

Clarification to Prior Authorization Submission Requirements

February 23, 2026

Neighborhood Health Plan of Rhode Island (Neighborhood) is issuing this notice to clarify prior authorization submission requirements referenced in the August 29, 2025 notice [titled Updated Prior Authorization Requirements for Medicaid and Commercial Lines of Business](#). This clarification does not change existing benefit limits.

All Lines of Business

For all Neighborhood lines of business, when a member is expected to receive services in excess of the number of services allowed without prior authorization, providers must include the following information on the prior authorization request:

- The dates of service for procedures or services already provided, and
- The dates of service for the additional procedures or services being requested.

Prior authorization forms are currently being updated to reflect this clarification.

D-SNP (INTEGRITY for Duals and Dual CONNECT)

The benefit limits below apply to Neighborhood's D-SNP products (Neighborhood INTEGRITY for Duals and Dual CONNECT) and are included here to define D-SNP requirements for interventional pain management injections and facility-based sleep studies.

Interventional Pain Management Injections

(e.g., epidural steroid injections, nerve blocks)

- Limited to six dates of service per calendar year
- Services beyond six per calendar year require prior authorization
- Prior authorization requests must include the applicable dates of service, as outlined above

Facility-Based Sleep Studies

- Limited to one per calendar year
- Services beyond one per calendar year require prior authorization
- Prior authorization requests must include the applicable dates of service, as outlined above

Please reference the [August 29 notice](#) for benefit limits for Medicaid and Commercial lines of business.

Thank you for your continued partnership and for your cooperation in submitting complete and accurate prior authorization requests.