



SilverSummit Healthplan

Prior Authorization Process

Prior Authorizations



We Encourage our Providers to refer to the PA list found in our Web Portal at www.silversummithealthplan.com



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FOR PROVIDERS

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Become a Provider

Pre-Auth Check

Medicaid Pre-Auth

Pre-Auth Check

Use our tool to see if a pre-authorization is needed. It's quick and easy. If an authorization is needed, you can access our login to submit online.

Pre-Auth Check Tool - [Medicaid](#)

Prior Authorizations



Services requiring Prior Authorization by **SilverSummit** include:

- Inpatient admissions
- Observation Stay
- Select ancillary services
- Select behavioral health services
- Radiology: high-tech diagnostics – National Imaging Associates, Inc. (NIA)
- More than two OB ultrasounds
- Pain management programs
- Transplants
- All non-participating providers/services (except emergent)

Prior Auth Continued



All Out of Network (Non-Par) services require prior authorization, excluding family planning, emergency room, and table top x-ray.

Use the "Pre-Auth Required" Tool at silversummithealthplan.com to quickly determine if a specific service requires authorization.



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Prior Authorizations can be submitted:



- Electronically through the secure Provider Portal
 - www.silversummithealthplan.com
- Call 1-844-366-2880
- Prior Auth Fax Numbers
 - Medical PA FAX: 1-844-367-7022
 - Behavioral Health : 1-855-868-4940

Utilization Review



- *A Level I review* is conducted on covered medical benefits by a SSHP Case Manager
 - SSHP uses Interqual Criteria
 - SSHP also uses Clinical Guidelines for cases where Interqual does not have sufficient criteria available for a review
- *A Level II review* is conducted by the Plans Medical Director
 - All Adverse Decisions are made by the Medical Director