Effective January 23, 2017, Anthem Blue Cross and Blue Shield (Anthem) members enrolled in Hoosier Healthwise, Healthy Indiana Plan or Hoosier Care Connect programs will require prior authorization (PA) for the following:

**Services:**
- Electroconvulsive therapy
- Fetal Magnetic Resonance Imaging (MRI)
- Physical, occupational, speech and respiratory therapy (in other than inpatient setting)
- Definitive or quantitative drug testing
- Presumptive drug testing using instrumented chemistry analyzers
- Surgical procedures on the eye
- Mental health partial hospitalization
- Hospice care (all settings)
- Procedures/services billed with unlisted codes

**Durable medical equipment:**
- Pneumatic compression devices for home use
- Power-assisted ankle/ankle-foot systems
- Home ventilators
- Humidifiers
- Electrical stimulation/electromagnetic wound therapy devices
- Continuous passive motion devices
- Knee, wrist, shoulder braces/orthoses (prefabricated and custom)
- Commode chairs
- Seat lift mechanisms for commodes
- Repair of oxygen equipment
- Equipment related to treatment of sleep disorders, including but not limited to positive airway pressure devices and related supplies

**Specialty medications** including but not limited to the following:
- Factor products
- Alemtuzumab
- C1 esterase inhibitor

Providers who are contracted with Anthem Blue Cross and Blue Shield to serve Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect through an accountable care organization (ACO), participating medical group (PMG) or Independent Physician Association (IPA) are to follow guidelines and practices of the group. This includes but is not limited to authorization, covered benefits and services, and claims submittal. If you have questions, please contact your group administrator or your Anthem network representative.
• Corticotropin for injection
• Tbo-filgrastim for injection
• Immune globulin/hyaluronidase (HYQVIA) for injection
• Rilonacept for injection
• Siltuximab
• Vedolizumab
• Vlinatumomab
• Pembrolizumab
• Nivolumab
• Ramucirumab
• Fluocinolone acetonide, intravitreal implant
• Hyaluronan or derivative for intra-articular injection
• Bendamustine HCL
• Sculptra for injection
• Liposomal doxorubicin hydrochloride

Surgeries, procedures, or other products or services that are for cosmetic purposes or considered experimental and/or investigational are not covered.

As a reminder, these are in addition to services that currently require prior authorization. The list of those services can be found at www.anthem.com/inmedicaiddoc. We would like to highlight some items that currently require prior authorization. The items we would like to highlight are: custom durable medical equipment, wheelchair accessories, spinal orthoses, genetic testing, spine surgeries and procedures, major joint arthroplasties and revisions, knee arthroscopies, gene expression profiling and analyses to predict drug response, home health services, implantable neurostimulators, and shoe inserts.

We recommend providers visit www.anthem.com/inmedicaiddoc to review the list of services and service categories that currently require prior authorization. Should a provider need clarification regarding whether a specific code or service requires prior authorization, they should call the Utilization Management contact numbers below.

The list of services requiring prior authorization will be updated as needed.

Providers are responsible for verifying eligibility and benefits for Anthem members before providing services. Except for an emergency, failure to obtain PA for the services requiring PA may result in a denial of reimbursement.

**Requesting PA**
To request PA, report a medical admission or ask questions regarding PA, contact the Utilization Management department:

- Hoosier Healthwise: **1-866-408-7187**
- Healthy Indiana Plan: **1-866-398-1922**
- Hoosier Care Connect: **1-866-408-7187**
To request by fax:

- Inpatient/outpatient: **1-866-406-2803**
- Pharmacy: **1-866-406-2803**
- Behavioral health: **1-877-276-5036**

For Hoosier Healthwise pharmacy authorizations, call **1-855-577-6317**.

Regardless of whether PA is required, all services must be medically necessary to be covered. Even if PA is not required, to avoid a claim denial based upon medical necessity, we encourage providers to review our medical necessity criteria prior to rendering nonemergent services. To access our medical necessity criteria, visit [https://www.anthem.com/home-providers.html](https://www.anthem.com/home-providers.html) and, from the *Select a State* drop-down menu, choose Indiana followed by the Enter button. On the resulting page, locate the box on the left side titled *Medical Policy, Clinical UM Guidelines, and Pre-Cert Requirements* and select the Enter button.