



PROVIDER UPDATE

Prior Authorization List



The Highmark Health Options prior authorization list is now available by visiting hho.fyi/prior-auth-list or by scanning the QR code.

Updated quarterly, this document lists codes and prior authorization requirements for medical procedures and services.

Prior authorizations are required for:

- All non-par providers.
- Out-of-state providers.
- All inpatient admissions, including organ transplants.
- Durable medical equipment over \$500.
- Elective surgeries.
- Any services that require coordination of benefits.
- When the primary payer requires an authorization for the service.

Provider Services is available to answer questions at 1-855-401-8251 from 8 a.m.–5 p.m., Monday through Friday.