



Prior Authorization for Referrals of Non-Urgent/Emergent Services: Important Reminder to Care Providers

As a reminder, if you are a participating provider, you're required to coordinate member care within the UnitedHealthcare Community Plan network. We put this requirement in place to help our members keep their costs down and reduce the frequency of surprise bills.

How This Affects You

Please direct all UnitedHealthcare Community Plan member referrals to UnitedHealthcare Community Plan in-network care providers. This includes services such as pathology, radiology or laboratory.

Exception: You don't have to get authorization for out-of-network anesthesia services performed for a covered service in an office-based setting of a participating care provider.

Out-of-Network Referrals and Services

We understand that there are occasions where a member may need non-emergency services from an out-of-network care provider. In those cases, you can refer outside of the network, but only if you've requested and received an approval for a prior authorization from UnitedHealthcare Community Plan before the services occur. This requirement includes radiology, pathology and laboratory specimens, which must be sent to participating UnitedHealthcare Community Plan locations.

If you choose to send members to an out-of-network location, you must request prior authorization before the services are rendered or we'll deny those services. We require prior authorization in these instances because sending a member to an out-of-network location could result in a surprise bill to the member and unnecessary payment disputes.

Requesting/Verifying Prior Authorization

If you are the ordering physician, you or your office staff can obtain or verify a prior authorization in one of the following ways:

- **Online:** UHCprovider.com/priorauth
- **Phone:** 866-604-3267, 7 a.m. – 7 p.m. Monday – Friday, local time
- **Fax:** 866-899-8061. You can find fax forms at UHCprovider.com/NYcommunityplan > [Prior Authorization and Notification](#) > Prior Authorization Paper Fax Forms.

Contracted and non-contracted health professionals, hospitals and other care providers are required to comply with UnitedHealthcare Community Plan's prior authorization policy and procedures. If you choose not to comply, it may result in the delay or denial of reimbursement.

Resources

For more information about prior authorization, please refer to the UnitedHealthcare Care Provider Manual located at UHCprovider.com/manuals > New York > [View the UnitedHealthcare Community Plan of New York Care Provider Manual](#).