

Radiation therapy prior authorization requirement starting Aug. 29, 2022.

Effective Aug. 29, 2022, Highmark Health Options will require prior authorization for radiation therapy for members who do not have a diagnosis of cancer. Failure to obtain prior authorization will result in a claim denial. The prior authorization process will apply to all Highmark Health Options members.

Providers can submit prior authorization requests to Utilization Management, 8 a.m.–5 p.m., Monday–Friday via:

- Fax: 1-855-451-6665; using the prior authorization form
- Phone: 1-844-325-6251

In addition, when submitting the claim for the prior authorized service, it is important to remember to include the prior authorization number in the appropriate space on the claim.

A Medical Director is available for review of these requests when necessary. For urgent and emergency situations, Highmark Health Options requires that providers notify HHO within 48 hours or two business days of rendering the service.

A [list of services requiring prior authorization](#) can be found in the provider manual and online.

For additional information, call Provider Services at 1-844-325-6251, 8 a.m.–5 p.m., Monday–Friday.