

June 30, 2011

## PRIOR AUTHORIZATION UPDATE

### Updated Prior Authorization Guidelines

Dear Care1st and ONECare Providers and Office Staff:

The *Care1st and ONECare Prior Authorization Guidelines* has been updated and is available on our website [www.care1st.com/az](http://www.care1st.com/az) (see “Prior Authorization Guidelines and Criteria” under the “Providers” menu). The new guideline is effective August 1, 2011.

The table below outlines changes in authorization requirements effective *August 1, 2011*:

Service	Change
ASC Procedures	We will no longer require prior authorization for many procedures performed in an ASC. A new Attachment II was added that lists ASC Procedures Requiring Prior Authorization and page 1 now lists ASC with a Special Comment that references the new Attachment II.
Hearing Aids	Special Comments updated to clarify prior authorization requirements
Dialysis	Special Comments updated to clarify prior authorization requirements when Care1st is the secondary payer.
DME	Special Comments updated to clarify prior authorization requirements when Care1st is the secondary payer.
Enteral/Tube Feed	Special Comments updated to clarify prior authorization requirements when Care1st is the secondary payer.
Home Infusion	Special Comments updated to clarify prior authorization requirements when Care1st is the secondary payer.
Orthotics & Prosthetics	Special Comments updated to clarify prior authorization requirements when Care1st is the secondary payer.
Radiology	Special Comments updated to clarify prior authorization requirements when Care1st is the secondary payer.

If you have any questions regarding the information contained in this communication and/or if you do not have access to the internet and need a hard copy, please contact Provider Network Operations at the number(s) below.

*Thank You!*