

June 27, 2023

Subject: Presbyterian Will Update its Medical Policy Manual and Prior Authorization Guide on Aug. 1

Presbyterian Health Plan, Inc. and Presbyterian Insurance Company, Inc. (Presbyterian) are updating the Medical Policy Manual and Prior Authorization Guide. **Effective Aug. 1, 2023**, Presbyterian will add and/or modify the following procedures in the Medical Policy Manual and Prior Authorization Guide:

- Allergen Immunotherapy
- Allergy Testing
- Application & Use of Tissue Engineered Bioengineered Skin Substitutes
- Cancer Clinical Trials
- *Retired* Cervical and Lumbar Spinal Procedures
- DME: Orthotics and Prosthetics
- Epidural Corticosteroids Injections Back Pain
- Extracorporeal Photopheresis
- Gender Affirming Treatment for Children and Adolescents (17 years of age and younger)
- Gender Affirming Treatment and Surgery (Adult, 18 years of age and older)
- Genetic Testing: Next-Generation Sequencing
- Investigative & New Technology Assessment List (Non-Covered Services)
- *New Policy* Lumbar Artificial Disc Replacement
- *New Policy* Percutaneous Arteriovenous Fistula (pAVF) for Hemodialysis
- Pharmacogenomics Testing for Behavioral Health, for Medicare
- Restorative/Reconstructive/Cosmetic Surgery and Treatment

For specific information about the updates to each of the above procedures, providers may review Presbyterian's Prior Authorization Guide & Medical Policy Manual Summary of Updates at https://onbaseext.phs.org/PEL/DisplayDocument?ContentID=PEL_00957317.

The following resources are available to providers to verify whether a prior authorization is required:

- **Medical Policy Manual:** www.phs.org/providers/resources/medical-policy-manual
- **myPRES Provider Portal Prior Authorization Tool:** www.phs.org/mypres
- **Prior Authorization Check Tool:** <https://prescoverage.phs.org/ac/>

- **Prior Authorization Guide:** www.phs.org/providers/authorizations

Providers must submit prior authorization requests as the resources on the previous page indicate.

For guidance on how to navigate the prior authorization tools on the provider portal, providers can view the myPRES Prior Authorization Manual at www.phs.org/providermanual. If providers have any questions or need assistance, then they should contact their Provider Network Operations relationship executive.

As always, thank you for continuing to partner with us to improve the health and wellness of the patients, members and communities we serve.

Healthy regards,

Provider Network Operations

Provider Network Operations



Hours: Monday through Friday, 8 a.m. to 5 p.m.



Phone: (505) 923-5757 or 1-888-923-5757 (toll-free)

Contact Guide: www.phs.org/ContactGuide



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