

Prior Authorization Guidelines and eviCore services - CHIP

The services listed in the table below require prior authorization as a condition of payment.

Important note: All [eviCore](#) prior authorizations are submitted through the [eviCore](#) website, using a simple, easy-to-use application. Proper submission ensures timely processing.

Services	Authorization required through the provider portal	Authorization required through eviCore
Acute rehabilitation Admissions	Provider Portal	
Advanced radiology services (CT, MRI, PET scans, stress echocardiography, cardiac nuclear medicine imaging, 3D imaging.		eviCore
Air Ambulance	Provider Portal	
Automatic Implantable Cardioverter Defibrillators (AICD)		eviCore
Some potentially cosmetic services	Provider Portal	
Durable Medical Equipment (DME) \$500 and over, and all DME rentals	Provider Portal	

Thank you for being a valued provider for members in one or more of our health plans: Health Partners Plans Medicaid and CHIP plans, Jefferson Health Plans Medicare Advantage, and/or Jefferson Health Plans Individual and Family Plans.

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Services	Authorization required through the provider portal	Authorization required through eviCore
Elective hospitalization	Provider Portal	
Endovascular ablation of varicose veins	Provider Portal	
Ground Transportation (except Behavioral Health)	Provider Portal	
Hearing aids and related accessories \$500 and over.	Provider Portal	
Home Services	Provider Portal	
Inpatient hospice	Provider Portal	
NICU and/or detained Newborns	Provider Portal	

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Non-oncology high-cost injectable drugs including gene therapy.	Provider Portal Policy Bulletin Library. Scroll down to the Drug section.	
Non preferred glucose monitors	Provider Portal	
Pharmacy specific drug prior authorizations	Provider Portal - Drug Specific Prior Authorizations 2024 (Medicaid/CHIP)	
Services, procedures, items, or drugs considered to be new or emerging technology	Provider Portal	
Services, procedures performed by non-participating providers	Provider Portal	
Skilled Nursing Admissions	Provider Portal	

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Services	Authorization required through the provider portal	Authorization required through eviCore
Transfer to non-participating facilities	Provider Portal	
Whole Genome Whole Exome Sequencing	Provider Portal	

**Vascular surgery includes AAA resection, grafts and endovascular repair; Carotid angioplasty, endarterectomy and stent; Peripheral artery bypass and endovascular intervention; Renovascular angioplasty; and Thoracic and Thoracoabdominal aortic aneurysm repairs.*

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