

Cardiology prior authorization protocol

Quick reference guide

UnitedHealthcare Medicare Advantage plans quick reference guide

We've created this quick reference guide to provide you with information about the cardiology prior authorization protocol. Prior authorization helps support care experiences, outcomes and total cost of care for UnitedHealthcare® Medicare Advantage members.

You can verify whether prior authorization is required or initiate a request online or by phone:

- Go to UHCprovider.com/cardiology and select the **Prior Authorization and Notification Tool**
- Call **866-889-8054** from 7 a.m.–7 p.m., local time, Monday–Friday. The system will enable you to continue with the request process or respond automatically that prior authorization is not needed.

Procedures requiring prior authorization

Prior authorization is required for the following procedures and CPT® codes (“cardiac procedures”):

Diagnostic catheterization

- CPT codes: 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461

Electrophysiology implants

- Pacemaker Implant CPT codes: 33206, 33207, 33208, 33212, 33213, 33214, 33227, 33228
- CRT (cardiac resynchronization therapy) CPT device codes: 33221, 33224, 33229, 33231, 33264, CPT Lead code 33225
- Defibrillator (AICD) implant CPT codes: 33230, 33240, 33249, 33262, 33263, 33270
- Stress echocardiogram CPT codes: 93350, 93351

Places of service where prior authorization is required

Cardiac procedure	Outpatient	Office	Inpatient
Diagnostic catheterization	Required	Required	Not required
Electrophysiology implant	Required	Required	Not required
Stress echocardiogram	Required	Required	Not required

Place of service exclusions

- Emergency rooms
- Hospital observation units
- Urgent care centers
- Inpatient settings

Included and excluded benefit plans

The cardiology prior authorization protocol applies to UnitedHealthcare Medicare Advantage benefit plans and providers subject to the UnitedHealthcare provider administrative guide and the UnitedHealthcare West Supplement.

This cardiology prior authorization protocol will **not** apply to capitated providers subject to the UnitedHealthcare West capitated providers.

For a complete list of all Medicare Advantage benefit plans excluded from the Cardiology Prior Authorization protocol, go to UHCprovider.com/cardiology. Click on Medicare Advantage under Specific Cardiology Programs.

Information required for prior authorization requests

1. Member information

- UnitedHealthcare identification (ID) number
- UnitedHealthcare group number
- Name
- Date of birth
- Telephone number and address (optional)

2. Provider information

- National provider identifier (NPI) number
- Tax ID number
- Name
- Address
- Telephone number with area code
- Fax number with area code
- Email address
- Office contact person

3. Clinical information

- The cardiac procedure(s) being requested, with the CPT code(s)
- The working diagnosis with the appropriate ICD code(s)
- The member's clinical condition, which may include any symptoms, listed in detail, with severity and duration; any treatments that have been received, including dosage and duration for drugs; and dates for other therapies
- Dates of prior imaging studies performed
- Any other information that the care provider believes will help in evaluating whether the service ordered meets current evidence-based clinical guidelines, including, but not limited to, prior diagnostic tests and consultation reports

Retrospective reviews

You must call 866-889-8054 to initiate retrospective reviews.

If the ordering care provider determines that a cardiology procedure is medically required on an urgent basis, and a prior authorization number cannot be requested because it is outside of UnitedHealthcare normal business hours, a prior authorization number must be requested retrospectively. Electrophysiology implants and diagnostic catheterizations must be requested within 15 calendar days after the date of service. Stress echocardiogram procedures must be requested within 2 business days after the date of service.

Documentation must include an explanation of why the procedure was required on an urgent basis and why prior authorization could not be requested during UnitedHealthcare normal business hours.

Cardiology prior authorization phone options

Please call **866-889-8054** and use the following options:

Request prior authorization:

- Select option #1 and provide the ordering physician's 10-digit NPI number. **After providing the NPI number, the options are:**
 - Select option #2 for UnitedHealthcare® Medicare Advantage or AARP® members and provide the requested information

Then select:

- Option #2 for cardiac procedures including stress echocardiograms, diagnostic catheterizations and procedures for implantable devices
- When you call, have the study type information available
- **New procedure:** If there is another procedure request for this member, press option #2
- **New patient under the same provider:** If you have additional member requests for this provider, press option #3
- **New provider:** If you are requesting prior authorization for additional providers, press option #4

Verify or check prior authorization status:

- Select option #2
- Please provide the 10-digit case number
 - If you don't have a case number or it is invalid, press *

Initiate physician-to-physician discussion

- Select option #4
- Please provide the 10-digit case number
 - If you don't have a case number or it is invalid, press *

If you have questions after selecting option #4, use these options:

- For questions about claims, payments, appeals or all eligibility issues, select option #1
- For general questions regarding UnitedHealthcare Medicare Advantage, AARP®, or Medicare Solutions members, select option #2
- For all other inquiries, select option #5
- To return to the main menu, select option #6
- To repeat these options, select option #9

Helpful phone hints

- The phone system will always repeat the information entered. To bypass this function, simply enter the next required data element.
- If a typing error is made, press # to end that entry and try again
- If the member's ID number has alpha characters, use the corresponding numeric number on the telephone key pad to enter them. Verification of the identification will be returned in the numeric format only.
- You can initiate multiple requests per call for the same member



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