

Peach State Health Plan (Centene Corporation) and WellCare Integration Authorization Notice Update Effective May 1, 2021

Authorizations issued by WellCare for dates of service that occur on or after May 1, 2021 will transfer with the member's eligibility to Peach State Health Plan. Peach State Health Plan will automatically honor these authorizations; therefore, it is **not necessary to request the authorization again** when the member becomes eligible with Peach State Health Plan.

Important Information Regarding WellCare Prior Authorizations

- Approved WellCare prior authorizations will be honored by Peach State Health Plan (PSHP) through the service completion date for participating and non-participating Providers
- ***It is not necessary to request the authorization again when the member becomes eligible with Peach State Health Plan***
- Prior Authorizations for a Date of Service (DOS) prior to 5/1/21 – claims paid by WellCare
- Prior Authorizations for a DOS 5/1/21 and after – claims paid by Peach State Health Plan
- Prior Authorizations with a DOS that spans across 5/1/21:
 - Claims paid by WellCare for services prior to 5/1/21
 - Claims paid by PSHP for DOS 5/1/21 and forward
- *The original WellCare authorization number should be submitted with the claim whether you are billing WellCare and/or PSHP*
- Members with Special Circumstances (ex. pregnancy, chemotherapy, dialysis...) Ongoing covered services will be authorized for members with Special Health Care Needs (SHCN) for 90 days or until the member may be reasonably transferred without disruption

For WellCare Inpatient Admissions

- If your patient is hospitalized during the transition period there will be no changes to the hospital stay or the treating provider
- Current inpatient stays with a DOS that spans across to 5/1/21
 - Inpatient/Facility Claims (from admission to discharge): Paid by WellCare
 - Professional Fee Claims: Paid based on DOS
 - Claims paid by WellCare for services prior to 5/1/21
 - Claims paid by PSHP for DOS 5/1/21 and forward for professional fees only



- *The original WellCare authorization number should be submitted with the claim whether you are billing WellCare and/or PSHP*

For WellCare OB-GYN Services and Deliveries

- Members may continue to receive services from their OB-GYN who provides service at a non-par hospital
- There will be no changes to their delivering hospital
- For deliveries that occur after 5/1/21, the hospital will need to send the delivery notification to PSHP
 - Please submit newborn delivery notifications on the Department of Community Health Centralized Prior Authorization Portal (mmis.georgia.gov). Provider will be provided the authorization number for the delivery