

## Sunrise Advantage Plan Authorization/Referral Chart

Service Type	Requirement	Notes
<u>Hospitalization</u> : Inpatient Emergent (Medical and Psychiatric)	Notification	Within 1 business day.
<u>Hospitalization</u> : Inpatient Elective (Medical and Psychiatric)	Prior Authorization	
<u>Hospitalization</u> : Partial Day	Prior Authorization	
<u>Hospitalization</u> : Observation	Prior Authorization	
Ambulatory Surgery Center	Prior Authorization	
Cardiac and Pulmonary Rehab Services	Prior Authorization	
Certain Prescription Drugs	Prior Authorization	Limited number of drugs require authorization.
Chiropractic Services	Prior Authorization	
Comprehensive Dental	Prior Authorization	Preventive dental - No authorization.
Diabetic Supplies/Services	No Authorization Required	
Dialysis	Prior Authorization	
Durable Medical Equipment	Prior Authorization	See list
Home Health Services	Prior Authorization	
Laboratory Services	No Authorization Required	
Medicare Part B Drugs and Step Therapy	Prior Authorization	For chemotherapy: Only initial administration requires authorization.
Mental Health Specialty Services	Prior Authorization	*Sunrise Advantage Community Plan also requires referral.
Opioid Treatment Services	Prior Authorization	
Other Healthcare Professionals (SW/NP/PA)	Referral & Authorization	For services outside nursing facility only. *Referral only for Sunrise Advantage Community Plan.
All Out of Network Services	Prior Approval Required	
Outpatient Diagnostic Procedures and Tests	Prior Authorization	Performed outside of a physician office or nursing facility.
Outpatient Diagnostic/Therapeutic Radiology	Prior Authorization	MRI, MRA, CT, CTA, PET, nuclear medicine all require authorization in all places of services. X-rays do not require authorization.
Outpatient Hospital Services	Prior Authorization	Infusion therapy only.
Prosthetics/Medical Supplies	Prior Authorization	
<u>Part A Skilled Nursing Facility</u> : Post-Acute	Prior Authorization	
<u>Part B Therapy</u> - Occupational, Physical or Speech Therapy Services	Prior Authorization	
Specialist Referrals	Referral & Authorization	
Substance Abuse Services	Referral	
Telehealth	Referral & Authorization	
Transport/Non Emergent Ambulance	Prior Authorization	

DATE: January 2020