

Services Requiring Prior Authorization Effective April 1, 2022 Health Insurance Exchange (HIX)

Service category	Service details	Who to contact for prior authorization review
General authorization	Services considered experimental, investigational, unproven or for research purposes, including all CPT category III codes	Network Health at 866-709-0019 or 920-720-1602
Inpatient admissions	Acute hospital	Network Health at 866-709-0019 or 920-720-1602
	Long term acute care (LTAC)	
	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	
Outpatient services from eviCore:	Cardiac diagnostics including: diagnostic cardiac catheterizations, nuclear cardiology scans, stress echocardiograms, transesophageal echocardiograms, transthoracic echocardiograms	eviCore at 855-727-7444 or myportal@evicore.com
*If any of these services	Computed tomography (CT) scans	
are being performed as	Cervical, lumbar and thoracic spine surgeries	
an inpatient, the procedure requires auth	Interventional pain injections and procedures	
through eviCore and the inpatient hospitalization	Magnetic resonance imaging (MRI) scans	
through Network Health	Magnetic resonance angiography (MRA) scans	
	Positron emission tomography (PET) scans	
	Molecular genetic lab testing	
	Medical oncology	
	Radiation oncology treatments	
	Shoulder, hip and knee procedures	
	DME: Electrical stimulation devices (spinal)	
	DME: Pain pumps	
	Physical Therapy and Occupational Therapy (outpatient, as well as in the home & therapy in a SNF provided as outpatient)	
	Gastroenterology (EGDs, Capsule Endoscopy, non-preventive colonoscopy)	

including evaluation, work-up and surgeries	Network Health at 866-709-0019 or 920-720-1602
CAR-t Cell Therapy	
Implantable cardioverter-defibrillator insertion or replacement	Network Health at 866-709-0019 or 920-720-1602
GERD (LINX)	
Orthognathic prognathic maxillofacial surgery	
Temporomandibular joint disorder (TMD) surgical services	
Transgender surgery; sex reassignment surgery	
Bariatric (weight loss) procedures	
Blepharoplasty, canthoplexy, canthoplasty and brow ptosis	Network Health at 866-709-0019 or 920-720-1602
Botox injections (auth required through CCUM)	
Breast implant removal/replacement	
Dermabrasion and chemical peel	
Liposuction and lipectomy	
Mammoplasty reduction or augmentation	
Otoplasty	
Panniculectomy and other excess skin removal	
Pectus excavatum repair	
Port wine stain removal	
Rhinoplasty, rhytidectomy	
Vein sclerosing and laser ablation	
Services that could be considered cosmetic	
Communication devices	Network Health at 866-709-0019 or 920-720-1602
Progressive stretch devices	
Cranial orthotics	
Hospital beds	
Lymphedema pumps, garments and pneumatic compression	
Mobile cardiac outpatient telemetry (MCOT)	
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	CAR-t Cell Therapy Implantable cardioverter-defibrillator insertion or replacement Magnetic sphincter augmentation procedures for the treatment of GERD (LINX) Orthognathic prognathic maxillofacial surgery Temporomandibular joint disorder (TMD) surgical services Transgender surgery; sex reassignment surgery Bariatric (weight loss) procedures Blepharoplasty, canthoplexy, canthoplasty and brow ptosis Botox injections (auth required through CCUM) Breast implant removal/replacement Dermabrasion and chemical peel Liposuction and lipectomy Mammoplasty reduction or augmentation Otoplasty Panniculectomy and other excess skin removal Pectus excavatum repair Port wine stain removal Rhinoplasty, rhytidectomy Vein sclerosing and laser ablation Services that could be considered cosmetic Communication devices Progressive stretch devices Cranial orthotics Hospital beds Lymphedema pumps, garments and pneumatic compression

DME for use at home (cont.):	Patient lifts (e.g., electric, Hoyer, hydraulic) Power operated vehicles and scooters	Network Health at 866-709-0019 or 920-720-1602
	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	
	Wheelchairs: manual, electric and customizations (K0001-K0004 do not require auth until month 4 or day 91 (KJ modifier required))	
	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 spine, eviCore reviews)	
	Neuromuscular stimulators for bowel and urinary conditions	
	Deep brain stimulators	
Other services	Facility-to-facility and/or non-emergent ambulance transfers	Network Health at 866-709-0019 or 920-720-1602
	Accidental Dental services	
	Hospital or ambulatory surgery center charges in conjunction with dental care	
	Skin Substitutes 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:

Individual and Family Plan member experience for benefits and

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

Health Insurance Exchange (HIX) member experience for benefits and eligibility.

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

Our new provider portal is now live! For 24/7 access to view benefits and eligibility, submit online authorization requests and more, please register at https://login.networkhealth.com.