

HOW TO USE THE MHS PRIOR AUTHORIZATION TOOL



GO TO:

[Prior Authorization | MHS Indiana](#)

1

select the line of
business relevant to
the services.

2

Fill in these fields

3

Enter the procedure code to
verify if prior authorization is
required.

4

To submit a prior
authorization, log in to the
[HS Provider Portal](#)

5

Prior Authorization

Medicaid Pre-Auth

Medicare Pre-Auth

Ambetter Pre-Auth

Are services being performed in the Emergency Department or Urgent Care ()
these family planning services billed with a contraceptive management diagnosis ()

☐ Yes ☐ No

Types of Services

Is the member being admitted to an inpatient facility?

YES NO

Are anesthesia services being rendered for pain management?

☐ ☐

Are services for infertility?

☐ ☐

Enter the code of the service you would like to check:

Enter Service Code

CHECK FOR PRE-AUTH

The Online Prior Authorization Tool is the official source of truth for prior authorization guidelines. Any previous communication including the MHS Medicaid Prior Authorization Document 0624.DC.P.FL should be disregarded.

As always thank you for being our partner in care. If you have any questions or require assistance, please contact the MHS Contact Center.

Contact: (877) 647-4848 | Monday-Friday, 8:00 a.m.-8:00 p.m. EST

Website: MHS Indiana

