



January 8, 2013
Announcement 554

Urgent Update on Roll Up of Prior Authorization Lines for Provider Types 11, 13, 51, 56, 63, 75 and 78

Attention provider types (PT) 11, 13, 51, 56, 63, 75 and 78: Requesting prior authorizations (PAs) to be rolled up is no longer needed for inpatient claims with the exception as described below. The Medicaid Management Information System (MMIS) claims payment logic has been modified as of December 10, 2012, to adjudicate claims properly for these types of claims and PAs. If you are submitting requests for PAs to be rolled up to the "PA Roll Up" email address or are receiving a report of rolled up PAs, you will no longer need to go through this process or receive these reports with the exception as noted below.

You no longer need to wait for notification that your PA has been rolled up in order to submit your claim for processing. Continue to direct any questions regarding claims processing to customer service at (877) 638-3472.

Exception: If you submitted a claim prior to the system change date of December 10, 2012, and it was cut back or denied or you have a PA that has more than 18 lines, then you should submit the PA to the "PA Roll Up" email address for further research and response.