

Overview of Prior Authorization Requests (PARs) for Oxygen

- **Members residing in Nursing Homes are exempt from Prior Authorization Requirements**
- **Initial 90 days of service are not subject to prior authorization**
- **Provider responsible to keep signed order on file**

Required Forms: ([OHCA Forms](#))

- CMN (Certificate of Medical Necessity)
 - HCA-32 **OR**
 - HCFA 484.03
 - ****HCFA 484.2 is out of date and **not** acceptable

Modifiers:

- **RR modifier is required for oxygen rental (not LL) effective 8/1/14**
- **QF Prescribed Amount of Oxygen Exceeds 4 Liters Per Minute (LPM) and Portable Oxygen is Prescribed**
- **QG Prescribed Amount of Oxygen is Greater than 4 Liters Per Minute (LPM).**

Documents required for our review

- Objective medical records documenting the type of test performed and a copy of results
- Oxygen prescription must be signed by a qualified medical practitioner (M.D., D.O., Physician Assistant, and Advanced Nurse Practitioner).