

For Providers Serving Members of Providence Health Plan **Powered by Collective Health**

How to Request Prior Authorization

If Cigna is the wrap network on the patient's plan, please follow these instructions:

- Providers who are in-area
 - Please submit PA requests to **American Health Holding** through any of the following methods:
 - **Phone:** 855-229-8599
 - **Fax:** 844-545-1622 (Please use [this request form.](#))
 - **Online:** collectivehealth.getprecert.com
- Providers who are out-of-area:
 - Please submit PA requests to **Cigna**:
 - **Phone:** 855-229-8599
 - For **fax** and **online** submission options, please refer to Cigna's website: [Precertifications and Prior Authorizations | Cigna Healthcare](#)

If Cigna is not the wrap network, please submit PA requests to **American Health Holding** through any of the following methods:

- **Phone:** 855-231-1569
- **Fax:** 844-545-1622 (Please use [this request form.](#))
- **Online:** collectivehealth.getprecert.com

Required documentation for prior authorization requests to American Health Holding

- Member ID, Group Number, Member Name, Employer, Member DOB, Network, Member Address
- Patient Name, Patient DOB, Relationship to Member
- Case Type (Inpatient or Outpatient), Urgency (Elective or Emergent)
- Admission Date/Estimated Date of Confinement (EDC), Procedure Date
- Facility Name, Address, Phone Number, and National Provider Identifier (NPI) or Taxpayer Identification Number (TIN)
- Provider Name, Address, Phone Number, Specialty, and National Provider Identifier (NPI) or Taxpayer Identification Number (TIN)
- Diagnosis Code(s) (i.e. ICD-10 code(s))
- Procedure Code(s) (i.e. CPT/HCPCS code(s))
- Priority of the PA (Urgent/Standard)

Services Requiring Prior Authorization

May be subject to exclusions based on benefit and contract terms

All Inpatient Hospital Admissions, including:

- Observation stays exceeding 47 hours.
- Acute Inpatient hospital admissions, including Obstetric admissions that exceed federal 1 (2 days for Vaginal, 4 days for C-section births)
- Long-Term Acute hospital admissions
- Inpatient Mental Health and/or Substance Use Disorder admissions
- Inpatient Rehabilitation facility admissions
- Residential Treatment Facility admissions
- Skilled Nursing Facility (SNF) admissions

For PAs submitted to American Health Holding refer to the following:

- **Providence Health Plans (except for PEBB)** use the [PHP Standard PA List](#)
- **PEBB** – Refer to the [PEBB PA List](#)
- **Intel** – Prior Authorization is required for out-of-network providers only.

For PAs submitted to Cigna:

- **Cigna** – Refer to the [Cigna PA list](#)

For required documentation and clinical criteria, please refer to any of the following resources.

- Call the Prior Authorization phone number on the back of the patient's member ID card.
- [Medical Policy, Reimbursement Policy, Pharmacy Policy, & Provider Information](#) – Please only reference policies, do not reference PA lists.
- [Self-funded Pharmacy Resources | Providence Health Plan](#)
- [Precertifications and Prior Authorizations | Cigna Healthcare](#) – Please only reference policies, do not reference PA lists.