

## Verify PA Requirements Tool

The **Verify PA requirements tool** simplifies the process of determining when a prior authorization is required for medical purposes. All you need are the service codes (CPT/DX) and the tool will determine if a PA is necessary. This new tool also provides a link to the detailed medical coverage policy criteria. If a PA is required, the tool will link you to the resource needed to begin the PA request process.

HealthPartners prior authorization (PA) requirements for procedures and service items are typically consistent across products. Info in this application may change and is not a payment guarantee or quote. If there is a difference between this general information and a member’s plan documents, the plan document will be used to determine coverage.

***This application does not support PA requirements for behavior health and pharmacy requirements.***

***Please visit: [pharmacy](#) and [behavioral health](#) for more guidance on these services.***

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## Searching for prior authorization services:

### Step 1: Enter a procedure code.

- Enter valid CPT or HCPCS codes.
- As you begin typing a procedure code, the field will begin looking for matching codes.
- In most cases just the procedure code is needed, but in some cases you will be prompted for additional information (see next steps).



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### Search medical policies for prior authorization (PA) criteria

**CPT/HCPCS Code**

Medical procedure, service, or item

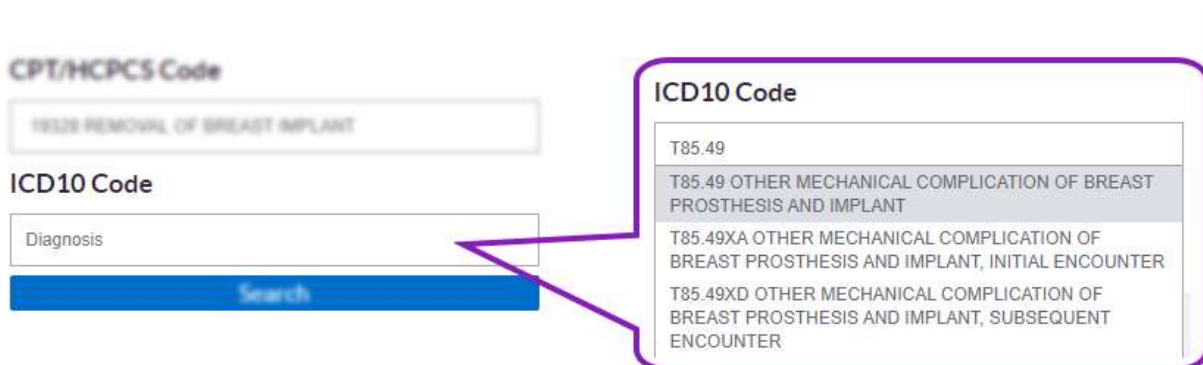
**Search**

**CPT/HCPCS Code**

- 158
- 15000 ABRASION SKIN TOTAL FACE
- 15010 SALABRASION
- 15011 SALABRASION
- 15015 PLASTIC SURGERY NECK
- 15830 REVISION OF LOWER EYELID
- 15821 REVISION OF LOWER EYELID

### Step 1a (if prompted): Enter a diagnosis code.

- In some cases you will be prompted to enter a diagnosis code.
- As you begin typing a diagnosis code, the field will begin looking for matching codes.



**CPT/HCPCS Code**

18228 REMOVAL OF BREAST IMPLANT

**ICD10 Code**

Diagnosis

**Search**

**ICD10 Code**

- T85.49
- T85.49 OTHER MECHANICAL COMPLICATION OF BREAST PROSTHESIS AND IMPLANT
- T85.49XA OTHER MECHANICAL COMPLICATION OF BREAST PROSTHESIS AND IMPLANT, INITIAL ENCOUNTER
- T85.49XD OTHER MECHANICAL COMPLICATION OF BREAST PROSTHESIS AND IMPLANT, SUBSEQUENT ENCOUNTER

### Step 1b (if prompted): Select applicable policy.

- In rare cases more than one policy applies to a procedure. You will be prompted to select the applicable policy for the service you are inquiring.

#### CPT/HCPCS Code

8719 THERAPEUTIC EXERCISES

#### Policy

Select a Policy

Select a Policy

Feeding/oral function therapy, pediatric

Physical and occupational therapy - habilitative

### Step 2: Click Search

- After all the prompted fields are complete, click the search button to submit your inquiry.

#### CPT/HCPCS Code

7022 REMOVAL OF BREAST IMPLANT

#### ICD10 Code

T64.001 OTHER MECHANICAL COMPLICATION OF BREAST

Search

### Results: PA requirements results\*

- The results of your inquiry display in a table with:
  - Codes: the codes submitted in your inquiry.
  - PA requirements: indicates if HealthPartners requires a prior authorization for this service and the applicable policy for the services.
- *The results in the following diagrams are for demonstration purposes only and are not indication of current PA requirements.*

### No Prior Authorization required.

- If no prior authorization is required your results will indicate “Not required for medical services\*”.
- If a current applicable policy is available, the link will be presented with the results.

Results as of 04/06/2020

Codes	PA requirements
22614 SPINE FUSION EXTRA SEGMENT	Not required for medical services *
R29.737 NIHSS SCORE 37	See <a href="#">Physical and occupational therapy - habilitative</a>

HealthPartners Prior Auth procedures and service items are typically consistent across products. Info in this application may change and is not a payment guarantee or quote. Note: this does not include all terms and conditions under a member's benefit plan. This tool cannot be used to determine the requirements for behavioral health, and pharmacy prior authorizations.

[Clear search results](#)

### Prior authorization (PA) required.

- If a prior authorization is required, the results will clearly indicate “Yes” a PA is required.
- A link to the applicable policy is available.
- Create a PA button is available to proceed with submitting your PA request.

Results as of 04/06/2020

Codes	PA requirements
19326 REMOVAL OF BREAST IMPLANT	Yes
T85.49X5 OTHER MECHANICAL COMPLICATION OF BREAST PROSTHESIS AND IMPLANT, SEQUELA	See <a href="#">Breast surgery</a>

HealthPartners Prior Auth procedures and service items are typically consistent across products. Info in this application may change and is not a payment guarantee or quote. Note: this does not include all terms and conditions under a member's benefit plan. This tool cannot be used to determine the requirements for behavioral health, and pharmacy prior authorizations.

[Clear search results](#)




[Create a PA](#)

## Misc. features

### Create a list of PA requirements

- If your patient needs multiple services, you can build a list of the PA requirements for each item.

Results as of 04/09/2020

Codes		PA requirements
97110	THERAPEUTIC EXERCISES	Yes See <a href="#">Physical and occupational therapy - habilitative</a> 
19328 T85.49XS	REMOVAL OF BREAST IMPLANT OTHER MECHANICAL COMPLICATION OF BREAST PROSTHESIS AND IMPLANT, SEQUELA	Yes See <a href="#">Breast surgery</a> 
30520	REPAIR OF NASAL SEPTUM	Not required for medical services* See <a href="#">Rhinoplasty and septorhinoplasty</a> 

### Create a PA

- When a prior authorization is required, the option to Create a PA is also presented.
- The Create a PA function will direct you to resources for submitting a prior authorization request. If you are not logged in, you will first be prompted to log in and then directed to prior authorization resources.

### Clear results

- Clears the table of previous inquiries.
- It is recommended to clear results between searching for services patient by patient.

### Coverage criteria

- [Coverage criteria](#) link will bring you to the searchable list of all HealthPartners coverage criteria policies.