

PPO
MEDICAL PRIOR AUTHORIZATION LIST

Prior Authorization is the process by which Unity's Medical Management staff provides a written statement that the requested service or supply is medically necessary and appropriate. Prior Authorization may list the specific service or supply that is authorized, the number of visits that are authorized, and the name of the provider or supplier. However, Prior Authorization does not guarantee that the service will be covered. Coverage is determined by the terms of your benefit plan. If you have questions regarding coverage, please call Unity at 1-800-362-3310.

As an insured under Unity's PPO Plan, you are responsible for obtaining Prior Authorization in order to receive coverage for certain services. Before you receive a service that requires Prior Authorization, you must arrange for Prior Authorization from the UW Medical Foundation's Medical Management Department. You may reach the Medical Management Department at 1-888-829-5687. For Prior Authorization for specialty injectable medications, your practitioner must fax a Unity Prior Authorization/Formulary Exception Request to 1-888-450-4711. For more information on the services that require Prior Authorization, please contact Unity Customer Service at 1-800-362-3310.

Services Requiring Prior Authorization

You must contact Medical Management at least 48 hours before all elective (non-emergent) hospital admissions, skilled nursing facility admissions and inpatient rehabilitation. Prior Authorization is also required for transplants, home health care services, home IV therapy, hospice care, and the purchase of durable medical equipment (DME) in excess of \$500 in total. Pharmacy Prior Authorization is also required for the following specialty injectable medications administered at a clinic: Orencia, Remicade, Synagis, Xolair, Rituxan, Tysabri and Amevive.