

# Prior Authorization Guide



FROM | **sunshine health.**  
Insured by Celtic Insurance Company

## Procedures Requiring Prior Authorization

**THE FOLLOWING LIST IS NOT ALL-INCLUSIVE.** Please visit [Ambetter.SunshineHealth.com](http://Ambetter.SunshineHealth.com) and use the “Pre-Auth Needed?” tool to determine if a service requires Prior Authorization.

Failure to obtain the required approval or pre-certification may result in a denied claim(s).

**All out-of-network (non-par) services require authorization, excluding ER, urgent care, and family planning.**

### ANCILLARY SERVICES

- Air ambulance transport  
(*non-emergent fixed wing airplane*)
- Durable Medical Equipment
- Home health care services including home infusion, skilled nursing and therapy
- Home Health Services
- Private Duty Nursing
- Adult Medical Day Care
- Hospice
- Furnished Medical Supplies and DME
- Orthotics/Prosthetics
- Genetic testing
- Quantitative urine drug screen

### OUT-OF-NETWORK PROVIDERS

- All out-of-network providers require prior authorization excluding emergency room services

### PROCEDURES/SERVICES

- Potentially cosmetic
- Bariatric surgery
- Experimental or investigational
- High tech imaging requests: RadMD.com
- High tech imaging administered by NIA, i.e. CT, MRI, PET
- Obstetrical ultrasound — Two allowed in nine months; prior authorization required for additional u/s except if rendered by a perinatologist
- Pain management

### INPATIENT AUTHORIZATION

All elective/scheduled admission notifications requested at least five days prior to the scheduled date of admit including but not limited to:

- Medical Admissions
- Surgical Admissions
- All services performed in out-of-network facilities
- Hospice Care
- Rehabilitation facilities
- Behavioral Health/Substance Use Disorder
- Transplants, not including evaluations
- Observation:
  - Observation stays exceeding 23 hours require Inpatient Authorization/ Concurrent Review
- Notification is required within one business day if admitted
- Urgent/Emergent Admissions
- Within one business day following the date of admission
- Newborn Deliveries must include birth outcomes
- Behavioral Health Admissions
- All behavioral health admissions require authorization within 24 hours of admission via a phone call to the utilization management department
- Partial Inpatient, PRTF, and/or Intensive Outpatient Programs

## How to Secure Prior Authorization



### LOG INTO OUR SECURE WEB PORTAL

<https://provider.sunshinestatehealth.com>



### CALL

1-877-687-1169

### FAX

### MEDICAL

1-855-678-6981

### BEHAVIORAL HEALTH

1-855-279-6165

Prior Authorization (PA) may be submitted by fax, phone, or website. After normal business hours and on holidays, calls are directed to the plan's 24-hour nurse advice line. Notification of authorization will be returned by phone, fax, or web.

### QUESTIONS?

Call our Prior Authorization department at 1-877-687-1169