

PROVIDER Bulletin



December 5, 2019

This Provider Bulletin applies to the lines of business and provider types checked below:

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| <input checked="" type="checkbox"/> PHP (Medicare) | <input type="checkbox"/> Primary Care Physicians | <input checked="" type="checkbox"/> Specialists |
| <input type="checkbox"/> PHC (Medicaid) | <input type="checkbox"/> Ancillary | <input type="checkbox"/> Hospitals |

Prior Authorization for Specialist

Prior authorization is designed to promote the medical necessity of service, to prevent unanticipated denials of coverage and ensure that participating providers are utilized and that all services are provided at the appropriate level of care for the member's needs.

PHP Utilization management (UM) is an on-going process of assessing, planning, organizing, directing, coordinating, monitoring, and evaluating the utilization of health care services for PHP members.

Our UM staff performs assessments of authorization of services through evaluation and review of all pertinent clinical indications and medical records necessary to justify the medical necessity of the request.

In addition, Prior authorizations are required for all procedures and medical services listed in the table below, and for any specialist visits beyond initial and two (2) follow-up appointments. Approved initial authorizations are valid up to 90 days. After that time, a new request will need to be submitted along with updated supporting documentation when applicable.

Please be reminded that prior authorization is required for several services, including but no limited to specialist care.

Required authorization for:

- I. Home health care, including skilled nursing, rehab, and home infusion
- II. Imaging studies (excluding mammography, x-ray and ultrasounds or single/flat view studies) and nuclear medicine
- III. Interventional radiology
- IV. Outpatient surgery, rehabilitation including PT/OT/ST and chemotherapy
- V. Photo and radiation therapy
- VI. Wound care
- VII. Injectables (Part B) administered in physician's office other than immunizations administered by a PCP
- VIII. Durable medical equipment (DME)
- IX. Dialysis in service area
- X. Colonoscopy and endoscopy
- XI. EMG, nerve conduction studies
- XII. Hearing aids
- XIII. Orthotics and prosthetics
- XIV. Cardiac testing (excluding EKG) and
- XV. Catheterization

**We encourage you to contact our PHP's U.M. Department at phone number:
1-866-990-9322, for questions.**

For more information surrounding PHP's authorization process and requirements, please refer our Provider Manual which may be found at www.positivehealthcare.org under the "For Providers" then "Publications and Forms" tabs.

This Provider Bulletin is not intended to replace or conflict with any requirements outlined in your signed Agreement with AHF, PHP or PHC. If you have any questions or suggestions contact the Provider Relations Department at 954.522.3132 or email to tania.fils@phcplans.org