WHAT SERVICES REQUIRE PRIOR AUTHORIZATION THROUGH PHP’S UTILIZATION MANAGEMENT?

- **Ambulatory Surgery Procedures** *
  - Abdominoplasty
  - Blepharoplasty
  - Mastoplexy
  - Otoplasty
  - Keloid & Scar Revisions
  - Mammaplasty, Reduction or Augmentation
  - Surgical Treatment of Gynecomastia
  - ENT Procedures (Rhinoplasty, Septoplasty, Uvoluplasty, LAUP)
  - Varicose Veins Treatment
  - Ventral Hernias
  - Bariatric Surgery

- **Home Health Care Services**
  - Does not include CDPAS & PCA as IDT team will approve
  - Initial Assessment – Nursing, OT, PT, Speech, Nutritional Counseling and Pulmonary Therapies no auth required

- **Home Infusion Services**

- **Inpatient Admissions** *
  - Acute Care Facilities, including Inpatient OBGYN
  - Skilled Nursing Facilities / Nursing Home
  - Behavioral Health Care Facilities
  - Elective Admissions
  - Urgent / Emergent Admissions
  - Substance Abuse and Rehabilitation
  - Inpatient Rehabilitation Facilities

- **Medical Social Services** *

- **Nerve Block / Epidurals** *

- **Organ Transplant Evaluation & Services** *

* Service requires authorization during Participant’s 90-day continuity of care period *
WHAT SERVICES REQUIRE PRIOR AUTHORIZATION THROUGH PHP’S UTILIZATION MANAGEMENT?
(continued)

❖ Radiology *
   MRI
   Functional MRI
   MRA
   PET

❖ Rehabilitation Services – Outpatient
   Physical Therapy
   Occupational Therapy
   Speech Therapy
   Pulmonary & Cardiac Rehabilitative Therapy
   Nutritional Counseling

❖ Private Duty Nursing

❖ Outpatient Services * (below services only)
   Chiropractic Services
      No PA required for subluxation of spine.
      Any other services require prior auth
   Podiatry – 4 Annual Visits
      4 routine visits covered per year without UM review.
      All other podiatry visits will require UM approval

❖ Other Services *
   Hyperbaric Oxygen Treatment
   Investigation & Experimental Treatment

HOW DOES A PROVIDER OBTAIN PRIOR AUTHORIZATION FOR THESE SERVICES?

❖ Obtain the Prior Authorization Request Form from our website
   http://phpcares.org/providers/provider-materials

❖ Complete the form and fax, along with all pertinent clinical information, to Utilization Management at 855-769-2509
❖ Call Utilization Management if you have any questions at 855-769-2508

* Service requires authorization during Participant's 90-day continuity of care period *
WHAT SERVICES REQUIRE PRIOR AUTHORIZATION THROUGH PHP’S DURABLE MEDICAL EQUIPMENT (DME) TEAM?

- DME and Medical Supplies
- Prosthetics
- Orthotics
- Enteral Nutrition
- Continuous Glucose Monitors (CGMs)

HOW DOES A PROVIDER OBTAIN PRIOR AUTHORIZATION FOR THESE SERVICES?

- Fax request and clinical documentation to 646-948-1027
- For Continuous Glucose Monitors, obtain the CGM Request Form from our website
  Complete the form and fax, along with all pertinent clinical information, to PHP’s dedicated DME team at 646-948-1027
- Call PHP’s DME team if you have any questions at 646-455-1594

* Service requires authorization during Participant's 90-day continuity of care period *
WHAT SERVICES REQUIRE PRIOR AUTHORIZATION THROUGH PHP’S CARE COORDINATION TEAM?

- Adult Day Health Care
- Assertive Community Treatment
- Continuing Day Treatment
- Consumer Direction Personal Assistance Services (CDPAS)
- Personalized Recovery Oriented Services
- Personal Care Services
- Personal Emergency Response Services
- Office for People with Developmental Disabilities (OPWDD) Home and Community-Based (HCBS) Waiver Services