Prior Authorization Requirements
Health Partners Medicare

3/1/2020

Prior authorization is required for select services, programs, and items. Decisions regarding prior authorization are based on medical necessity, appropriateness of care and/or whether an item is medically necessary.

Reminders: All elective inpatient admissions and all services performed by non-participating providers continue to require prior authorization. Referrals are not required for Health Partners Medicare members. You can visit our website at HPPlans.com/PriorAuthDrugs-Medicare to determine if a specific medication requires prior authorization.

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Contact HPP at 1-866-500-4571 (prompts #2, #3)

• Acute rehabilitation admissions
• Air ambulance
• Some potentially cosmetic services
• Durable medical equipment (DME) over $500 and all DME rentals
• Elective hospitalizations
• Endovascular ablation of varicose veins
• Homecare services
• Hyperbaric oxygen therapy
• Intravenous Immune Globulin Therapy (IVIG)
• Non-emergent transportation (with exception of transports to behavioral health facilities)
• Ocrevus® (Ocrelizumab)
• Outpatient vascular surgeries
• Prosthetics/orthotics – over $500
• Services, procedures, items or drugs considered to be new or emerging technology
• Services/procedures performed by non-par providers
• Skilled nursing admissions
• Soliris (Eculizumab)
• Spinraza™ (Nusinersen)
• Transfers to non-participating facilities
• Vascular Surgeries**
• ZOLGENSMA® (onasemnogene abeparvovec-xioi)

Contact eviCore at 1-888-693-3211

• Automatic Implantable Cardioverter Defibrillators (AICD)
• Advanced radiology services (CT, MRI, PET scans, echocardiography, stress echocardiography, cardiac nuclear medicine imaging, and radiation therapy)
• Diagnostic cardiac catheterization
• Chiropractic therapy*
• Medical oncology (chemotherapy)
• Outpatient joint and back surgeries*
• Pain management
• Permanent Pacemakers
• Radiation oncology
• Sleep Management
• Therapy services (physical therapy [PT], occupational therapy [OT], or speech therapy [ST] services)

To request a prior authorization, contact the HPP Prior Authorization department at 1-866-500-4571 (prompts #2, #3).

* Call 1-877-531-9139 for prior authorization of chiropractic services (including outpatient joint and back surgeries).

** 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.