

It is important to note that some services do not require prior-authorization, as they are considered non-medically necessary. In addition, some services may only require prior-authorization for certain members, such as those with high-risk conditions. The Northwind Health Plus plan has a list of services that require prior-authorization, which is available on the Northwind Health Plus website.

There are certain exceptions to prior-authorization requirements. For example, if a member requires emergency services, prior-authorization is not required. In addition, certain pediatric services are exempt from prior-authorization.

It is important for members to understand that prior-authorization does not guarantee coverage. The prior-authorization process is used to determine if a service is medically necessary and meets the criteria set by the plan. If a service is not medically necessary or does not meet the criteria set by the plan, the service may be denied.

It is also important for members to understand that prior-authorization is not a guarantee that the service will be provided in a timely manner. While Northwind Health Plus strives to make decisions on prior-authorization requests as quickly as possible, the process can take time.

Here are some tips for members to help ensure that prior-authorization requests are processed in a timely manner:

- Ensure that all necessary information is provided to the provider when requesting prior-authorization.
- Make sure that the provider submits the prior-authorization request as soon as possible.
- Contact the insurance company if you have not received a response after a reasonable amount of time.
- Ensure that the provider is aware of any changes in the member's condition that may affect the prior-authorization request.

Prior-authorization is an important part of the Northwind Health Plus care management system. It helps ensure that members are receiving the best care possible and that their benefits are used in the most cost-effective manner. By understanding prior-authorization and following the tips outlined above, members can help ensure that their prior-authorization requests are processed in a timely manner.

Exceptions To Prior Authorization For Benefit Coverage

CARE MANAGEMENT: Exceptions To Prior Authorization For Benefit Coverage

At Northwind Health Plus, we understand that medical care can be complex and that you may need access to specialized care when needed. That is why we provide exceptions to prior authorization for certain medical services, procedures and treatments that may require additional review and approval. The exceptions to prior authorization are based on