

PROVIDER ALERT



2022 Prior Authorization List Update Effective 01/01/2022

November 9th, 2021

Effective **January 1st, 2022**, OptumCare Network (OCN) will no longer enforce prior authorization requirements separate from the health plan's prior authorization list. OCN will be enforcing each plan's prior authorization guidelines for all providers whether contracted directly with OCN or the health plan.

	OCN Contracted/ Plan Contracted (Provider is contracted with OCN or the health plan)	Non-Contracted/Non-Par (Provider is not contracted with OCN or the health plan)
UnitedHealthcare (Medicare PPO/HMO and Medicaid)	Follow UHC PA Guidelines UHC PA List Applies	All services provided by non-contracted providers require prior authorization (except for emergencies, urgently needed services when the network is not available, and dialysis).
Premera	Follow Premera PA Guidelines Premera PA List Applies	
Humana	Follow Humana PA Guidelines Humana PA list applies	

* Prior authorization is not a guarantee of payment. Claims payment is contingent upon verification of eligibility for benefits.

Requests for authorization for OCN members may be requested online via OneHealthPort or faxed to OCN at 1-855-402-1684 utilizing the OCN Prior Authorization Request Form (attached).

Questions or concerns regarding prior authorization requirements should be directed to your Practice Engagement Manager or OCN Customer Service at 1-877-836-6806 (Washington) or 1-866-565-3664 (Oregon).