

# PROVIDER Update



CONTRACTUAL | JANUARY 24, 2020 | UPDATE 20-092 | 1 PAGE

## Prior Authorization Requirements

### Additions and changes, effective April 1, 2020

See below for prior authorization (PA) requirement changes for Medi-Cal fee-for-service (FFS) providers. "New" indicates new requirement and "Existing" indicates current requirement.

Requirement	Comments	Adult members ages 21 and over	Pediatric members under age 21
Continuous glucose monitoring	Listed under Durable Medical Equipment (DME)	New benefit	Existing benefit under CCS. <sup>1</sup> All DME requires prior authorization.
H. pylori (Helicobacter pylori), antibody testing	Listed under Outpatient Procedures	New	
Transplant	Listed under Outpatient Procedures	Removed HLA typing Added <i>Transplants must be performed through Health Net's designated transplantation specialty network</i>	
Aliqopa™, Azedra®, Beovu®, Besponsa®, Folutyn®, Kanuma®, Lutathera®, Polivy™	Listed under Outpatient Pharmaceuticals	New	

<sup>1</sup>CCS – California Children's Services

### View authorization requirements online

Follow the steps below to find out if prior authorization is needed for any procedures, services or equipment:

- 1 Go to [provider.healthnet.com](http://provider.healthnet.com).
- 2 Before logging in, select *Working with Health Net > Policies for Non-Contracting Providers > Additional Resources > Services Requiring Prior Authorization*.
- 3 After logging in, select *Working with Health Net > Contractual > Services Requiring Prior Authorization*.

If you have questions regarding the information contained in this update, contact CalViva Health at 1-888-893-1569.

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

### PROVIDER SERVICES

1-888-893-1569  
[www.healthnet.com](http://www.healthnet.com)