

VISTA Pre-Authorization Rules

Authorizing Treatment for Members

Providers and Hospitals must contact VISTA via telephone or fax to obtain a Pre-Authorization prior to scheduling a Member for any medical service listed below, which may be amended by VISTA from time to time. Providers and Hospitals shall use the Pre-Authorization Request Form found in the Forms Section the Provider Manual or in the forms section of the VISTA website at www.vistahealthplan.com.

IMPORTANT: The following services may not be covered under all VISTA health benefit plans even though such services are listed below. Members should refer to their Summary of Benefits or Evidence/Certificate of Coverage for information regarding their covered health care services.

Provider Type	Service/Procedure (regardless of place of treatment)
Ambulance Transport (non-emergency) Air Ambulance (non-emergency) Hospital Admission Hospital Outpatient Services (all, includes diagnostic testing) Maternal Fetal Medicine Neuropsychology Non-participating Providers Oral Surgery Rehabilitation Facility Inpatient Admission Reproductive Endocrinology Skilled Nursing Facility Admission Vent/Sub-acute, Long-term Care Admission Wound Care Centers (non-emergency)	Automatic Implantable Cardioverter Defibrillator (A.I.C.D.) Blepharoplasty Bone Growth Stimulators Breast Surgery for Benign Condition Clinitron Bed Cosmetic Surgery CT Scans Customized Wheelchairs DME* Enhanced External Counter Pulsation Experimental/Investigational Services Extracorporeal Shock Wave Therapy/Orthotripsy Gastric Bypass/Banding Home Health Services* Home Vents Hospice Care Hyperbaric Treatments Infertility Assessment/Treatment Infusion* / Home/Office Drug-Replacement* Laparoscopic Hysterectomy Liquid Oxygen Manipulation Under Anesthesia MRI/MRA Nerve Conduction Study Pain Management Panniculectomy/Abdominoplasty PET Scans Power Mobility Devices (power wheelchair and scooters) Prosthetics/Braces/Orthotics Rehabilitation Therapies (PT, ST, OT)** Removal of Keloid/Lipomas Rhinoplasty/Septoplasty Sclerotherapy for Varicose Veins Sleep Studies Transplant Evaluations/Transplants Ultrasound, Pregnant Uterus, Transvaginal (76817) Uvulopalatopharyngoplasty Wound Care (non-emergency) Wound Vacs
<p>Commercial members enrolled in a PPO, POS or Open Access Plus health benefits plan that do not obtain Prior Authorization for the services listed above; a benefit otherwise payable by VISTA will be reduced. Members should refer to their Schedule of Benefits and Certificate of Coverage or Certificate of Insurance for further details on Prior Authorization requirements.</p> <p>Clinical information will be required to substantiate request. The above list is subject to change.</p>	

Statewide for all lines of business:

	<u>Phone</u>	<u>Fax</u>
*Home Health Care		
Atenda Nursing:	888-914-2201	888-914-2202 (except North Florida Healthy Kids)
*Home Infusion:		
Walgreens	866-352-3230	866-312-1597
*Home-Office Drugs/Drug Replacement:		
ICore	866-522-2469	866-522-2478

The iCore forms necessary to order the following are included in the Forms Section of our Website at www.vistahealthplan.com :

- Drug Order for Home Use
- Chemotherapy Drug Replacement
- Physician Office Medications

For **South Florida**, send requests for the following services to our contracted vendors:

*DME

Florida Home Medical/Atenda 800-519-3463 800-829-1635

** Rehabilitation therapy is initiated by the PCP with a referral to a participating therapist for one visit, for assessment. The therapist will then obtain the authorization.

All other **South Florida** requests should be authorized through VISTA's Authorization department:

Phone: 1-800-447-3725 Fax: 1-800-528-2705 or (954) 858-3432

In **North Florida**, all providers and services listed, including rehabilitation therapies should be authorized through VISTA's Authorization department:

Phone: 1-800-447-3725 Fax: 1-800-929-5842

SERVICE PROVIDER INSTRUCTIONS

- Submit claim to the following address for processing:
VISTA
PO Box 45-9011
Sunrise, FL 33345-9011
- Specialty network physicians should follow network guidelines.
- Verify member eligibility and benefits prior to rendering service.