

**2021 ProCare Advantage
Prior Authorization Chart**



Service Type	Requirement	Notes
<u>Hospitalization</u> : Inpatient Emergent (Medical and Psychiatric)	Notification	Within 1 business day.
<u>Hospitalization</u> : Inpatient Elective (Medical and Psychiatric)	Prior Authorization	
<u>Hospitalization</u> : Partial Day	Prior Authorization	
<u>Hospitalization</u> : Observation	Prior Authorization	
Ambulatory Surgery Center	Prior Authorization	
Cardiac and Pulmonary Rehab Services	Prior Authorization	
Certain Prescription Drugs	Prior Authorization	
Chiropractic Services	Prior Authorization	
Medicare Dental Coverage	Prior Authorization	Preventive dental - No authorization required.
Diabetic Supplies/Services	No Authorization Required	
Dialysis	Prior Authorization	
Durable Medical Equipment	Prior Authorization	
Genetic Testing/Screening Labs	Prior Authorization	
Home Health Services	Prior Authorization	
Laboratory Services	No Authorization Required	
Medicare Part B Drugs and Step Therapy	Prior Authorization	For chemotherapy: Only initial administration requires authorization.
Mental Health Specialty	Prior Authorization	
Opioid Treatment Services	Prior Authorization	
All Out of Network Services	Prior Approval Required	
Outpatient Diagnostic Procedures and Tests	Prior Authorization	No Authorization required when services are rendered in a Nursing Facility or Physician Office.
Outpatient Diagnostic/Therapeutic Radiology	Prior Authorization	X-rays do not require authorization when service rendered in Nursing Facility, physician office, or hospital. Diagnostic and therapeutic radiological services require authorization in the nursing facility or physician's office
Outpatient Hospital Services	Prior Authorization	
<u>Part A Skilled Nursing Facility Services - Skill in Place or Treat in Place services</u>	Prior Authorization	
<u>Part A Skilled Nursing Facility: Post-Acute</u>	Prior Authorization	See List
<u>Part B Therapy - Occupational, Physical or Speech Therapy Services</u>	Prior Authorization	See List
Prosthetics/Medical Supplies	Prior Authorization	
Substance Abuse Services	Prior Authorization	
Telehealth	Referral	
Transport/Non-Emergent Ambulance	Prior Authorization	
DATE: January 2021		