

Medicaid and CHIP Turn Around Times for Service Determinations							
Line of Business	Non-Urgent Outpatient & Elective Inpatient	Urgent Pre-Service	Urgent Concurrent Review	Hospitalized Member Pending Discharge	Concurrent Inpatient	Post Stabilization and Life Threatening	Post-Service Decisions
Medicaid (CHIP RSA, Star and Star-Plus)	<u>3 business days</u> (this equates to weekdays and excludes weekends and Texas State Holidays)	<u>Not to exceed 72 hours</u>	<u>Not to exceed 72 hours</u>	Within 1 Business Day of receiving the request for services or equipment that will be necessary for the care of the Member immediately after discharge, including if the request is submitted by an Out-of-Network Provider, Provider of Acute Care Inpatient Services, or a Member.	<u>1 business day not to exceed 72 hours.</u>	1-hr for life-threatening/post-stabilization <u>verbal</u> notification	<u>30 calendar days</u> for par providers notification timelines should be reviewed prior to processing post service decisions unless EMTALA applies
Medicaid Extensions/Incomplete Prior Authorization Process							
<p><u>Incomplete Authorization Process Outlined by Uniform Managed Care Manual 3.21</u> A member or provider may request an extension of up to 14 additional calendar days beyond the standard or expedited authorization deadline. Molina may also extend when in the member's best interest</p> <p>Incomplete prior authorization process will be initiated within 3 business days of the PA Receive Date. If no additional information is received by the 3rd business day from the letter date, Molina will refer to the Medical Director for determination by the 7th business day and determination must be made no later than the 10th business day from the PA receive date.</p> <p>Molina must make a determination for the incomplete authorization process no later than the 3rd business day after the missing information is received.</p> <p><u>MHT Standard (Inpatient and Outpatient) Extension Process</u> Requests for an extension can happen because:</p> <ul style="list-style-type: none"> •You or your physician asked for an extension, •Or we need more information, and it is in your best interest to extend the request to get that information. 							

Line of Business	Non-Urgent Outpatient & Elective Inpatient	Urgent Pre-Service	Extensions/Incomplete Prior Authorization Process	Urgent Concurrent Review	Concurrent Inpatient	Post Stabilization and Life Threatening	Post-Service Decisions
CHIP	<u>Within 3 working days</u> written notice from date and time of receipt (should meet the immediacy of the need, not to exceed three)	<u>3 working days not to exceed 72 hours</u> written notice from date and time of receipt (should meet the immediacy of the need, not to exceed three)	When the provider / member requests or is in the best interest to the member. Up to 14 calendar days from the receipt date.	<u>24 Clock Hours - verbal</u> notification (followed by written within 3 working days)	<u>24 clock hours – verbal</u> (electronic/telephonic) notification (followed by written within 3 working days)	<u>1-hr</u> for life-threatening/post-stabilization – <u>verbal</u> notification (followed by written within 3 working)	<u>30 calendar days</u> for par providers notification timelines should be reviewed prior to processing post service decisions unless EMTALA applies

Medicaid and CHIP Turn Around Times for Pharmacy Service Determinations				
Line of Business	Telephone Prior Authorization Request	Standard Prior Authorization Request Submitted by Fax or Web	Urgent Prior Authorization Request Submitted by Fax or Web	Emergency Prescription Supply
Medicaid (STAR and STAR-PLUS)	Pharmacy prior authorization approval or denial (pending medical director decision) is provided immediately for telephone request.	The approval or denial for a standard pharmacy prior authorization request is made no later than 24 hours after receipt.	The approval or denial for an urgent pharmacy prior authorization request is made no later than 24 hours after receipt.	The 72-hour emergency supply can be dispensed by a pharmacy if Molina cannot provide a response to the prior authorization request within 24 hours after receipt or the prescriber is not available to make a PA request because it is after the prescriber's office hours and the dispensing pharmacist determines it is an emergency situation.
CHIP	Pharmacy prior authorization approval or denial (pending medical director decision) is provided immediately for telephone request.	The approval or denial for a standard pharmacy prior authorization request is made no later than 72 hours after receipt.	The approval or denial for an urgent pharmacy prior authorization request is made no later than 24 hours after receipt.	The 72-hour emergency supply can be dispensed by a pharmacy if Molina cannot provide a response to the prior authorization request within 24 hours after receipt or the prescriber is not available to make a PA request because it is after the prescriber's office hours and the dispensing pharmacist determines it is an emergency situation.