



# NETWORK *Notification*

**Notice Date:** November 5, 2021  
**To:** Ohio Medicaid & MyCare Providers  
**From:** CareSource  
**Subject:** COVID-19: Temporary Change to Prior Authorization for Transition to Post-Acute Care  
**Effective Date:** August 27, 2021

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**Please note:** CareSource is monitoring all guidance related to COVID-19. This communication is an update on the [previous version](#) dated August 27, 2021. CareSource will communicate updated information aligned with state guidance as it is released. Please check back regularly for updated information.

## Summary

CareSource is committed to assisting providers and members during the pandemic. To further partner with the provider community and help mitigate obstacles to care, CareSource is modifying the prior authorization process to allow movement of members from the acute to the post-acute environments in order to reduce barriers and increase timeliness of member admissions and discharge.

## Impact

**Effective Aug. 27, 2021, prior authorization requirements for long-term acute care facilities (LTACH), skilled nursing facilities (SNF) and inpatient rehabilitation facilities (IRF/hospitals) have been lifted for post-acute services when Medicaid is the primary payor.** CareSource requires notifications from providers related to admissions and discharges in order to ensure referrals to case management and to support claims processing. Prior authorization waivers for admissions to LTACHs, SNFs and IRFs will be in place until further direction from the Ohio Department of Medicaid (ODM). Members' level of care will be determined upon admission to post-acute care.

This waiver only applies to CareSource Medicaid and MyCare products (when Medicaid is the primary payor). Prior authorization is required for other products, including CareSource MyCare (when Medicare is the primary payor), Marketplace, Medicare Advantage and D-SNP. These products continue to follow the standard prior authorization processes.

## Importance

During the COVID-19 pandemic, CareSource continued to partner with the provider community to reduce unnecessary burden and improve member transitions across the continuum of care. As a result, CareSource is temporarily relaxing prior authorization requirements for members seeking admission to the post-acute environment when Medicaid is the primary payor.

## Questions?

For questions, please contact Provider Services at **1-800-488-0134** (Monday through Friday, 8 a.m. to 6 p.m.)  
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