



## Physical and Occupational Therapy Prior Authorization Requirements – For Physicians

- Physical and Occupational Therapy Evaluations and Re-Evaluations: Do NOT require prior authorization. A signed and dated prescribing provider's order for the evaluation that supports a medical need for the evaluation should be sent to the treating agency. The treating agency will schedule and perform an Initial Evaluation.
- All Physical and Occupational Therapy visits require prior authorization. These requests must include the respective Physical or Occupational Therapy evaluation for initial therapy visits or the Physical or Occupational Therapy Re-evaluation for continued visits with a current (within the past 60 days of receipt) Provider's signature

*For chronic therapy services, a re-evaluation must occur every 180 days.*

- Prior authorization is required for home health and outpatient initial and continued PT and OT visits for all members once the initial evaluation has been completed.
- No prior authorization is needed for Physical Therapy or Occupational Therapy provided in an inpatient setting.
- Prior authorization is not required for services provided by Early Childhood Intervention (ECI) including PT and OT evaluations, Re-evaluations, initial or continued therapy visits. Families do not have to choose between ECI and other Medicaid service providers. If there is medical necessity for Medicaid services, the child is entitled to receive her or his services from multiple providers.
- Members who are eligible for Physical and Occupational therapy through the public school system as School Health and Related Services (SHARS), may only receive additional therapy if medical necessity criteria are met as outlined in this guideline.
- Chronic Physical and Occupational therapy services are not a benefit for members who are 21 years of age or older.
- If a member does not meet criteria for medical necessity for continued therapy, a new authorization request may be submitted no sooner than in 3 months to determine if deterioration of function has occurred and additional therapy is medically necessary. These services will require pre-authorization as a continuation of Physical or Occupational therapy. A request beyond 6 months after discontinuation of therapy will be managed as a new initial request for therapy.