



UPDATES TO PRIOR AUTHORIZATION GUIDELINES Effective September 15, 2016

August 15, 2016

Dear Care1st and ONECare Providers and Staff:

Please note the following changes effective 9/15/2016.

- *Attachment I: J Codes and Injectables Requiring Authorization* is refreshed with multiple additions and deletions. *Additional injectables are listed after the J codes.*
- *Other changes as listed below*

Item	Description	Added to
Home Health	Special Comments Updated to include "Prior auth is required when Care1st is 2ndary unless Medicare is primary"	Home Health Category, page 2
Outpatient Procedures	Special Comments updated to include "Injectables listed on Attachment I also require prior auth when performed in an outpatient hospital setting"	Outpatient Procedures Category, Page 2
Specialist	Genetics	Specialist Category, Page 3
Transplants	Notification also required when Care1st is 2ndary, including a completed AHCCCS Solid Organ Transplant request sheet	Transplant Category, Page 3
Wound Care	Wound Vacs – Obtain by contacting Plan’s preferred provider.	Wound Care Category, Page 3
Behavioral Health	Intensive Outpatient Program – Removed PA requirement for ONECare & Care1st Adult Dual Eligible	Behavioral Health, Page 4
29868	Arthroscopy, knee, surgical; meniscal transplantation	Attachment II: ASC Procedures
31299	Unlisted procedure, accessory sinuses	Attachment II: ASC Procedures
43210	Esophagogastroduodenoscopy, flexible ;esophagogastric fundoplasty	Attachment II: ASC Procedures
63210	Injection(s), of diagnostic or therapeutic; cervical or thoracic	Attachment II: ASC Procedures
64461	Paravertebral block (PVB) (paraspinous block), thoracic; single	Attachment II: ASC Procedures
64462	Paravertebral block (PVB) (paraspinous block), thoracic; second	Attachment II: ASC Procedures
64463	Paravertebral block (PVB) (paraspinous block), thoracic	Attachment II: ASC Procedures
64616	Chemodenervation of muscle(s); neck muscle(s),	Attachment II: ASC Procedures
64617	Chemodenervation of muscle(s); larynx, unilateral, percutaneous	Attachment II: ASC Procedures
65785	Implantation of intrastromal corneal ring segments	Attachment II: ASC Procedures
36475	Endovenous ablation therapy of incompetent vein, extremity, radiofrequency	Attachment III: In-Office Procedures
36478	Endovenous ablation therapy of incompetent vein, extremity, laser	Attachment III: In-Office Procedures
64461	Paravertebral block (PVB) (paraspinous block), thoracic; single	Attachment III: In-Office Procedures
64462	Paravertebral block (PVB) (paraspinous block), thoracic; second	Attachment III: In-Office Procedures
64463	Paravertebral block (PVB) (paraspinous block), thoracic	Attachment III: In-Office Procedures

The updated Guidelines are available at www.care1st.com/az in the following location:

Care1st > Providers > Prior Authorization Guidelines and Criteria

Thank you!

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Visit our website at www.care1st.com/az

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