



## Quick Reference Guide

**SEND AUTHORIZATION REQUESTS TO: CHOC Health Alliance Prior Authorization Department**

**Fax: (855) 867-0868**

**Phone: (800) 387-1103**

**NOTE: Requests marked as “Urgent” should only be used if the treatment is required to prevent serious deterioration in the member’s health. Requests not meeting this definition will be handled as non-urgent.**

### **DIRECT IN-NETWORK SPECIALIST REFERRALS**

In-network specialist services (E&M Codes) do not require an authorization, notification to CHOC Health Alliance, or a tracking number, except as specified below:

### **SPECIALIST SERVICES REQUIRING PRIOR AUTHORIZATION**

All hospital based procedures and surgeries

All ENT Services (Including consults/E&M Codes)

All Dermatology Services (Including consults/E&M Codes)

All Orthopedic Services (Including consults/E&M Codes) – Fracture Care does NOT require a prior authorization.

All Podiatry Services (Including consults/E&M Codes)

All other office based services/procedures (Excluding consults/E&M Codes)

### **SERVICES REQUIRING PRIOR AUTHORIZATION**

- **All Non-PAR/Out of Network providers** (except ER and Family Planning services)
- All Inpatient Services (except ER and Family Planning services)
- Acupuncture
- Audiology/Hearing Testing
- Chiropractic Services
- DME
- Dialysis
- Electromyography
- Enteral and Parental
- Genetic Testing
- Hearing Aids
- Home Health/Hospice
- Infusion
- Injectable Drugs, including chemotherapy
- Medical/Incontinence Supplies
- Non-emergency transportation
- Nutrition
- Orthotics and Prosthetics
- Radiology / Diagnostic Services (excluding x-rays and ultrasounds)
- Therapy Services (OT, PT, ST)