

Services Requiring Prior Authorization Effective January 1, 2025

Individual and Family Plans (IFP) and Small Group ACA Plans

Service Category	Service Details	Who to contact for prior authorization review
General	Services considered experimental, investigational, unproven or for	Network Health at 866-709-0019
Authorization	research purposes, including all CPT category III codes	or 920-720-1602
Inpatient Admissions	Acute hospital	Network Health at 866-709-0019
	Long term acute care (LTAC)	or 920-720-1602
	Maternity – vaginal delivery stays over two days; Cesarean	
	delivery stays over four days	
	Mental health/substance abuse and/or residential treatment	
	Neonatal intensive care unit (NICU)	
	Rehabilitation	
	Skilled nursing facility (SNF)	
	Swing bed/sub-acute hospital transitional care	
*Non-emergent	Cardiac diagnostics including: diagnostic cardiac catheterizations,	EviCore at 855-727-7444
services Prior	nuclear cardiology scans, stress echocardiograms	or mypoartal@evicore.com
Authorization	CAR T-Cell Therapy (chimeric antigen receptor T-cell therapy)	
through EviCore	Computed tomography (CT) scans	
	Cervical, lumbar and thoracic spine procedures	
*If any of these	Gastroenterology (EGDs, Capsule Endoscopy, non-preventive colonoscopy	
services are being	Interventional pain injections and procedures	
performed as an	Magnetic resonance imaging (MRI) scans	
inpatient, the	Magnetic resonance angiography (MRA) scans	
procedure requires auth through EviCore	Positron emission tomography (PET) scans	
and the inpatient	Molecular genetic lab testing	
hospitalization	Medical oncology	
through Network	Peripheral vascular disease (diagnosis and treatment)	
Health	Radiation oncology treatments	
Tieutiii	Shoulder, hip and knee procedures	
	DME: Electrical stimulation devices (spinal)	
	DME: Pain pumps	
	Physical and Occupational Therapy (outpatient as well as in the	
	home setting & therapy in a SNF provided as outpatient)	
Transplant services	Solid organ and bone marrow/stem cell transplant services including evaluation, work up and surgeries	Network Health at 866-709-0019 or 920-720-1602
Surgical procedures	Magnetic sphincter augmentation procedures for the treatment of GERD (LINX)	Network Health at 866-709-0019 or 920-
	Orthognathic prognathic maxillofacial surgery	
	Transgender surgery; sex reassignment surgery	1
	Temporomandibular joint disorder (TMD) surgical services	1
	Bariatric (weight loss) procedures	1
Cosmetic procedures,	Botox injections (auth required through CCUM)	Network Health at 866-709-0019 or 920-720-1602
including, but not	Breast implant removal/replacement	
limited to:	Dermabrasion and chemical peel	
	Liposuction and lipectomy	
	Mammoplasty reduction or augmentation	1
	Otoplasty	1
	Panniculectomy and other excess skin removal	

	Pectus excavatum repair	
	Port wine stain removal	
	Rhinoplasty, rhytidectomy	
	Other services that could be considered potentially cosmetic	
Durable medical	Communication devices	Network Health at 866-709-0019 or
equipment (DME)	Progressive stretch devices	920-720-1602
for use at home:	Cranial orthotics	
	Wheelchairs: manual, electric and customizations (K0001-K0004	
	do not require auth until rental month 4 or day 91 (KJ modifier	
	required))	
	Hospital beds	
	Lymphedema pumps, garments, and pneumatic compression	
	Mobile cardiac outpatient telemetry (MCOT-a.k.a. outpatient heart	
	monitoring	
	Orthotics over \$1,000 based on retail price	
	Patient lifts (e.g., electric, Hoyer, hydraulic)	
	Power operated vehicles and scooters	
	Prosthetics over \$5,000 based on retail purchase price	
	Repairs or replacement of DME over \$1,500 based on retail	
	purchase price excludes PAP devices	
	Seat lifts	
	Wheelchair accessories, including but not limited to, power	
	joystick control, power tiller control, power seat tilt, power seat	
	recline and power leg elevation	
	Bone growth stimulators (if used for the spine, EviCore reviews	
	Neuromuscular stimulators for bowel and urinary conditions	
	Deep brain stimulators	
	Continuous Glucose Monitors (CGMs)	www.covermymeds.health
Other services	Hospital or ambulatory surgery center charges in conjunction with	Network Health at 866-709-0019 or
	dental care	920-720-1602
	Accidental Dental services	
	Skin Substitute products-application and use	
	Certain medications under your medical benefit	Phone: 877-787-8705
		Fax: 877-860-8866
		OR online at ExpressPath portal
		www.express-path.com

All outpatient medications should be directed to Express Scripts/CCUM at

Phone 877-787-8705 **Fax:** 877-860-8866

Online: ExpressPath portal www.express-path.com

For authorization, please provide the CPT, HCPCS, and/or revenue code appropriate for the planned service.

Whether Network Health is the primary, secondary or tertiary insurer, authorization procedures must be followed to receive coverage.

All services must be medically necessary. Certain services are directly excluded from coverage under the various coverage documents (e.g., bariatric surgery, mental health transitional care and acupuncture, etc.) and will be reviewed when a claim is submitted to determine benefit availability and claim payment.

Authorization is not a guarantee of payment. Claims will be denied if they do not meet with all the terms and provisions of the effective coverage document. Actual benefits will be determined when the claim or bill is submitted to Network Health.

You can find a list of authorization changes in the authorization information section of the provider resources page on www.networkhealth.com

Network Health reserves the right to review all claims for medical necessity.

CONTACT INFORMATION:

Utilization Management for prior authorization:

Phone: 866-709-0019 or 920-720-1602

Fax: 920-720-1916

Member experience for benefits and eligibility:

Phone: 855-275-1400 or 920-720-1400

For 24/7 access to view benefits and eligibility, submit online authorization requests and more, please register at https://login.networkhealth.com

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