



Prior Authorization Program

Scott and White Health Plan (SWHP) has an ongoing commitment to provide our members with access to high-quality, cost-effective healthcare. As part of that commitment, we require prior authorization on multiple services for all member plans. Refer to the Tools and Resources section of our website for a list of services that require prior authorization.

In addition, we have chosen eviCore healthcare to provide benefits management services for certain covered services that require prior authorization.

SWHP members enrolled in SWHP's Commercial and Medicare Advantage programs will require prior authorization by eviCore for the following covered services (except in an emergency). This applies to services provided on or after the dates shown for each category below.

- **Advanced Imaging (PET/MRI/CT) and Nuclear Medicine**
(August 1, 2018)
- **Cardiology Imaging and Certain Procedures**
(September 1, 2018)
- **Joint, Spine, and Pain Management Procedures**
(October 1, 2018)

Your doctor should secure any authorizations needed. When your service is scheduled, your doctor will share the prior authorization details with the facility providing your service.

Prior authorization is not a promise that SWHP will cover the cost. Benefits will be determined once a claim is received and will be based on, among other things, your eligibility and coverage on the date service was rendered. If you have any questions, please call the number on the back of your ID card.

