BAYOUHEALTH
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A program of the Louisiana Department of Health and Hospitals

Louisiana Department of Health and Hospitals
BAYOU HEALTH Informational Bulletin 12-2
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Issue: CommunityCARE " Referrals" Issued Prior to "Go Live" Date for Surgeries and Other Procedures During the 30 Day Transition Period

Amerigroup

Amerigroup will reimburse the facility for referrals that were previously received by hospitals for all Medicaid enrollees assigned to Amerigroup during the 30 day transition period. If a member requires these medically necessary covered services beginning first day of second month in each GSA, our preauthorization requirements are outlined in our Provider Handbook and we will enforce those guidelines for all providers.

Community Health Solutions

The policy of Community Health Solutions of Louisiana (CHS-LA) : **a blanket referral is provided through September 1, 2012 during the early implementation phase. The PCP can use 2475248 or any 7 digit referral number (cannot be all zeros or nines) for the blanket referral. Beginning September 2, 2012,** a referral **will be** required to see a specialist or another PCP outside of the practice/group to whom the Member is assigned. Members may be referred to and see any Medicaid enrolled specialists**; all specialists and hospitals are considered in-network.** The referral can be provided by the PCP or can be obtained by calling CHS at 855-CHS-LA4U (1-855-247-5248).

LaCare

LaCare will honor referrals that were previously received by [hospitals] for the first 30 days. Please fax a copy of the referral to our 866-397-4522 number, to the attention of Jonice Stewart. [Hospitals] can also call our 1-888-913-0350 UM line and ask for Brandi Bishop, our RN who will be entering these authorizations for them.

Louisiana Healthcare Connections

If the surgeries in question are scheduled at a participating (in network) outpatient surgical center, then no authorization is required (other than a few listed that are generally elective or cosmetic – please see prior authorization list for the details on those). This may address a large percentage of the cases in question. As you also know, any procedures that do have a prior authorization from DHH will be honored for 30 days.

United Healthcare

Although UHC will coordinate and review services, we intend to waive prior authorization requirements for the first 60 days for outpatient services and not enforce medical necessity review for the first 30 days for inpatient services as we go-live in each geographical service area. UHC will honor those outpatient and inpatient services prior authorized or pre-certified by Molina that occur during the 30 day transition period. UHC does not require referrals. PCP's may refer members to specialist and facilities that are recognized by DHH as Louisiana Medicaid Providers.