Community & State MME Authorization Requirements	
Category	Ohio updated as of 3/1/14
Abortion	No Prior Authorization
Bariatric Surgery	Prior Auth Required
Bone Growth Stimulator	Prior Auth Required
BRCA Genetic Testing	Prior Auth Required
Breast Reconstruction (Non-Mastectomy)	Prior Auth Required
Cochlear Implants and Other Auditory Implants >\$1000	Prior Auth Required >\$1000
Cosmetic & Reconstructive	Prior Auth Required
DME >\$1000	Prior Auth Required >\$1000
Enteral/ Parenteral Services	Prior Auth Required
	Prior Auth.
	Make sure these are never denied with the reason code - not a covered
	benefit. OH does not have a covered benefit under medicaid - in medical
Experimental & Investigational	necessity - state has last word.
Home Health Care	Prior Auth Required
IMRT	Prior Auth Required
Injectable Medications - Acthar	Prior Auth Required
Injectable Medications - Botox	Prior Auth Required
Injectable Medications - IVIG	Prior Auth Required
Injectable Medications - Makena	Prior Auth Required
Injectable Medications - Xolair	Prior Auth Required
Joint Replacement	Prior Auth Required
Muscle Flap Procedures	Prior Auth Required
Non- Emergent Air Ambulance Transports	Prior Auth Required
Orthognathic Surgery	Prior Auth Required
Orthotics >\$1000	Prior Auth Required >\$1000
Prosthetics >\$1000	Prior Auth Required >\$1000
Proton Beam Therapy	Prior Auth Required
Radiology Services	
CareCore Code List:	
https://www.unitedhealthcareonline.com/b2c/CmaAction.do?cha	nnell
d=14088e54f9b6a210VgnVCM1000002f10b10a	Prior auth required

CareCore Cardiology Program including:	
Diagnostic Heart Catheterization	
Stress Echocardiography	
Transthoracic Echocardiography	
Cardiac Implantable Devices	
https://www.unitedhealthcareonline.com/b2c/CmaAction.do?channelI	
d=14088e54f9b6a210VgnVCM1000002f10b10a	No auth required
Septoplasty/Rhinoplasty	Prior Auth Required
Sleep Apnea Procedures & Surgeries	Prior Auth Required
Sleep Studies	No prior authorization unless it's done by a non-par provider
Spinal Stimulator for Pain Management	Prior Auth Required
Spinal Surgery	Prior Auth Required
Sterilization	No Prior Authorization
Transplants	Prior Auth Required
Vagus Nerve Stimulation	Prior Auth Required
Vein Procedures	Prior Auth Required
Ventricular Assist Devices	Prior Auth Required