Benefit Categories:
Mental Health Services
Neurobiological Disorders – Autism Spectrum Disorder Services
Substance Use Disorder Services

Provider’s Responsibility

The following is a listing requiring prior authorization (all States except CA):

- Partial/Day Treatment.
- Intensive Outpatient Program Treatment (IOP).
- Outpatient Electro-Convulsive Treatment (ECT).
- Psychological Testing,
- Extended Outpatient Treatment visits beyond 45-50 minutes in duration with or without medication.
- Intensive behavioral therapy/ Applied Behavioral Analysis (ABA) for the Treatment of Autism (when covered).

The following is a listing requiring prior authorization (CA Only):

- Partial Hospitalization/Day Treatment.
- Intensive Outpatient Treatment programs.
- Transcranial Magnetic Stimulation.
- Intensive Behavioral Therapy Treatment.