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**Important note:** All <u>eviCore</u> prior authorizations are submitted through the <u>eviCore</u> website, using a simple, easy-to-use application. Proper submission ensures timely processing.

| Services                                                                                                                | Authorization required through the provider portal | Authorization required through eviCore. |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------------|
| Acute rehabilitation Admissions                                                                                         | Provider Portal                                    |                                         |
| Advanced radiology services (CT, MRI, PET scans, stress echocardiography, cardiac nuclear medicine imaging, 3D imaging. |                                                    | eviCore                                 |
| Air Ambulance                                                                                                           | Provider Portal                                    |                                         |
| Automatic<br>Implantable<br>Cardioverter<br>Defibrillators<br>(AICD)                                                    |                                                    | eviCore                                 |
| Some potentially cosmetic services                                                                                      | Provider Portal                                    |                                         |
| Durable Medical<br>Equipment (DME)<br>\$500 and over,<br>and all DME<br>rentals                                         | Provider Portal                                    |                                         |

Thank you for being a valued provider for members in one or more of our health plans: Health Partners Plans Medicaid and CHIP plans, Jefferson Health Plans Medicare Advantage, and/or Jefferson Health Plans Individual and Family Plans.





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|------------------------------------------------------|----------------------------------------------------|-----------------------------------------|
| Elective<br>hospitalization                          | Provider Portal                                    |                                         |
| Endovascular<br>ablation of<br>varicose veins        | Provider Portal                                    |                                         |
| Facility based<br>Sleep<br>Management                | Provider Portal                                    |                                         |
| Hearing aids and related accessories \$500 and over. | Provider Portal                                    |                                         |
| Home Services                                        | Provider Portal                                    |                                         |
| Inpatient hospice                                    | Provider Portal                                    |                                         |
| NICU and/or<br>detained<br>Newborns                  | Provider Portal                                    |                                         |

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|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------|
| Non-oncology<br>high-cost<br>injectable drugs<br>including gene<br>therapy.                      | Provider Portal  Policy Bulletin Library. Scroll down to the  Drug section.      |                                         |
| Pharmacy specific drug prior authorizations                                                      | Provider Portal - <u>Drug Specific Prior Authorizations 2024</u> (Medicaid/CHIP) |                                         |
| Services,<br>procedures,<br>items, or drugs<br>considered to be<br>new or emerging<br>technology | Provider Portal                                                                  |                                         |
| Services,<br>procedures<br>performed by<br>non-participating<br>providers                        | Provider Portal                                                                  |                                         |
| Skilled Nursing<br>Admissions                                                                    | Provider Portal                                                                  |                                         |
| Transfer to non-<br>participating<br>facilities                                                  | Provider Portal                                                                  |                                         |

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|-------------------------------------------|----------------------------------------------------|-----------------------------------------|
| Whole Genome<br>Whole Exome<br>Sequencing | Provider Portal                                    |                                         |

<sup>\*</sup>Vascular surgery includes AAA resection, grafts and endovascular repair; Carotid angioplasty, endarterectomy and stent; Peripheral artery bypass and endovascular intervention; Renovascular angioplasty; and Thoracic and Thoracoabdominal aortic aneurysm repairs.