

ECONOMICS & REIMBURSEMENT

## PHYSICIAN OFFICE PRIOR AUTHORIZATION SUPPORT

# Tool Kit Instructions United Healthcare Prior Authorization for Catheter Ablation for Atrial Fibrillation\*

\*This toolkit provides suggested instruction and summary of the United Healthcare guidelines for facilitating their prior authorization requirements. It is not an endorsed resource of United Healthcare as providers are highly encouraged to review the United Healthcare policy and requirements for prior authorization and medical guidelines. Please do NOT include this form in your submission to the payer.

As of July 1, 2020, United Healthcare has required a prior authorization for Catheter Ablation for Atrial Fibrillation for CPT<sup>‡</sup> codes 93656 and 93657 as it relates to their commercial plans. For United Healthcare Medicare advantage plans, the prior authorization requirements went into effect on September 1, 2020.

This Prior Authorization Tool Kit is designed to help your office with the process of confirming coverage and submitting a prior authorization requests to United Healthcare for your patients who would benefit from a catheter ablation for atrial fibrillation.

## The United Healthcare Prior Authorization Toolkit

The "tools" enclosed in this package will assist you in identifying and providing specific information to United Healthcare in order to prior authorize the Catheter Ablation for Atrial Fibrillation and includes the following documents:

- Checklist of applicable CPT<sup>‡</sup> codes and the required information when submitting a prior authorization via the United Healthcare site.
- Sample Letter of Medical Necessity

### The Prior Authorization Process for United Healthcare

For patients insured by United Healthcare, coverage for catheter ablation for atrial fibrillation requires a prior authorization based on the effective dates below:

United Healthcare	Commercial Membership	Effective 7.1.2020
United Healthcare	Medicaid Membership	Effective 9.1.2020
United Healthcare	Medicare Advantage Membership	Effective 9.1.2020

## **Submission Process**

The following is a checklist reminder of the key steps involved in the process of verifying patient information, health plan benefits and obtaining insurance pre-authorization, as required:

•	Obtai	n Patient Specific Information	
		Collect patient information including patient consent release	
		Collect United Healthcare benefit plan information (e.g., plan type, insurance number(s), copy of card(s), contact information)	
		Gather patient specific clinical documentation (e.g., diagnosis code(s), relevant history and physical to include member symptoms and pertinent findings that demonstrate catheter ablation is appropriate, reversible cause of the atrial fibrillation is absent, the patient is able to be anticoagulated during the procedure and for at least 2 months afterwards, and letter of medical necessity if required)	
	ease refe quiremen	r to the Prior Authorization Checklist for Implanting Physician(s) for a complete list of documentation nts.	
•	Verify	Benefits	
		Contact United Healthcare and verify benefits and patient out-of-pocket costs (e.g., co-pay, deductible and out-of-pocket maximum)	
		Verify eligibility and medical policy requirements for catheter ablation for atrial fibrillation	
		Verify physician and facility network contract status with United Healthcare	
		Verify United Healthcare requirements for prior authorization through their internet portal or by phone	
•	Subm	it Request to United Healthcare	
		Go Online to <a href="https://www.uhcprovider.com/en/prior-auth-advance-notification/prior-auth-app.html">https://www.uhcprovider.com/en/prior-auth-advance-notification/prior-auth-app.html</a>	
		and submit prior authorization request with information noted above	
		Or Call 877-842-3210 and submit a prior authorization	
		Attach requested clinical documentation	
		Submit request and create a follow-up alert	
•	Follov	v up with United Healthcare	
	0	Routinely follow up with United Healthcare	
	0	Document your phone calls and interactions with United Healthcare, including date, time, and name of contact person	
	0	Obtain reference numbers for your calls	
	0	Prior authorization approval can generally take between 3-30 days, depending on the payer	
	0	If approved, document approval number	
•	Appea	al if Needed	
		Request a copy of the denial in writing	
		Make sure the physician and patient want to appeal the denial	
		If an appeal is required, contact United Healthcare to determine their appeal process	
		Attach requested documentation to appeal form and submit	
		Follow up with United Healthcare for final prior authorization decision	

## **Additional Coverage Support**

If you have questions pertaining to the prior authorization process for catheter ablation for atrial fibrillation, please contact the Abbott Reimbursement Hotline at 855-569-6430 or <a href="mailto:AbbottEconomics@abbott.com">AbbottEconomics@abbott.com</a>.

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