

Service Types Requiring Prior Authorization

Service Type	Code
Outpatient Psychiatric Services	0050
Substance Abuse	0051
Orthotics (EPSDT)	0092
EPSDT Inpatient Psych	0093
EPSDT Substance Abuse	0096
DME	0100
Intensive Rehab	0200
Outpatient Rehab	0204
Inpatient Acute	0400
Inpatient Psych	0401
MRI	0450
CAT	0451
PET	0452
Home Health	0500
Elderly Case Management	0625
Community Mental Health Rehabilitation Services (CMHRS)	0650
Treatment Foster Care-Case Management	0700
Non CSA Residential Treatment	0750
Group Home Level A	0752
Group Home Level B	0753
EDCD Waiver	0900
DD Waiver	0902
Money Follows the Person	0909
AIDS Waiver	0920
Tech Waiver	0960
Children's Mental Health Waivers	0970