



Anthem HealthKeepers
Offered by HealthKeepers, Inc.



Commonwealth Coordinated Care
Medicare & Medicaid working together for you

Prior authorization requirements for knee and spinal orthoses

On August 8, 2016, prior authorization for Anthem HealthKeepers Medicare-Medicaid Plan (MMP), a Commonwealth Coordinated Care plan members will be required for knee and spinal orthoses services on or after August 8, 2016. Federal and state law, as well as state contract language and CMS guidelines - including definitions and specific contract provisions/exclusions - take precedence over these prior authorization rules and must be considered first when determining coverage. Noncompliance with the new requirements may result in denied claims.

Detailed precertification requirements are available on our provider self-service website. Go to <https://mediproviders.anthem.com/va> and under *Precertification* select the **Precertification Lookup Tool**. Noncontracted providers may call Provider Services (**1-855-817-5788**), Monday through Friday, 8 a.m. to 8 p.m., for assistance.

<https://mediproviders.anthem.com/va>

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