

Services Requiring Authorization Desk Procedure

Values

Accountability • Integrity • Service Excellence • Innovation • Collaboration

Abstract Purpose:

Network Health Plan/Network Health Insurance Corporation/Network Health Administrative Services, LLC's (NHP/NHIC/NHAS) Utilization Management (UM) Department maintains and updates a list of services for which contracted Commercial, Marketplace and Medicare Advantage providers and practitioners are required to obtain prior authorization from the health plan.

Procedure Detail:

Contractually, it is the responsibility of the contracted provider and/or practitioner to obtain authorization. Contracted providers/practitioners may not hold the member/participant financially responsible for services rendered when prior authorization is not requested as required.

Commercial, Marketplace and Self-Insured members/participants are required to obtain authorization for out of network services per their Certificate of Coverage, Individual and Family Policy, Summary Plan Description and/or Rider. A list of POS out-of-network services requiring prior notification is contained in the POS rider and is updated through the Rider revision process.

Procedure:

- I. The listing of Services Requiring Authorization is reviewed at least annually.
- II. Updates (additions/deletions) to the Services Requiring Authorization list are based upon the following considerations:
 - consistency with Medicare Advantage Evidence of Coverage (EOC), Certificate of Coverage (COC), Summary Plan Description (SPD) Rider, Medicare bid and/or employer group authorization requirements
 - newly covered technology
 - over/high utilization or increased utilization trend
 - high cost
 - appropriateness of treatment
 - potentially cosmetic procedure
 - potentially experimental procedure
 - case management candidate trigger
- III. The updated Commercial, Marketplace, Self-Insured and Medicare Prior Authorization Lists are presented to the Code and Edit Committee for review and approval.

Regulatory Body:
CMS

Regulatory Reason:
• CFR 422.202(a)(2)

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