Prior Authorization Guide



Procedures Requiring Prior Authorization

THE FOLLOWING LIST IS NOT ALL-INCLUSIVE. Please visit Ambetter.IlliniCare.com and use the "Pre-Auth Needed?" tool to determine if a service requires prior authorization.

Failure to obtain the required approval or pre-certification may result in a denied claim(s). All out-of-network (non-par) services require authorization, excluding ER, urgent care, and family planning.

ANCILLARY SERVICES

- Air ambulance transport (non-emergent fixed wing airplane)
- Home health care services, including home infusion, skilled nursing and therapy
- · Private duty nursing
- · Adult medical day care
- Hospice
- Furnished medical supplies and DME
- Orthotics/Prosthetics
- · Genetic testing
- Quantitative urine drug screen

OUT-OF-NETWORK PROVIDERS

 All out-of-network providers require prior authorization, excluding emergency room services.

PROCEDURES/SERVICES

- Potentially cosmetic
- Bariatric surgery
- · Experimental or investigational
- High tech imaging requests: RadMD.com
- High tech imaging administered by NIA, i.e., CT, MRI, PET
- Obstetrical ultrasound Two (2) allowed in 9 months; prior authorization required for additional u/s except if rendered by a perinatologist
- Pain management

INPATIENT AUTHORIZATION

All elective/scheduled admission notifications requested at least 5 days prior to the scheduled date of admit, including but not limited to:

- · Medical Admissions
- · Surgical Admissions
- All services performed in out-of-network facilities
- · Hospice Care
- · Rehabilitation Facilities
- · Transplants, not including evaluations
- · Observation:
 - Observation stays exceeding 23 hours require Inpatient Authorization/ Concurrent Review
 - Notification is required within 1 business day if admitted

- · Urgent/Emergent Admissions:
 - Within 1 business day following the date of admission
- Newborn deliveries must include birth outcomes
- Behavioral Health/Substance Use Disorder Admissions:
 - All behavioral health admissions require authorization within 24 hours of admission via a phone call to the Utilization Management department
- Partial Inpatient, PRTF, and/or Intensive Outpatient Programs

How to Secure Prior Authorization



LOG INTO OUR
SECURE WEB PORTAL

https://provider.illinicare.com



CALL

1-855-745-5507

FAX

MEDICAL

1-844-311-3746

BEHAVIORAL HEALTH

1-844-273-2331

Prior Authorization (PA) may be submitted by fax, phone, or website. After normal business hours and on holidays, calls are directed to the Plan's 24-hour nurse advice line. Notification of authorization will be returned by phone, fax, or Web.

QUESTIONS?

Call our Authorization department at 1-855-745-5507

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