



Dear Provider:

HTA recognizes the hard work done by physicians and their staff in obtaining authorization for our Medicare Advantage patients. We are working to simplify the process for you and our internal teams, while focusing on authorizations that result in our mutual patients getting the right care, at the right time, in the right setting.

For this reason, HTA staff and Medical Directors have **greatly reduced the number of procedures that require prior authorization**. We have removed over 2,000 codes from the 2019 Prior Authorization List.

Before you submit an Authorization Request, be sure to check the updated list. This will greatly reduce the workload of your staff and will allow HTA to continue to respond as quickly as possible to the procedures that do require prior authorization. **Please do NOT request authorization on procedures that are no longer on the list.**

Please check the Prior Authorization List for specific procedures, but below are some of the major changes:

- Only select inpatient procedures require prior authorization
 - Cosmetic Surgery
 - Bariatric Surgery
 - Spinal Surgery
 - Transplant Surgery Related Testing
 - Notification of admission is required when the member admits for the procedure (inpatient and observation status)
- Several Outpatient/Inpatient Procedures no longer require prior authorization
 - Imaging: MRI, CI, PET
 - Orthopedic Surgeries: Hip, Knee, Shoulder
 - Breast Reconstruction unless considered cosmetic
- The following inpatient stays ALWAYS require prior authorization:
 - Behavior Health
 - Skilled Nursing Facility
 - Long Term Acute Care
 - Inpatient Rehab Facility
 - Any admission to an acute care hospital requires notification to Utilization Management
- Experimental/Clinical Research: Experimental medical and surgical procedures, equipment and medications may be covered under a Medicare-approved clinical research study or by HealthTeam Advantage. Experimental codes are not covered by the health plan. Services that are associated with the experimental treatment may be covered, but do not require a prior authorization. Notification must be made to the HealthTeam Advantage before participating.

We are pleased to announce these positive changes. As always, please refer to the specific Prior Authorization List for detailed instructions.

Please reach out to your Practice Relations team with questions at providerconciierge@healthteamadvantage.com or (336) 663-5340.

Sincerely,

HealthTeam Advantage