



Revised Prior Approval Change Request Process for CMS Interoperability Compliance

Effective September 1, 2026, due to [new federal interoperability rules](#) and shorter decision timeframes, New York State Fee-for Service is updating its prior approval (PA) change request process. Change requests will only be accepted for **existing** approved or adjudicated PAs in the circumstances outlined below. Requests for any other changes will require submission of a new prior approval request.

Accepted Change Requests:

Durable Medical Equipment (DME)/Medical Supplies/Hearing Aid

- Procedure code changes for paper PA requests only (electronically submitted PAs require a new PA).
- Addition of a procedure code to a paper PA request (electronically submitted PAs require a new PA).
- Request to cancel prior authorizations for medical supplies obtained via the Dispensing Validation System (DVS) that were obtained in error
- PA extensions with fiscal order covering the date of service

Private Duty Nursing (PDN)

- Change in treatment plan.
- Addition or removal of a billing provider who did not submit the original PA request.
- Increase, decrease, or discontinuance of PDN hours.
- Transfer of hours between procedure codes.
- Addition of non-school day hours.

Dental

- Change in treatment plan for paper PA requests only (electronically submitted PAs require a new PA)
- Addition of a procedure code to a paper PA request (electronically submitted PAs require a new PA)
- PA extension to reflect the new expiration date.

Change Requests NOT Accepted:

- Changes to Client Identification Numbers (CINs).
- Changes to National Provider Identifiers (NPIs).
- Changes to order dates.
- Change requests for PAs that rejected at submission. A new PA request must be submitted.

Previous Communication for CMS Interoperability:

Please refer to the [May 2026 Medicaid Update](#) for information regarding:

- Prior approval process changes effective January 1, 2027.
- Instructions for enrolling in ePACES and eMedNY eXchange to enable real-time claim submission, eligibility verification, and prior approval requests.

Contact Information

- Questions related to policy and coverage guidelines, please contact the Office of Health Insurance Programs at 1-800-342-3005 or OHIPMedPA@health.ny.gov.
- For questions related to dental coverage contact dentalpolicy@health.ny.gov.
- For questions related to billing contact eMedNY at 1-800-343-9000.