burden on providers who are focused on addressing the surge in new COVID-19 cases.

## Questions?

CareSource continues to look for ways to support our provider network and ease administrative burdens during the COVID-19 pandemic. For questions related to prior authorization requirements, providers may contact CareSource Utilization Management at **1-844-607-2831**. Our hours of operation are Monday through Friday from 8 a.m. to 6 p.m. Eastern time.

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