



## **PROVIDER NOTICE**

### **Prior Authorization Requirement Reinstated**

**This notice is to remind providers that Health Plus reinstated the prior authorization requirement for all specialty visits and MRIs performed on or after March 1, 2005.**

Prior authorization is now required for **all specialist visits, except for the following**:

- **Obstetrics/gynecology**
- **Family planning**
- **Optometry**
- **Audiology**
- **Dental care**
- **Routine radiology (i.e. x-ray, CAT scan)\***
- **Routine laboratory (diagnostic) and allergy testing\***
- **Mental health and substance abuse (initial visit only)**

Prior authorization for specialist visits must be obtained by the member's Primary Care Physician (PCP). This applies to all PCPs, including private office-based, hospital or health center based, or IPA network providers.

For MRI and PET scan referrals, prior authorization is required and can be obtained either by the member's PCP or any other participating provider.

\*If you are a specialist and bill Health Plus for an office visit in conjunction with a routine diagnostic test, then the member must have prior authorization from Health Plus for the visit.

Further Information on completing referrals and a sample referral form are enclosed.

### **CLIA Certificates Required**

**Also effective immediately, Health Plus providers seeking to perform non-CLIA waived tests in their offices will be required to have a CLIA certificate on file with Health Plus in order to be reimbursed for the service.**

If you have any questions regarding the Health Plus prior authorization or CLIA Certificate requirements, please call the Health Plus Provider Service Line at 1-800-450-8753.