



August 17, 2015

**IMPORTANT PRIOR AUTHORIZATION UPDATE**

RE: Updates to Benefit Authorization Requirements for Health Choice Generations

Dear Healthcare Provider:

In response to your feedback on recent changes to our prior authorization requirements, we have revised these requirements further to make them less restrictive.

Effective **August 18, 2015**, the following changes to our prior authorization requirements have been implemented:

Benefit	Prior Authorization Requirements
Cardiology specialist office visit	<u>No</u> Prior Authorization Required Refer to existing PA requirements for cardiac testing and procedures in the PA Grid
ENT (Otolaryngology) specialist office visit	<u>No</u> Prior Authorization Required
Orthopedic services	<u>No</u> Prior Authorization Required Refer to existing PA requirements for surgical procedures in the PA Grid
Neurology specialist office visit	<u>No</u> Prior Authorization Required Refer to existing PA requirements for neuro diagnostic testing in the PA Grid
Ophthalmology/ Optometry	<u>No</u> Prior Authorization Required for (i) treatment of foreign bodies in the eye and diabetic eye exams.
Percussion Vests	<u>No</u> Prior Authorization Required

For dates of services August 17th and earlier, the existing PA requirements apply, where applicable.

We invite you to visit our website ([www.hcgenerations.com](http://www.hcgenerations.com)) under the Provider Tab at the “Important Notice to Providers” and “Commonly Used Forms” landing pages to retrieve the most current version of our Prior Authorization Guidelines Document.

As always, thank you for your continued partnership and commitment to quality service.

If you have any questions, please contact your Provider Service Representative.

Sincerely,  
Health Choice Management

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