

New prior authorization requirements for outpatient procedures

This communication applies to the Medicaid programs for Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA) as well as the Florida Healthy Kids (FHK) program for Simply.

Effective January 1, 2021, prior authorization (PA) requirements will be required for the below CPT® codes.

For services that are scheduled on or after January 1, 2021, providers must contact the Prior Authorization team for Simply and CHA to obtain prior authorization for these services. Providers are strongly encouraged to verify that a prior authorization has been obtained before scheduling and performing services.

To request PA, you may use one of the following methods:

- Web: <https://www.availity.com>*
- Fax: **1-800-964-3627**

CPT code	Service description
33991	Insertion of ventricular assist device, percutaneous including radiological supervision and interpretation; both arterial and venous access, with transeptal puncture
33993	Repositioning of percutaneous ventricular assist device with imaging guidance at separate and distinct session from insertion
81350	Ugt1A1 (Udp Glucuronosyltransferase 1 Family, Polypeptide A1) (E.g., Irinotecan Metabolism), gene analysis, common variants
41512	Tongue base suspension, permanent suture technique

* Availity, LLC is an independent company providing administrative support services on behalf of Simply and CHA.

<https://provider.simplyhealthcareplans.com>

<https://provider.clearhealthalliance.com>

Simply Healthcare Plans, Inc. is a Managed Care Plan with a Florida Medicaid contract. Simply Healthcare Plans, Inc. dba Clear Health Alliance is a Managed Care Plan with a Florida Medicaid contract.

Simply Healthcare Plans, Inc. is a Managed Care Plan with a Florida Healthy Kids contract.

SFL-NL-0234-20 November 2020