

Prior Authorization

Providers can submit prior authorization requests online at Provider.SuperiorHealthPlan.com or by phone and fax through the numbers listed below:

Phone:

- Physical Health: [1-800-218-7508](tel:1-800-218-7508)
- Behavioral Health: [1-844-744-5315](tel:1-844-744-5315)
- Clinician Administered Drugs (CAD): [1-866-768-7147](tel:1-866-768-7147) ext. 6081112

Fax:

- Physical Health: 1-800-690-7030
- Behavioral Health: 1-866-570-7517
- Clinician Administered Drugs (CAD): 1-866-683-5631

- All services included in this listing require authorization prior to provision of the service or item.
- Prior authorization requests should be submitted no less than five Business Days prior to the start of service.
- Prior authorization is not a guarantee of payment.
 - Reimbursement of authorized service(s) is dependent upon member eligibility, benefit limitations and exclusions.

Inpatient Hospitalizations

- Pre-scheduled admissions for elective procedures require prior authorization.
- Non-elective, non-scheduled inpatient admissions do not require prior authorization.
- Notification of admission is required within one business day of the admission is required.
 - For information and requirements related to notification of non-elective inpatient admissions notification, refer to Prior Authorization requirements on Superior HealthPlan's website and Provider Manual.

Non-Contracted Provider Services, Supplies, Equipment

- Prior authorization requirements for non-contracted providers is not limited to services and items on this Prior Authorization List.
- With the exception of emergency and post stabilization care, and some facility based professional services, receipt of ALL services or items from a non-contracted provider in all places of service except emergency room place of service, require prior authorization before provision of the service/item.

Prior Authorization Required

Abortion

Elective termination of a live pregnancy

Allergy Testing and Immunotherapy

Allergy Testing and Immunotherapy Services

Note: Authorization not required for Allergists, Immunologists, Pulmonologists or ENTs

Behavioral Health Services

- Intensive Outpatient Program (IOP) Services (Mental Health/Substance Use Disorder) Partial Hospitalization Program (PHP) Services (Mental Health/Substance Use Disorder)
 - Residential Treatment Center (RTC) Services (Mental Health/Substance Use Disorder)
- Mental Health Rehabilitation and Targeted Case Management (MHR/TCM):
- Skills Training services
 - Note: Prior authorization ONLY required for Multi-Specialty Groups. Prior authorization is not required for Local Mental Health Authority (LMHA) providers

Prior Authorization Required Continued

<p>Clinician Administered Drugs</p>	<p>Including but not limited to:</p> <ul style="list-style-type: none"> • Biologicals and certain biosimilars • Botulinum toxins • Chemotherapy and supportive care drugs • Gene therapy • Injectable medications with miscellaneous billing codes • Intravenous immunoglobulins • Intravitreal injectable medications for ophthalmology use • Visco supplementation <p><i>Note: Certain provider specialties are excluded from the prior authorization requirements for clinician-administered drugs. Please refer to the online electronic prior authorization prescreen tool for specific requirements and/or exclusions.</i></p>
<p>DME/Medical Supplies</p>	<ul style="list-style-type: none"> • Durable Medical Equipment (DME) • Enteral and Total Parenteral Nutrition formula and supplies <p>Note:</p> <ol style="list-style-type: none"> 1. Many DME and medical supply items do not require prior authorization. Refer to the prior authorization checklist for the most up to date prior authorization requirements: SuperiorHealthPlan.com/MedicaidPriorAuth 2. Refer to CHIP covered service exclusions in CHIP Member Handbook, Covered and Excluded Supplies
<p>Hearing and Audiology Devices and Services</p>	<ul style="list-style-type: none"> • Hearing Aids • Cochlear Device <ul style="list-style-type: none"> ○ Note: Surgeons requesting PA should contact TurningPoint Healthcare Solutions (URA #2395464) at: <ul style="list-style-type: none"> ▪ Phone: 1-855-336-4391 ▪ Fax: 1-214-306-9323
<p>Imaging Services</p>	<p>Diagnostic Imaging (CT, CTA, MRI, MRA, PET)</p> <ul style="list-style-type: none"> • Note: Contact Evolent Specialty Services, Inc. (URA #1777359) at: <ul style="list-style-type: none"> ○ Phone: 1-800-642-7554 ○ Fax: 1-800-784-6864 ○ Online: https://www1.radmd.com/
<p>Implantable Devices</p>	<ul style="list-style-type: none"> • Bone Anchor Hearing Aid (BAHA) • Neurostimulators • Osteogenesis stimulators • Prosthetic implants • Intraocular lens • Cochlear Implants <ul style="list-style-type: none"> ○ Note: Surgeons requesting prior authorization, contact TurningPoint Healthcare Solutions (URA #2395464) at: <ul style="list-style-type: none"> ▪ Phone: 1-855-336-4391 ▪ Fax: 1-214-306-9323 • Joint implant <ul style="list-style-type: none"> ○ Note: Evolent Specialty Services, Inc. (URA #1777359) at: <ul style="list-style-type: none"> ▪ Phone: 1-800-642-7554 ▪ Fax: 1-800-784-6864 ▪ Online: https://www1.radmd.com/

Prior Authorization Required Continued

Non-Emergent Medical Transportation	<ul style="list-style-type: none"> • Non-emergent air ambulance transportation • Non-emergent ambulance transportation <ul style="list-style-type: none"> ○ Note: The referring physician or facility must originate the request for prior authorization.
Medicine Services: Sleep Studies	Facility Based Sleep Studies and Multiple Sleep Latency Testing
Medicine Services: Therapy	<ul style="list-style-type: none"> • Cognitive Rehabilitative Services • In Home and Outpatient Physical, Speech and Occupational Therapy. For Outpatient requests contact Evolent Specialty Services, Inc. (URA #1777359) at: <ul style="list-style-type: none"> ○ Phone: 1-800-642-7554 ○ Fax: 1-800-784-6864 ○ Online: https://www1.radmd.com/ • Note: Prior authorization not required for ECI therapy, identified through ECI IFSP.
Pathology and Laboratory Services	<ul style="list-style-type: none"> • Quantitative Testing for Drugs of Abuse • Genetic Testing and Molecular Diagnostics <ul style="list-style-type: none"> ○ Note: Contact Evolent Specialty Services, Inc. (URA #1777359) at: ○ Phone: 1-800-642-7554 ○ Fax: 1-800-784-6864 ○ Online: https://www1.radmd.com/

Prior Authorization Requirements

Surgical Services and Procedures	<ul style="list-style-type: none"> • Circumcision (One year of age and older) • Oral Surgery • Reconstructive Procedures • Treatment of Varicose Veins • Vagus Nerve Stimulation • ENT Services: Nasal/Sinus Endoscopy, Tonsillectomy & Adenoidectomy, Tympanostomy, Myringotomy <ul style="list-style-type: none"> ○ Note: Contact TurningPoint Healthcare Solutions (URA #2395464) at: <ul style="list-style-type: none"> ▪ Phone: 1-855-336-4391 ▪ Fax: 1-214-306-9323 • Musculoskeletal Surgical Procedures <ul style="list-style-type: none"> ○ Note: Contact Evolent Specialty Services, Inc. (URA #1777359) at: <ul style="list-style-type: none"> ▪ Phone: 1-800-642-7554 ▪ Fax: 1-800-784-6864 ▪ Online: https://www1.radmd.com/
Surgical Services and Procedures: Transplants	Organ Transplant Evaluation and Procedures