Effective August 1, 2023, OOS SNF Claims Require Prior Approval

Effective August 1, 2023, Out-of-State (OOS) Skilled Nursing Facilities (SNF) providers for NYS Medicaid members enrolled in Fee for Service (FFS) Medicaid will be required to include Prior Approval (PA) numbers on all claims. This change will be effective for all OOS SNFs regardless of the member's required level of care. Failure to provide PA numbers on claims will result in a denial of payment.

Claims will deny for Edit 02345 – *required prior approval for out of state LTC not found*. HIPAA reason code 197 (Adjustment Reason Code 197 with no Remittance Remark Code) will be reported on the 835 remittances. Additional changes to the OOS SNF process can be found in the Residential Health Manual at https://www.emedny.org/ProviderManuals/ResidentialHealth/

All FFS Medicaid members currently in OOS SNFs have been given PA numbers that are valid for one year. Letters providing the PA number and other information are sent to the correspondence address on file. If you are not receiving these letters, please call the eMedNY call center and confirm the correct address is on file. Upon expiration of the current PA, SNF providers will be expected to obtain the appropriate approvals for any future claims for FFS NYS Medicaid members in OOS facilities. All new admissions will be issued a PA upon Department approval that is valid for 1 year.

Instructions for submitting a request for a new PA can be found at https://www.emedny.org/selfhelp/ePACES/ePACESRefSheets.aspx.

A new GIS has been posted on this topic at: https://www.health.ny.gov/health_care/medicaid/publications/docs/gis/23ma15.pdf

 If you have questions about ePACES or submitting PA requests, please contact the eMedNY call center at 1-800-343-9000.

For questions about policy or inquiries into the status of a request, please contact the BMR Call Center at 1-800-342-3005, option 4.