

PREMIER HEALTH PLAN QUICK REFERENCE GUIDE

Provider Services..... (855) 514-3678

For claims and eligibility inquiries, member benefits, directory and web support

Medical Management/ Prior Authorization..... (855) 869-7140 Fax (855) 431-8762

Prior authorization requests are now able to be submitted electronically. Please contact Provider Services for more information.

After Hours/Days Prior Authorization Line..... (317) 910-0499
(after business hours urgent requests only)

Advanced Cardiology/Radiology Imaging..... (844) 303-8449
Fax (888) 693-3210

*For more information regarding advanced imaging/cardiology and electronic authorization submission please visit:
evicore.com/healthplan/premier*

Care Advising..... (866) 721-8623

Pharmacy

Premier Health Employee Plan..... (855) 266-0713
Fax (855) 862-6518

Mental Health and Substance Abuse (Optum)..... (877) 218-7136

Routine Vision

VSP
Premier Health Employee Plan only..... (800) 877-7195

Routine Dental

Metlife
Premier Health Employee Plan only..... (800) 942-0854

Claims Submission Addresses

Premier Claims

P.O. Box 3076
Pittsburgh, PA 15230
Electronic Submission:
Payer ID: 251PR

Optum Claims

P.O. Box 30757
Salt Lake City, UT 84130
Electronic Submission:
Payer ID: 87726

Complete listings of laboratory services, radiology services and participating hospitals are available online at premierhealthplan.org/Shop-Our-Plans/Member-Resources/Find-a-Doctor.

All services may be subject to retrospective review to determine medical necessity. Possession of a Premier Health Plan member ID card does not guarantee eligibility.

To verify member eligibility, call Provider Services at (855) 514-3678 or access Provider OnLine at premierhealthplan.org.

FREQUENTLY USED SERVICES REQUIRING PRIOR AUTHORIZATION

Services	Premier Health Employee Plan
Inpatient	
Hospital Admissions (elective and acute; excludes deliveries)	●
Maternity Admissions (beyond standard timeframes—48 hours vaginal delivery/96 hours C-section)	●
Hospice	●
Long Term Acute Care (LTAC) Admissions	●
Rehab Facility Admissions	●
Skilled Nursing Facility Admissions*	●
Home Health	
Home Care (after initial eval)*	●
Home Physical/Occupational Therapy (after initial eval)*	●
Hospice	●
Home Infusion	●
Parenteral Nutrition	●
Private Duty Nursing*	●
Outpatient	
Brachytherapy Prostate	●
Chiropractic Services (Children under 13 years old)	●
Colonoscopy—Under Age 50 (with family history)	●
Dental Anesthesia	●
Experimental and Investigational Services	●
Functional Electrical Stimulators	●
Genetic Testing for Long QT Syndrome	●
Molecular Susceptibility Testing for Breast Cancer and/or Ovarian Cancer	●
Molecular-Genetic Testing (only services as covered by the ACA and/or CMS)	●*
Oncotype Dx Assay for Breast Cancer	●
Outpatient/Mobile Real Time Cardiac Surveillance Systems	●
Pediatric Extended Care Program	●
Physical, Occupational (only with Autism diagnosis after the initial eval) and Speech Therapy (after initial eval)*	●
Proton Beam Therapy	●
Selective Internal Radiation Therapy (SIRT)	●
Transplant Evaluations	●
Wireless Capsule Endoscopy	●
Surgical Procedures	
Any Surgical Procedure requiring Acute Hospital Admission	●
Abdominoplasty/Panniculectomy	●
Artificial Disc Replacement	●

FREQUENTLY USED SERVICES REQUIRING PRIOR AUTHORIZATION, CONTINUED

Services	Premier Health Employee Plan
Breast Reduction (excludes reconstruction related to breast cancer)	●
Cochlear Implants/Osseointegrated Bone Stimulators (BAHA)	●
Extra Cranial Carotid Angioplasty with Stenting	●
Lumbar Laminectomy/Hemilaminectomy/Discectomy	●
Lumbar Spinal Fusion	●
Implantable Miniature Telescope (IMT for Macular Degeneration)	●
Neurostimulator (trial and implantation)	●
Pancreatectomy with Autologous Islet Cell Transplantation	●
Reduction Mammoplasty/Mastectomy for Males	●
Total Ankle, Hip, Knee Replacement	●
Transcatheter Aortic Valve Implantation	●
Transcatheter Occluder (Amplatzer) for Atrial Septal Defect (ASD)/Ostium	●
Transcatheter Occluders (Amplatzer and Starflex) for Patent Foramen	●
Transplants (bone marrow, stem cell, solid organ)	●
Transplant Evaluations	●
Ventricular Assist Devices	●
Vertebral Augmentation (Percutaneous Kyphoplasty)	●
Weight Reduction Surgery	●
Pharmacy	
Injectable drugs (in physician office, refer to formulary)	●
Mental Health/Substance Abuse	
Behavioral Health Services/Substance Abuse Admission	●
Partial Hospitalization and Intensive Outpatient Visits	●
Advanced Cardiology and Radiology Services	
Cardiology Imaging (Cardiac MR, CT, and PET scans, Diagnostic Heart Catheterization, Echo, Stress Echo, and Nuclear Stress)	●
Radiology Imaging (CT, MRI, PET, and Nuclear Medicine)	●
Durable Medical Equipment and Ancillary Services	
Durable Medical Equipment (>\$500 per allowable each)	●
DME Capped Rentals (non-standard items >\$500 per allowable each)	●
Continuous Glucose Monitoring Systems (long term or interstitial)	●
CPAP	●
Cranial Remodeling Orthosis	●
Experimental and Investigational Equipment	●
External Insulin Pumps (for patients under 13 years old)	●
High Frequency Chest Wall Oscillation Devices	●

FREQUENTLY USED SERVICES REQUIRING PRIOR AUTHORIZATION, CONTINUED

Services	Premier Health Employee Plan
Lymphedema Pumps and Appliance	●
Microprocessor Controlled Ankle-Foot Prostheses	●
Microprocessor Controlled Knee Prostheses	●
Myoelectric Upper Limb Prosthesis	●
Negative Pressure Wound Therapy	●
Non-Invasive Bone Growth Stimulators	●
Nutritional Products	●
Power Mobility Devices	●
Pressure Reducing Support Surfaces	●
Prosthetics and Related Supplies	●
Specialized Manual Wheelchairs	●
Spinal Orthosis	●
Wearable Cardiac Defibrillator	●
Wheelchair Options and Accessories	●
Other Services	
Any Equipment Rendered by an Out of Network Provider	●
Any Non-emergent Service Rendered by an Out of Network Provider	●
Air Transportation, Emergent (reviewed retrospectively)	●
Air Transportation, Non-Emergent	●
Ambulance Transfer, Non-Emergent	●
Clinical Trials	●
Gender Reassignment	●
Humanitarian Device Exemption (HDE) or Investigational Device Exemption (IDE)	●
Partial Hospitalization and Intensive Outpatient Visits	●
Travel and Lodging for Organ Transplants (refer to Optum Complex Medical Conditions (800) 847-2050)	●