



FROM



Below you will find a list of services that require Prior Authorization. This means that your doctor will need to submit a request for the service to the Health Plan, for review, prior to performing or scheduling the service for you. There are several ways that your doctor can submit this request. Your doctor has been informed about how to do this and there are additional instructions for your doctor on this website. You can contact the Health Plan for any questions that you may have.

Services Requiring Prior Authorization

1. Adult Accidental Dental
2. Bariatric Surgery Inpatient
3. Bone Anchored Hearing Aids
4. Cardiac Rehabilitation
5. Cochlear Implants
6. Corrective Footwear Orthotics Shoes Inserts
7. Inpatient Services Maternity Care
8. Diabetic Footwear
9. Diabetic Footwear Orthotics
10. Durable Medical Equipment
11. Hearing Aid Supplies Batteries
12. Home Healthcare
13. Imaging (Such as MRI, CT, PET scan)
14. Infertility Diagnostic Testing
15. Inherited Metabolic Disorder
16. Inpatient Facility Admission
17. Inpatient Mental Health
18. Inpatient Rehabilitation
19. Inpatient Substance Use
20. Mastectomy Bra
21. Neurodevelopmental Therapy
22. Neurological Rehabilitation
23. Outpatient Rehabilitation
24. Outpatient Mental Health & Substance Use (Non participating providers only)
25. Outpatient Surgery Doctor
26. Outpatient Surgery Facility
27. Private Duty Nursing
28. Respite Care
29. Rx Preferred Drug (may require prior authorization)
30. Rx Specialty Drug (may require prior authorization)
31. Rx Specialty Mail Drug (may require prior authorization)
32. Specialist Visit
33. Skilled Nursing Facility
34. Sleep Study
35. TMJ Treatment
36. Transplant
37. Wigs

Note: To determine if Vision or Dental services require an authorization, please call the Health plan as it varies based on the type of service and provider administering the service.