

**PRIOR AUTHORIZATION REQUIREMENTS**

	Priority Health, PH Medicare & PH Medicaid	Blue Cross PPO/Medicare + Blue	Blue Care Network	United Healthcare	Humana	Cigna	Aetna PPO	McLaren Health Plan	Molina Healthcare of MI	Meridian	Upper Peninsula Health Plan	United Healthcare Medicaid	Tricare Prime	Generic Commercial	
<b>RADIOLOGY SERVICES</b>															
CT/CTA	X (even if secondary to auto, work comp or liability)	X	X	Per Plan/Call	X	X	X		X	x	X	X	Per Plan /Check Site	Per Plan / Call	
MRI		X	X	Per Plan/Call	X	X	X		X	X	X	X	Per Plan /Check Site	Per Plan / Call	
MRI 3D prostate (cpt 72197 /76377)		X	X	Per Plan/Call	X	X			X	X	X	X	X	Per Plan /Check Site	Per Plan / Call
MRA		X	X	Per Plan/Call	X	X	X		X	X	X	X	X	Per Plan /Check Site	Per Plan / Call
PET Scans	X	X	X	Per Plan/Call	X	X	X		X	X	X	X	Per Plan /Check Site	Per Plan / Call	
Cardiolite Stress tests	X	X	X	Per Plan/Call	X	X	X		X	X	X	X	Per Plan /Check Site	Per Plan / Call	
HIDA			X							X	X	X	Per Plan /Check Site	Per Plan / Call	
MUGA	X	X	X	Per Plan/Call	X	X	X		X	X	X	X	Per Plan /Check Site	Per Plan / Call	
<b>CDS/NC SERVICES</b>															
Echo/Stress Echo		X	X	Per Plan/Call	X	Per Plan/Call	Per Plan/Call			X	X	X	Per Plan /Check Site	Per Plan / Call	
<b>OTHER SERVICES</b>															
Bone Density											X	X	Per Plan /Check Site	Per Plan / Call	
Cardiac Rehab			X					X	X	X	X	X	Per Plan /Check Site	Per Plan / Call	
Occupational Therapy		X	X		X		X		X (after eval & 1st 6 visits)		X	X	Per Plan /Check Site	Per Plan / Call	
Outpatient Surgical	X	follow grid	follow grid	Per Plan Call	Per Plan/Call	Per Plan Call	Per Plan/Call	follow grid	follow grid	follow grid	X	X	Per Plan /Check Site	Per Plan / Call	
Pain Procedures	X	X	X		X	X			X		X	X	Per Plan /Check Site	Per Plan / Call	
Physical Therapy	X		X		X		X	X	X (after eval & 1st 6 visits)	X	X	X	Per Plan /Check Site	Per Plan / Call	
Pulmonary Rehab - Initial Service		X	X					X	X	X	X	X	Per Plan /Check Site	Per Plan / Call	
Sleep Study	X	X for BC PPO	X	Per Plan/Call	Per Plan/Call	Per Plan/Call	Per Plan/Call		X	X	X	X	Per Plan /Check Site	Per Plan / Call	
Sleep Follow Up			X						X		X	X	Per Plan /Check Site	Per Plan / Call	
<b>AUTHORIZATION METHODS</b>															
Phone Number	Evicore 844-303-8456	AIM 800-728-8008	BCN ereferral 800-392-2512	877-842-3210	800-448-6262	800-882-4462 humana advantage	888-632-3862	888-327-0671	888-898-7969	800-845-8959	800-835-2556	800-903-5253	877-874-2273		
Alternate Phone		800-845-5982 Pulm Rehab	Evicore 855-774-1317			800-833-6917 commercial	PT/OT 800-771-3205								
Web	<a href="https://www.providerportal.com/Default.aspx">https://www.providerportal.com/Default.aspx</a>	<a href="https://www.providerportal.com/Default.aspx">https://www.providerportal.com/Default.aspx</a>	<a href="https://www.evicore.com/">https://www.evicore.com/</a>	<a href="http://www.unitedhealthcareonline.com">unitedhealthcareonline.com</a>	<a href="http://healthhelp.com">healthhelp.com</a>				<a href="http://www.evicore.com/molina-welcare.com">Evicore.com/molina-welcare.com</a>	<a href="http://RADMD.com">RADMD.com</a>					
Information	<a href="http://www.priorityhealth.com/provider/manual/aut/hs/authlist">http://www.priorityhealth.com/provider/manual/aut/hs/authlist</a>														

The tests listed above are not the only tests that require prior-authorization. The tests listed above are the ones known to require prior-authorization with the insurances listed. Commercial, Medicaid HMO and Out of State BCBS insurances not listed here should be called for benefits on every high-dollar test in order to determine prior-authorization requirements. Because of the clinical information required by most insurance companies for a pre-authorization, it is the patient and the provider who are responsible for beginning the prior-authorization process.