

Prior Authorization Guide

SERVICES	WHAT REQUIRES PRIOR AUTHORIZATION
Acute Inpatient	Acute Inpatient Hospital Care, Acute Rehabilitation Facility, including all professional services All elective admissions, including all professional services Note: Urgent/Emergency admissions require 24-hour notification
Clinical Trials	Clinical Trials
Dialysis	Standing Referral Available. For more information on Standing Referral, see Plan's Website: www.vchealthcareplan.org
DME	DME (Durable Medical Equipment)
Genetic and Infertility Services	Genetic and Infertility Services
Home Health & Hospice Services	Home Health & Hospice Services
Infusions	Infusions
Maternity (Vaginal or Caesarean Delivery)	Additional length of stay beyond the federally required timeframes for vaginal deliveries and caesarean deliveries require concurrent review for medical necessity determination. Note: maternity services (vaginal or caesarean delivery) do not require prior authorization. Newborns' and Mothers' Health Protection Act (NMHPA) The Newborns' and Mothers' Health Protection Act of 1996 (NMHPA) is a federal law that affects the length of time a mother and newborn child are covered for a hospital stay in connection with childbirth. In general, group health plans and health insurance issuers that are subject to NMHPA may NOT restrict benefits for a hospital stay in connection with childbirth to less than 48 hours following a vaginal delivery or 96 hours following a delivery by cesarean section. If you deliver your baby in the hospital, the 48-hour (or 96-hour) period starts at the time of delivery. If you deliver your baby outside the hospital and you are later admitted to the hospital in connection with childbirth (as determined by the attending provider), the period begins at the time of the hospital admission.
Orthotics & Prosthetics	Orthotics & Prosthetics
Outpatient/Inpatient: Behavioral Health Services	[Including Chemical Dependency/Substance Use Disorder] Member contacts BH Administrator/Life Strategies – contact the main number.

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Pain Management Program	Pain Management Office Procedures Only
Skilled Nursing Facility	Skilled Nursing Facility
Therapy Services	Physical Therapy beyond 24 visits. Occupational Therapy beyond 24 visits
Sleeping Disorders	CPAP machine, BIPAP machine, related surgery (UP3, etc.) (Note: CPAP/BIPAP supplies no longer require prior authorization effective 1/1/19)
Specialty Medications	Specialty medications such as Self Injectable Certain high-cost, complex specialty medications are managed by "Accredo" – some of these medications may require PA
Surgery – Inpatient or Outpatient	Urgent or Elective Surgeries in Surgical Facility
Tertiary Referrals	Tertiary Referrals (e.g. UCLA and CHLA), Perinatology Referrals

A. Review & Revision History:

Reviewed/Updates by: Faustine Dela Cruz, RN, Catherine Sanders, MD
Committee Review: UMC: February 9, 2017; QAC: February 28, 2017

Reviewed/No Updates by: Faustine Dela Cruz, RN, Catherine Sanders, MD
Committee Review: UMC: February 8, 2018; QAC: February 27, 2018

Reviewed/Updated by Faustine Dela Cruz, RN, Catherine Sanders, MD & Robert Sterling, MD on February 2018
Committee Review: UM: May 10, 2018; QAC May 29, 2018

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Reviewed/Updated by Faustine Dela Cruz, RN & Robert Sterling, MD on November 2018
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Committee Review: UM: August 8, 2019; QAC August 27, 2019

Reviewed/No Updates by: Faustine Dela Cruz, RN, Howard Taekman, MD
Committee Review: UMC: February 13, 2020; QAC: February 25, 2020

Reviewed/No Updates by: Faustine Dela Cruz, RN, Howard Taekman, MD
Committee Review: UMC: February 11, 2021; QAC: February 23, 2021

Reviewed/No Updates by: Faustine Dela Cruz, RN, Howard Taekman, MD
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Reviewed/No Updates by: Faustine Dela Cruz, RN, Howard Taekman, MD

Committee Review: UMC: February 8, 2024; QAC: February 27, 2024

Reviewed/No Updates by: Faustine Dela Cruz, RN, Howard Taekman, MD

Committee Review: UMC: February 20, 2025; QAC: February 25, 2025

Revision Date	Content Revised (Yes/No)	Contributors	Review/Revision Notes
2/9/17	Yes	Catherine Sanders, MD; Robert Sterling, MD, Faustine Dela Cruz, RN	Annual review; updated with expansion of specialists for direct referral. Maternity for vaginal or C-section no concurrent or prior authorization required upon inpatient admission and observation for VCMC facilities ONLY. Authorization required for all other non VCMC facilities. Clarified that observation not needing authorization for VCMC facilities ONLY. No prior authorization required for VCMC pain management
2/8/18	No	Catherine Sanders, MD; Robert Sterling, MD, Faustine Dela Cruz, RN	Annual review
5/3/18	Yes	Catherine Sanders, MD; Robert Sterling, MD, Faustine Dela Cruz, RN	Added: Emergency Room (ER) physicians may now directly refer members to Orthopedics specialty for urgently required consultation.
5/29/18	Yes	Catherine Sanders, MD; Robert Sterling, MD, Faustine Dela Cruz, RN	Added nutritional counseling to direct referral.
8/8/18	Yes	Catherine Sanders, MD; Robert Sterling, MD, Faustine Dela Cruz, RN	VCMC Pain Management Specialists and VCMC Physical Medicine and Rehabilitation Specialist (PM&R) can directly refer members for pain management injections to Santa Paula Hospital Interventional Radiology
10/11/18	Yes	Robert Sterling, MD, Faustine Dela Cruz, RN	Effective 1/1/19, updated - exclusion for direct referral to contracted Non-VCMC Pain Specialists to office procedures ONLY. Office visits to contracted Non-VCMC Pain Specialists can be directly referred by PCPs.
10/11/18	Yes	Robert Sterling, MD, Faustine Dela Cruz, RN	Effective 1/1/19 For PT providers only: Additional 16 physical therapy visits beyond the initial eight (8) direct referral visits will NO LONGER require prior authorization. Requests for additional therapy beyond the 24 visits will require prior authorization with a submission of a TAR form including the initial therapy evaluation and treatment notes.

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			For OT providers only: Additional 16 occupational therapy visits beyond the initial eight (8) direct referral visits will NO LONGER require prior authorization. Requests for additional therapy beyond the 24 visits will require prior authorization with a submission of a TAR form including the initial therapy evaluation and treatment notes.
2/14/19	Yes	Catherine Sanders, MD; Robert Sterling, MD, Faustine Dela Cruz, RN	CPAP/BIPAP supplies no longer require prior authorization effective 1/1/19.
3/14/19	Yes	Robert Sterling, MD, Faustine Dela Cruz, RN	Observation for Contracted (Including Tertiary) and Non-Contracted Facilities Including Labor & Delivery Observation no longer requires prior authorization effective 3/14/19
3/20/19	Yes	Robert Sterling, MD, Faustine Dela Cruz, RN	Cleaned document to only have those services that require prior authorization; removed services that are direct referral and those services that do not require prior authorization.
6/12/19	Yes	Robert Sterling, MD, Faustine Dela Cruz, RN	Added – including all professional services associated with acute inpatient requires prior authorization
2/13/20	No	Howard Taekman, MD Robert Sterling, MD, Faustine Dela Cruz, RN	Annual review
2/11/21	No	Howard Taekman, MD Robert Sterling, MD, Faustine Dela Cruz, RN	Annual review
2/17/22	No	Howard Taekman, MD Robert Sterling, MD, Faustine Dela Cruz, RN	Annual review
11/10/22	Yes	Howard Taekman, MD Robert Sterling, MD, Faustine Dela Cruz, RN	Contracted Non-VCMC pain management specialists no longer requires prior authorization for pain management office procedures
2/2/23	No	Howard Taekman, MD Robert Sterling, MD, Faustine Dela Cruz, RN	Annual review
11/9/23	Yes	Howard Taekman, MD Robert Sterling, MD, Faustine Dela Cruz, RN	Removed “Authorization (concurrent review or prior authorization) NOT Required Upon Inpatient Admission for VCMC facilities ONLY if within the timeframes listed below. Authorization is required for inpatient admission for all other facilities.” under Maternity (Vaginal or Caesarean Delivery)
2/8/24	No	Howard Taekman, MD Robert Sterling, MD, Faustine Dela Cruz, RN	Annual review
2/20/25	No	Howard Taekman, MD Robert Sterling, MD,	Annual review

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