

PRIOR AUTHORIZATION

KNOW YOUR HEALTHCARE COVERAGE, INSIDE AND OUT

Prior authorization is the process of obtaining coverage approval for a medical or behavioral health service or procedure in advance of treatment. Not all procedures or services, including emergency services, require prior authorization, but many do. When your healthcare provider wants to perform a procedure or service that requires prior authorization, they must contact Blue Cross of Idaho for prior authorization on your behalf. You can learn more about which services need prior authorization by selecting the **Prior Authorization** link on the member home page of the Blue Cross of Idaho website at bcidaho.com. After receiving the prior authorization request and reviewing all the necessary clinical information, we will notify you and your provider of the determination.

WHO PAYS FOR UNNECESSARY SERVICES?

Prior authorization is required for certain procedures whether or not your provider contracts with Blue Cross of Idaho. When you receive services from a contracting provider and those services are determined to be not medically necessary, you are not financially responsible, they are. However, if your provider is not contracting with us, you may be financially responsible for the entire cost. If we deny coverage for a service, you can appeal the decision using the member appeal process outlined in your summary plan description, policy or contract. We do not provide coverage for services that are not medically necessary.

WHY IS PRIOR AUTHORIZATION IMPORTANT TO YOU?

Prior authorization is just one of the ways we're working to address rising healthcare costs. Hospital and technology costs, and the increased use of healthcare services, contribute to rising costs. As healthcare costs go up, health insurance premiums also go up to pay for the services provided. Prior authorization helps hold down the cost of healthcare by letting you know whether or not a service is covered before it is performed.

As your health insurance company, we want you to receive the best care at the right time and place. We also want to ensure that you receive the right technology that addresses your particular clinical issue. We're here to work with you, your doctor, and the facility so that you have the best possible health outcome.

With Prior Authorization, Blue Cross of Idaho is able to:



- Determine if the procedure or service is included in your coverage
- Confirm that the procedure or service is medically necessary
- Help ensure accurate and timely processing of your claims
- Determine if your doctor is a member of our network of contracting providers

If you have questions about prior authorization or the cost sharing requirements of your coverage, call our Customer Service Department at the phone number on the back of your Blue Cross of Idaho member ID card. Keep in mind that prior authorization does not guarantee coverage; all claims are reviewed for medical necessity.