



PROVIDER FAX

To: Providers of Clear Health Alliance

Date: July 13, 2015

Re: Revisions to Quick Authorization Form (QAF)

CLEAR HEALTH ALLIANCE MEDICAID

This fax serves as a notice of revisions made to the Quick Authorization Form (QAF) - No Authorization Required (revision date 6/22/15).

Clear Health Alliance does not require prior authorization for codes listed in our QAF. Procedures and tests not on the QAF require authorization from the health plan.

Please note that as stated on the QAF (Quick Authorization Forms), **the QAF is intended to be used only by PCP's and not specialist providers.**

The forms can be found on our Provider Portal.

Go to www.clearhealthalliance.com, and under the Provider Menu bar at the top of the page, select Provider Portal.

Please disregard all QAF Forms other than those with a revision date of **6/22/15** located on the bottom corner of the form.

Sincerely,

Dr. Vincent Pantone, MD

Chief Medical Officer, Clear Health Alliance offered by Simply Healthcare Plans

QAF-NO AUTHORIZATION REQUIRED FORM (MEDICAID)

For **participating** Primary Care Providers **only** to refer to a participating specialist or diagnostic center for the codes listed below
Do not use for Hospitals, ASC's or for Prenatal care visits/treatment.

VALID FOR 90 DAYS

For questions, please call 1-877-915-0551, Prompt 2

Member Name:	ID#:	DOB:
Date:	Phone:	
PCP Name:	Phone:	Fax:
Referred to Specialist Name:	Extremities Studies, choose: <input type="checkbox"/> RUE <input type="checkbox"/> LUE <input type="checkbox"/> RLE <input type="checkbox"/> LLE <input type="checkbox"/> Bilat UE <input type="checkbox"/> Bilat LE	
Specialist Address (Street, City, Zip):		
Diagnosis Code(s) (required):		
Provider Signature (required):		

SPECIALIST OFFICE VISITS
NOT VALID FOR BARIATRIC SURGERY CONSULTATIONS
Levels 4 & 5 require supporting medical documentation with the claim.

New 99201 – 99205
 Established 99211 – 99215
 New or Established 99241 – 99245

ALLERGY AND PPD

Scratch Test 95004
 Intradermal Test 95024
 Patch Test 95044
 Allergy Injections 95115, 95117, 95165
 PPD Skin Test 86580

CARDIOLOGY TESTS

Doppler Echo Exam 93320, 93321
 Doppler Color Flow 93325
 Echo Exam Heart 93303-93308
 24-Hour Holter Monitor 93224
 Pacemaker Interrogation 93288
 AICD Interrogation 93289
 Stress Test, non-nuclear 93015
 Stress Echo 93351
 EKG 93000

PULMONARY FUNCTION

Spirometry 94010, 94060
 Vital Capacity 94150
 Lung Volume, Gas 94727
 Ear or Pulse Oxymetry 94760
 Aerosol Therapy 94640, 94664
 Carbon Monoxide Diffusing Capacity 94729

INJECTIONS

Betamethasone J0702
 Ceftriaxone Sodium, Per 250 mg J0696
 Dexamethasone J1100
 Methylprednisolone J1020, J1030, J1040
20 mg, 40 mg, 80 mg
 Penicillin g benzathine, 100,000 units J0561
 Triamcinolone Acetonide 10 mg J3301
 Testosterone Cypionate 100 mg J1070
 Therapeutic, prophylactic, or diagnostic injection 96372

NEUROLOGY

EEG 95812, 95816, 95819
 EMG 95885, 95886
 Muscle test one limb 95860
 Muscle test 2 limbs 95861
 Muscle test 3 limbs 95863
 Muscle test 4 limbs 95864
 Muscle test larynx 95865
 Muscle test hemidiaphragm 95866
 Muscle test cran nerv unilat 95867
 Muscle test cran nerve bilat 95868
 Muscle test thor paraspinat 95869
 Muscle test nonparaspinat 95870
 Nerve Conduction Study 95910 – 95911

DERMATOLOGY

Drainage Skin Abscess 10060 – 10160
 Excision - Debridement 11000 – 11004
 Biopsy Skin Lesion 11100 – 11101
 Shaving Dermal Lesion 11300 – 11313
 Excision Benign Lesion 11400 – 11402, 11420 – 11422, 11440 – 11442
 Excision Malignant Lesion 11600 – 11602, 11620 – 11622, 11640 – 11642
 Wound Closure/Repair 12031, 12032, 12041, 12042, 12051, 12052
 Destruction of Lesion 17000 – 17003, 17110
 Destruction Malignant Lesion 17260 – 17263, 17270 – 17273, 17280 – 17283
 Nail Biopsy 11755

FRACTURE CARE

ARM 23600, 24500, 24505, 24530, 24535, 24560, 24565, 24576, 24577, 24600, 24620, 24640, 24650, 24655, 24670, 24675, 25500, 25505, 25520, 25530, 25535, 25560, 25565, 25600, 25605, 25622, 25624, 25630, 25635, 25650, 25660, 25675, 25680, 25690, 29085
 HAND 26600 – 26605
 HEEL-TOE-FOOT 28400, 28405, 28430, 28435, 28450, 28455, 28470, 28475, 28490, 28495, 28510, 28515
 LEG 27500, 27501, 27508, 27510, 27516, 27520, 27530, 27538, 27550, 27560, 27750, 27752, 27760, 27780, 27781, 27786, 27788, 27808, 27810, 27816, 27824, 27830
 RE-CASTING Q4001 – Q4051, 29065, 29075, 29105, 29125, 29260, 29345, 29355, 29405, 29425, 29505, 29515, 29530, 29540, 29550

GYNECOLOGY

Well Woman Exam (initial visit) 99384 – 99387
 Well Woman Exam 99394 – 99397
 Vaginal Irrigation 57150
 Pap Smear 88150
 Colposcopy without biopsy 57452
 Colposcopy with biopsy 57454
 Cryocautery 57510 – 57511
 Cone Biopsy 57520
 Endometrial Biopsy 58100
 Pregnancy Test 81025
 Wet Mount Stain, O&P, fungi 87210
 IUD Device J7300
 IUD Device & Insertion J7301, J7302
 IUD Insertion/Removal 58300, 58301
 Tissue Exam with KOH 87220
 Pessary Fitting/Insertion 57160
 Contraceptive Implant J7307

GYNECOLOGY CONT.

Insertion, drug delivery implant 11981
 removal, drug delivery implant 11982
 removal with reinsertion, drug delivery implant 11983
 Medroxyprogesterone Acetate 1 mg J1050

OFFICE PROCEDURES

Injection of Tendon 20550 – 20553
 Drain/Inject Joint 20600, 20605, 20610
 Laryngeal Endoscopy 31505, 31575
 Control of Epistaxis 30901
 Cystoscopy 52000 – 52240
 PVR 51798
 Removal Impacted Ear Wax 69210
 Nasal/Sinus Endoscopy 31231, 31233, 31237
 Nasopharyngoscopy 92511
 Removal Foreign Body/Ear 69200
 Removal Foreign Body/Nose 30300
 Insertion Non-Indwelling Catheter 51701
 Insertion Indwelling Catheter 51702
 Unna boot 29580
 Binocular microscopy 92504
 UA 81002-81003
 Labor Check 59025

CT SCANS
CHOOSE ONE: Plain w/Contrast

Head or Brain 70450 – 70470
 Orbit, Sella, Posterior Fossa, Ear 70480 – 70482
 Neck Soft Tissue 70490 – 70492
 Thorax 71250 – 71270
 Cervical Spine 72125 – 72127
 Thoracic Spine 72128 – 72130
 Lumbar Spine 72131 – 72133
 Abdomen 74150 – 74170, 74176 – 74178
 Pelvis 72192 – 72194
 Upper Extremities 73200 – 73202
 Lower Extremities 73700 – 73702

X-RAY/DIAGNOSTICS

Head and Neck 70030 – 70260
 Neck Soft Tissue 70360
 Chest 71010 – 71035
 Ribs, Sternum 71100 – 71130
 Spine 72010 – 72120
 Pelvis 72170 – 72190
 Upper Extremities 73000 – 73140
 Lower Extremities 73500 – 73660
 Abdomen 74000 – 74022
 GI Tract/Upper GI 74240 – 74249
 Swallow Study 74230
 Small Bowel 74250 – 74260
 Barium Enema 74270, 74280
 IVP 74400 – 74410
 Urography 74420, 74425
 Cystography 74430
 Urethrocytography 74450

X-RAY/DIAGNOSTICS CONT.

VCUg 74455
 Bone Eval/Survey 77074 – 77077
 DEXA Bone Density 77080, 77081, 77085, 77086
 Mammogram 77051, 77052, 77055, 77056, 77057
 Digital Mammogram G0202, G0204, G0206, 77051, 77052

ULTRASOUNDS

Venous Doppler Unilat 93971
 Arterial, Extremity 93922
 Extremity, Nonvascular 76881 – 76882
 Thyroid or Head/Neck 76536
 Breast 76641, 76642
 Transvaginal 76830
 Abdominal 76700
 Abdominal (Quadrant/Region/Organ) 76705
 Retroperitoneal 76770, 76775
 Pelvic 76856 – 76857
 Scrotal, Transrectal 76870 – 76873
 Carotid 93880, 93882
 Transplanted Kidney 76776

SPECIALTY SERVICES
Refer to contracted network provider if noted with an asterisk()

***AUDIOLOGY**

Hear USA: (800) 731-3277, Select Option 1

AUDIOLOGY - OFFICE PROCEDURES
92540 - 92545, 92547, 92550, 92555, 92567, 92570 - 92572, 92579, 92582, 92585, 92587, 92588, 92620, 92621, 92626, 92627

***DIABETIC SUPPLIES**

Neighborhood Diabetes: (800) 937-3028

***OPTOMETRY**

Florida Eye Care: (877) 481-3322, Opt.1

***OPHTHALMOLOGY**

Premier Eye: (800) 738-1889

***DENTAL- ADULTS**

DentaQuest: (800) 936-0948

***BEHAVIORAL HEALTH**

PsychCare: (800) 221-5487

***TRANSPORTATION**

For inquiries, refer to the back of the member's ID card for information.