



AlohaCare Prior Authorization Direction/Fact Sheet

Effective June 1, 2007, AlohaCare will institute a new streamlined prior authorization process. The following are the details related to Aloha Care's new prior authorization/referral process:

<p>Heart surgery</p> <ul style="list-style-type: none"> Heart surgeries (including vessels) no longer require a prior authorization. Please note that any procedure coded as "unlisted" will continue to need a prior authorization. Inpatient procedures continue to require notification via the hospital inpatient face sheet.
<p>Removal of Stents</p> <ul style="list-style-type: none"> Removal of all stents will no longer require a prior authorization
<p>Ultrasounds (Pregnancy)</p> <ul style="list-style-type: none"> Included on global payment are now 3 OB Ultrasounds. Prior auth still required for the 4th and beyond.
<p>Global OB Payment Policy</p> <ul style="list-style-type: none"> Vaginitis, UTI, URI, hypertension, toxemia, and low back/pelvic pain complaints are no longer included in the AlohaCare Global OB Payment Policy. Should a provider care for a member with the above diagnosis, please bill AlohaCare with the appropriate E&M code and AlohaCare will pay for the service outside the Global OB inclusive payment structure. Aloha Care's new Global OB Payment Policy now states that payment is for "Services for common pregnancy-related conditions occurring during pregnancy such as vaginal spotting, Braxton – Hicks contractions, gestational diabetes, hyperemesis, preterm labor and premature rupture of membranes."
<p>Diagnostic D&C</p> <ul style="list-style-type: none"> No longer requires a prior authorization.
<p>Cervical cerclage</p> <ul style="list-style-type: none"> No longer requires a prior authorization.
<p>LEEPs and Colposcopies</p> <ul style="list-style-type: none"> No longer requires a prior authorization.
<p>Breast Excision, Biopsies and Mastectomies</p> <ul style="list-style-type: none"> No longer requires a prior authorization. Please note that all prophylactic mastectomies and mastectomies for gynecomastia will continue to require a prior authorization.
<p>Imaging Services (MRI's and MRA's of the Brain, Head, and Neck)</p> <ul style="list-style-type: none"> Code range 70540-70553 do not require PA all other MRI's and MRA's need PA
<p>Fractures and Removal of Hardware</p> <ul style="list-style-type: none"> No longer requires a prior authorization.
<p>Amputations</p> <ul style="list-style-type: none"> No longer requires a prior authorization. AlohaCare encourages providers to contact Aloha Care's Case management department to assist with transitioning the member smoothly back to the home setting.
<p>Hernias</p> <ul style="list-style-type: none"> No longer requires a prior authorization.
<p>Colonoscopy and Sigmoidoscopy</p> <ul style="list-style-type: none"> No longer requires a prior authorization. AlohaCare encourages providers to contact AlohaCares Case Management department with any abnormal findings so that the AlohaCare Case Manager can assist you in care managing the member.
<p>Eye surgeries</p> <ul style="list-style-type: none"> No longer requires a prior authorization. Please note that ptosis of the eye lids, pterygium and adult strabismus will continue to require a prior authorization.
<p>Digital Hearing Aids for Children (EPSDT age-thru 20 years of age)</p> <ul style="list-style-type: none"> AlohaCare encourages providers to use more conventional hearing aids where appropriate, however, should there be a clinical need for a Digital Hearing Aid for a EPSDT aged child, this type of hearing aid will no longer need a prior authorization.

Behavioral Health Services

THERAPY and MEDICATION MANAGEMENT

The process through which providers access Behavioral Health Services is undergoing revision for providers of therapy and providers of medication management services:

- For **all** of these providers: the Initial Diagnostic Assessment [90801], for up to two[2] hours, will no longer require prior authorization.
- For **all** of these providers: once an Initial Diagnostic Assessment has been completed the provider will then notify AlohaCare of the event via submission of a completed registration form [copies to be routinely disseminated to providers].
- For **therapy** providers; once the completed registration form has been submitted to the Plan, up to twelve therapy sessions may then be provided to the member without need for without need for additional authorization.
- For providers of **only** medication management [90862's] : Once the completed registration form has been submitted to the Plan, no further authorization procedure is required for this service