

# **Referrals and Prior Authorizations**

# **Member Tips**

# Banner Medicare Advantage Dual HMO D-SNP | Banner Medicare Advantage Prime HMO

### Referrals

Your network Primary Care Provider (PCP) does not need to give you a referral before you can use other providers in the plan's network, such as specialists, hospitals, skilled nursing facilities, or home health care agencies. Referrals from your PCP are also not required for emergency care or urgently needed services.

If your PCP requests a specific medical procedure, you may need Prior Authorization from the health plan.

## **Prior Authorizations**

If you have a referral to an out-of-network provider or procedure, you will need to have this service authorized by the plan.

The PCP or specialty care provider is responsible for submitting the appropriate information on the Prior Authorization Form.

Q: When will the Prior Authorization be completed?

Standard requests	within 14 calendar days from receipt of the request
Standard Part B medication requests	within 72 hours from the time of request
Expedited requests	within 72 hours from the time of receipt of the request
Expedited Part B medication requests	within 24 hours from the time of request

### **Helpful Hint**

If you have not received any updates on the status of your referral and/or prior authorization in 14 calendar days or have questions, please reach out to the Customer Care Center phone number located on the back of your insurance ID card.

# **Banner Medicare Advantage Plus PPO**

### **Referrals and Prior Authorizations**

Referrals are not required from your Primary Care Provider (PCP) for covered services from network providers and medical specialists.

You don't need to get a referral or prior authorization when you get care from out-of-network providers. Before getting services from out-of-network providers, you may want to ask for a previsit coverage decision to confirm that the services you are getting are covered and are medically necessary.

### **Helpful Hint**

If you have any questions on whether a provider or service is in network or out-of-network, please reach out to the Customer Care Center phone number located on the back of your insurance ID card.