OptumCare New Mexico, LLC d.b.a., Optum Care Network of New Mexico

2025 Optum Care Network of New Mexico Medicare Advantage prior authorization requirements

Effective Jan. 1, 2025

General information

Prior authorization is not required for emergency or urgent care.

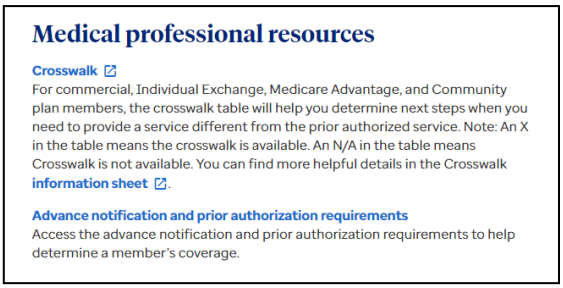
Plans with referral requirements: If a member's health plan ID card states *Referral required*, certain services may require a referral from the member's primary care provider and prior authorization obtained by the treating physician.

Out-of-network

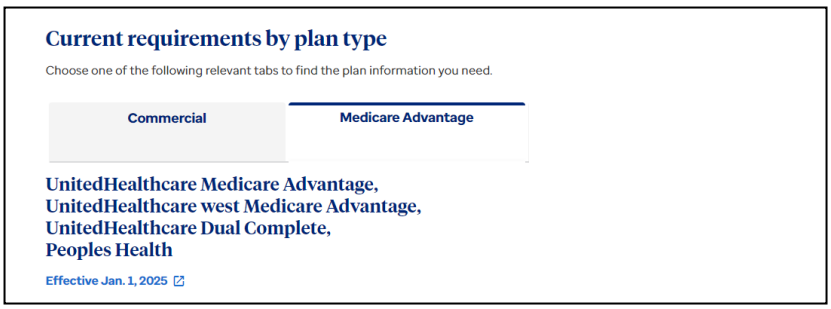
All out-of-network hospitalizations, surgeries, procedures, referrals, evaluations, services and treatment require prior authorization. All out-of-network providers require prior authorization for any service rendered.

To view prior authorization requirements for UHC Medicare Advantage Providers:
Online: uhcprovider.com > Select *Coverage and payments* > Select *Prior Authorization*

Under *Medical professional resources*, select *Advance Notification* and *prior authorizations*

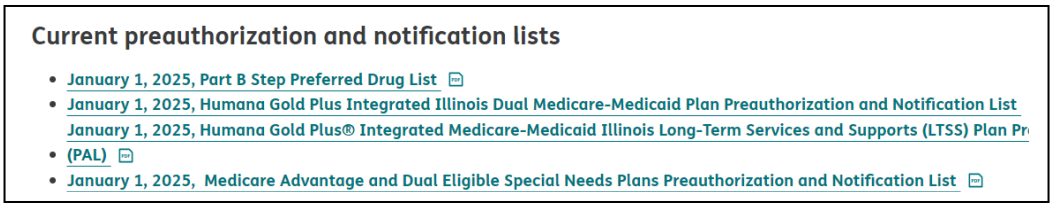


Under *Advance Notification Prior Authorization Requirements*, scroll down to *Current Requirements by plan type*, select *Medicare Advantage*; click the date link

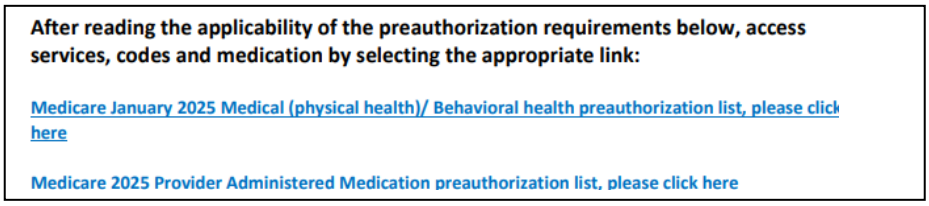


To view prior authorization requirements for Humana Medicare Advantage Providers:

- **Online: humana.com/provider/medical-resources/authorizations-referrals/preauthorization-lists >** Under *Current preauthorization and notification lists*, select *Medicare and Dual Medicare-Medicaid Plans Preauthorization and Notification List*



Options: *Medical codes list* and *Medication code list*



To view prior authorization requirements for Presbyterian Health Plan Providers:

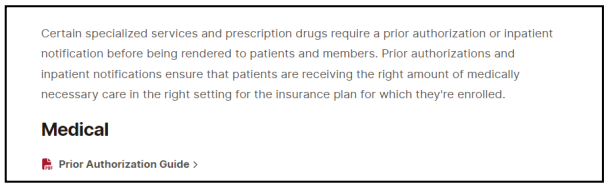
For Advanced Imaging

Online: onbaseext.phs.org/PEL/DisplayDocument?ContentID=OB_000000035647%20

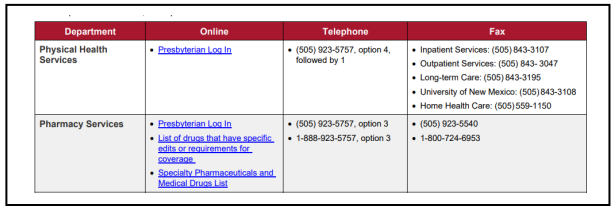
For Medical and Part B Medications

Online: phs.org/providers/authorizations > Select *Prior Authorization Guide*

- For medical codes, scroll down to the *Services Section* (Medicare Requirements are in the red section)



- For Part B Medications go to the *Pharmacy Department* in the red section under *Department* > select *Specialty Pharmaceutics and Medical Drugs List*



Department	Online	Telephone	Fax
Physical Health Services	• Presbyterian Log In	• (505) 923-5757, option 4, followed by 1	• Inpatient Services: (505) 843-3107 • Outpatient Services: (505) 843- 3047 • Long-term Care: (505) 843-3195 • University of New Mexico: (505) 843-3108 • Home Health Care: (505) 559-1150
Pharmacy Services	• Presbyterian Log In • List of drugs that have specific edits or requirements for coverage. • Specialty Pharmaceuticals and Medical Drugs List	• (505) 923-5757, option 3 • 1-888-923-5757, option 3	• (505) 923-5540 • 1-800-724-6953

To view prior authorization requirements for Blue Cross providers:

Online: bcbsnm.com/docs/provider/nm/mapd-pa-grid.pdf

To request prior authorization, please submit your request online:

- **Online:** To submit a prior authorization notification, sign in to **optumproportal.com** > select *Referrals & Prior Authorization*
- **Prior authorization Intake department phone (only if online not available): 877-370-2845**, TTY 711
- **Prior authorization department email: lcd_um@optum.com**