

# Prior Authorization Conversion from Molina to MCO Bulletin

## Will the MCO issue a new PA notice to Members and Providers for the PAs converted from Molina?

<p><b>Aetna</b></p>	<p>For all members transitioning into ABHLA, a new authorization will be created. Members and providers will be notified of the new authorization number and the dates of service.</p>
<p><b>AmeriHealth Caritas</b></p>	<p>ACLA will provide each ABA provider group with a list of authorizations for continuity of care. This list of authorizations per provider group will include the member's identifying information, services authorized, start/end dates, and ACLA authorization numbers. Providers will also be notified to contact ACLA BH UM if there are current members missing from the continuity of care list to ensure that members to whom they are providing services, but are not listed, have a continuity of care authorization in place prior to 2/1/2018. ACLA will not issue individual prior authorization notices to members, so as to not confuse members who are currently receiving services. ACLA will issue to all ABA continuity of care members a letter that alerts them that no changes in their current services will occur and they do not have to take any action to continue to receive the services. ACLA will only issue to providers the continuity of care authorization list as noted above.</p>
<p><b>Healthy Blue</b></p>	<p>Healthy Blue will not be issuing a PA notification for Molina authorizations. All Molina authorizations will be recognized through their expiration date. Healthy Blue will not require an authorization number (Healthy Blue's or Molina's) on the claim form for proper reimbursement.</p>
<p><b>Louisiana Healthcare Connections</b></p>	<p>LHCC will conduct a system load of the current Molina authorizations on January 31, 2018. On February 1, 2018, the notices of coverage containing the authorization numbers will be mailed to the providers and the providers may also view their authorizations on the provider portal. Additionally, the LHCC medical management team will be able to view all authorizations in our electronic system and provide verbal verification if needed. As previously stated in the LDH informational bulletin, there is also a grace period until March 1, 2018 during which an authorization for services is not required and the lack of an authorization on the claim will not result in a denial of payment.</p>
<p><b>United Healthcare</b></p>	<p>United Healthcare Community Plan of LA will not be issuing notices to members and providers with new prior authorizations converted from Molina for ABA services.</p>