

Below is a listing of some services that require prior authorization. Failure to prior authorize these services will result in unnecessary claim denials. To request authorization call *Välenz Health* or submit the appropriate request form by:

Phone or toll-free:	Fax or email:	Website:
<b>1-844-408-3108</b> or <b>1-877-608-2200</b>	<b>1-863-333-4417</b> or <a href="mailto:carecustomerservice@valenzhealth.com">carecustomerservice@valenzhealth.com</a>	<a href="http://www.valenzhealth.com/login/">www.valenzhealth.com/login/</a>



## Procedures

- Bariatric Treatment
- Capsular Endoscopy
- Cochlear Implants
- Cyber Knife
- Cartilaginous Defect Procedures  
(*ACI -Autologous Chondrocyte Implantation, Mosaic plasty, OATS - Osteochondral Autograft*)
- Fetal Surgeries
- Genetic Testing
- Obstructive Sleep Apnea Treatment including surgical procedures
- Oral Surgery (*biopsies or treatment of oral lesions by oral surgeons, Orthognathic Surgery*)
- Proton Beam Treatment
- Radiology - MRI, MRA, CT, PET, Nuclear Medicine, Nuclear Cardiology, 3D Rendering
- Sclerotherapy
- Sinus Endoscopy with Balloon Dilation
- Spine Surgeries (*Artificial Disc, Dorsal Column Stimulators, Spinal Fusions*)
- Total Hips and Knees



## Outpatient Services

- ABA Therapy
- Behavioral Health Testing
- Home Health Services  
(*Including Drugs*)
- Hospice
- Hyperbaric Oxygen
- IOP & Partial Hospital Programs
- Medical drug preferred formulary drugs
- Out of Network Referrals
- Pain management injection
- Sleep Studies
- Specified joint procedures and surgery
- Spine and neck procedures and surgery
- TPN (*Total Parenteral Nutrition and Home Infusion*)
- Transplantation Services



## Reconstructive Procedures

- Abdominoplasty
- Blepharoplasty/Brow Suspension
- Breast Reconstruction
- Mandibular/maxillary reconstruction due to trauma or congenital anomalies
- Scar Revisions or other reconstructive procedures
- Nasal Fracture Repair
- Reduction Mammoplasty
- Rhinoplasty



**Durable Medical Equipment** *Durable medical equipment is subject to change. Contact PHP Medical Management with questions or to authorize services.*

- AED Garments
- Bi-pap Machines
- Chest Percussion Vest
- CPAP Machines
- CPM Machines
- Custom made oral sleep apnea appliances (*by oral surgeons*)
- Enteral Feedings
- Hospital Beds
- Insulin Pumps
- Lift Chairs
- Oxygen Systems
- Pain Pumps (*I-Flow, etc.*)
- Pneumatic Lymphadema Treatment Devices
- Prosthetics
- Pressure Relief Devices
- Standing Frames
- Stimulators-Bone Growth, Muscle, Neuro, Sacral, Pain
- UV Lights
- Ventilators
- Wigs
- Wheelchairs & Accessories



**Medications** *See documents below for current listings of medications that require prior authorization:*

- **For Providers:** Prior Auth Drug List
- **For Members:** Drugs that Require Prior Auth
- **Medication** delivered to doctor office/pain pump



## Inpatient Services

- All Inpatient Admissions (*including Rehab, Behavioral Health, Hospice, Skilled Nursing, Transitional Care*)
- High Risk OB (*please notify PHP by the 2<sup>nd</sup> trimester*)
- Multiple Births

## Off-plan referral requirements

For referrals to non-participating providers, organizations, or facilities to be considered for coverage, the request for prior authorization of services or care **MUST** be:

1. Submitted at least three (3) working days prior to the scheduled service; **AND**
2. Not available through a PHP participating provider; **AND**
3. Approved by PHP prior to services being rendered.

## Pharmacy prior authorization

- Contact PHP's Pharmacy Department at **260-432-6690, ext. 339** for a list of prescription drugs that require prior authorization.
- Routine updates are provided to the physician's office through **PHARMACY-FACTS**.