Prior Authorization Code List

Texas STAR

Effective March 1, 2025

Overview

The table below outlines the behavioral health services that require prior authorization for the UnitedHealthcare Community Plan of Texas STAR Medicaid 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 Texas Care Provider Manual (Chapter 8). 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 (MH) inpatient	114, 124, 134, 144, 154, 204	
Substance use disorder (SUD) inpatient	116, 126, 128, 136, 146, 156	
Intensive outpatient (IOP) MH	905	
IOP SUD	906	
Partial hospitalization (PHP) - less intensive MH/SUD	912	
Partial hospitalization (PHP) - intensive MH/SUD	913	
MH residential	1001	
SUD residential (includes detoxification)	1002	

Service Description	Procedure Code	Additional Information
Alcohol and/or drug services; subacute detoxification (residential addition program outpatient)	H0012	
SUD residential, alcohol and/or other drug use services, not otherwise specified	H0047	Excludes room and board
SUD residential (includes detoxification)	H2035	
Psychological testing evaluation	96130, 96131	
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

Service Description	Procedure Code	Additional Information
Applied Behavior Analysis (ABA)	97151, 97153, 97154, 97155, 97156, 97158	

The following community-based outpatient services are generally **not subject to prior authorization**; however, outlier cases (i.e., those subject to higher utilization) identified by claims data are subject to clinical review to assess whether continued care is medically necessary.

Service Description	Procedure Code	Additional Information
Substance use disorder individual counseling	H0004	
Substance use disorder group counseling	H0005	
Medication training and support	H0034	
Peer support	H0038	
Skills training and development	H2014	
Psychosocial rehabilitation	H2017	
Targeted case management	T1017	