

Prior Authorization Code List

Kansas Long Term Care

Effective March 1, 2025

Overview

The table below outlines the behavioral health services that require prior authorization for the UnitedHealthcare Community Plan of Kansas Medicaid Long Term Care health plan.

Please check this list before you provide services to UnitedHealthcare Community Plan members. Additional information about prior authorization for behavioral health services can be found in the Optum Behavioral Health [National Network Manual](#) (pages 38-43) and the UnitedHealthcare Community Plan of Kansas [Care Provider Manual](#) (Chapter 7) . If you have additional questions, please call the Customer Service number on the back of the member's ID card.

Notes: All out-of-network (non-participating) providers must obtain prior authorization approval before providing behavioral health services. Prior authorization **is not required** when rendering emergency services. Emergency admissions require notification.

Prior authorization required for these codes

Service Description	Revenue Code	Additional Information
Mental health inpatient services	0124, 0114, 0134, 0144	
Hospital based inpatient based detoxification services	0116, 0126, 0136, 0146, 0156	
Intensive outpatient (IOP) services for eating disorders	905	
Rehab services/Facility therapy	911, 915	Follows the auth rule for the CPT/HCPC code billed with these codes
Partial hospitalization program (PHP) for eating disorders	912, 913	

Service Description	Procedure Code	Additional Information
SUD intensive outpatient - Adult	H0015	
Substance use disorder (SUD) - Residential	H0018	
Residential - Reintegration SUD	H0019	
Community psychiatric supportive treatment program	H0037	
Comprehensive community support services	H2016	
Intensive outpatient - Eating disorder	S9480	
Psychiatric residential treatment facility (PRTF)	T2048	
Psychological testing evaluation	96130, 96131	

Service Description	Procedure Code	Additional Information
Psychological and neuropsychological testing administration/scoring	96136, 96137, 96138, 96139	• Auth Required - Only if the admin and scoring codes are submitted with psychological testing eval codes 96130 and 96131 • No Auth Required - If the admin and scoring codes are submitted with neuropsychological testing eval codes 96132 and 96133
Behavior identification assessment	97151	
Behavior identification-supporting	97152	
Adaptive behavior treatment by protocol	97153	
Group adaptive behavior treatment by protocol administered by technician under the direction of a physician or other qualified health care professional, face-to face with two or more patients; each 15 minutes	97154	
Adaptive behavior treatment with protocol modification	97155	
Family adaptive behavior treatment guidance	97156	
Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, face-to-face with multiple patients; each 15 minutes	97158	
Community-based wrap around services - CMHC provider type only; 15 minutes	H2021	Covered for long term care (LTC) SED waiver program
Home and community based services (HCBS), Serious emotional disturbance (SED) waiver services - Parent support and training - Group - Community mental health centers (CMHC) provider type only	S5110	Covered for LTC SED waiver program
HCBS SED waiver services short term respite care - CMHC provider type only	S5150	Covered for LTC SED waiver program
Family stabilization services	S9482	Covered for LTC autism waiver program
Autism respite care	T1005	Covered for LTC autism waiver program
Attendant care	T1019 HK	Covered for LTC SED waiver program
Family support, training and counseling for child development - Autism waiver only	T1027	Covered for LTC autism waiver program
HCBS SED waiver services independent living/skills building - CMHC provider type only	T2038	Covered for LTC SED waiver program