



**BEHAVIORAL HEALTH SERVICES  
PRIOR AUTHORIZATION LIST  
FOR DATES OF SERVICE ON OR AFTER JANUARY 1, 2015**

Cigna-HealthSpring is committed to providing our customers with the highest quality and greatest value in health care benefits and services. Managing the behavioral health benefits of our customers allows Cigna-HealthSpring the opportunity to demonstrate this commitment by recognizing overall needs and providing better care.

**Cigna-HealthSpring Prior Authorization (PA) Policy**

Health care professionals should **OBTAIN** Prior Authorization BEFORE services requiring Prior Authorization are rendered. Prior Authorization may be obtained via HealthSpring Connect (HSC) or by calling the authorization line at 1-866-780-8546. Please see the HealthSpring Connect section of the provider manual for an overview of the HSC portal capabilities and instructions for obtaining access.

**Notification**

Notification is required within 24 hours of admissions; clinical staff is available 24 hours a day, 7 days a week to assist with notification and precertification requests.

**IMPORTANT** – Prior Authorization is not a guarantee of benefits or payment at the time of service. Remember, benefits will vary between plans, so always verify benefits.

Procedures/Services	PA Required	PA Not Required	Comments
Admissions			Admissions include: <ul style="list-style-type: none"> <li>• Inpatient Mental Health</li> <li>• Inpatient Detoxification</li> </ul>
Partial Hospitalization Program (PHP) (Includes Mental Health and Substance Abuse)			
Electroconvulsive Therapy (ECT)			
Psychological Testing			

**Services Requiring No Authorization by Participating Provider**

Cigna-HealthSpring will continue to offer the outpatient services **listed below** without the requirement of a prior authorization. Any service not listed will continue to utilize the standard authorization process.

CPT Code	DESCRIPTION	Report with Psychotherapy Add-On Codes
90791	Psychiatric diagnostic evaluation (no medical services)	
90792 (or New Patient E & M codes)	Psychiatric diagnostic evaluation with medical services	
<u>Out Patient</u> 99201-99205 99211-99215	New Patient Visit (10-60 min) Established Patient (5-25 min)	Psychotherapy Add On Codes: (when appropriate)
<u>Nursing Facility</u> 99304-99306 99307-99310	New Patient Visit (10-45 min) Established Patient (10-35 min)	90833-30 min 90836-45 min 90838-60 min
90832	Psychotherapy (30 min)	
90834	Psychotherapy (45 min)	
90837	Psychotherapy (60 min)	
90846	Family Psychotherapy (without patient present)	
90847	Family Psychotherapy (with patient present)	
90853	Group Psychotherapy (other than of a multiple-family group) <i>Physicians Office Only ~ Facilities Require Prior Authorization.</i>	
Q3014	Telehealth	