



## Prior Authorization List

Authorizations are required for all procedures listed on the Prior Authorization List for all TRICARE beneficiaries in programs administered by TriWest Healthcare Alliance.

- Adjunctive Dental
- Comprehensive Interventional Pain Management
- Dental Anesthesia and Institutional Benefits
- Durable Medical Equipment
- Extended Care Health Option Services
- Home Health Care
- Home Infusion
- Hospice
- Inpatient Care at a Rehabilitation Facility
- Inpatient Hospitalization unless emergency
- Laboratory Developed Tests
- Lipectomy
- Long-term Acute Care
- Low Protein Modified Foods for the treatment of Inborn Errors of Metabolism
- Medical Oncology
- Mental Health
  - Applied Behavior Analysis Services
  - Eating Disorders above the level of outpatient therapy
  - Electroconvulsive Therapy
  - Hypnotherapy
  - Inpatient Care at a Residential Treatment Facility
  - Intensive Outpatient Program
  - Neuropsychological Testing
  - Non-emergency Inpatient Mental Health and Substance Use Disorder
  - Opioid Treatment Programs
  - Outpatient Mental Health Treatment for active duty service members
  - Partial Hospitalization Program Services



- Psychoanalysis
- Psychological Testing
- Residential Treatment Facility
- Spravato™ (esketamine) nasal spray shall be preauthorized under the medical benefit
- Substance Use Disorder Residential Treatment Facility Care
- Transcranial Magnetic Stimulation
- Vivitrol
- Organ and Stem Cell Transplants
- Pain Management
- Provisional Coverage for Emerging Services and Supplies, if required
- Skilled Nursing Facility Care
- Spine Surgeries