



HEALTH PLAN OF NEVADA  
A UnitedHealthcare Company



SIERRA HEALTH AND LIFE  
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Effective January 1, 2021, elective surgical procedures that are on the [Outpatient Surgical Procedures – Site of Service: CPT/HCPCS Code List](#) must be performed in a contracted ambulatory surgical center (ASC), unless there is a medically necessary reason for the member to have the surgery performed in an outpatient hospital center.

You can find a list of the criteria that is used to review for medical necessity in the [Outpatient Surgical Procedures – Site of Service](#) Utilization Review guideline. In addition to the criteria listed in the Outpatient Surgical Procedures – Site of Service guideline, a planned surgical procedure performed in a hospital outpatient department is considered medically necessary if there is an inability to access an ambulatory surgical center for the procedure due to any one of the following:

- There is no geographically accessible ambulatory surgical center that has the necessary equipment for the procedure; or
- There is no geographically accessible ambulatory surgical center available at which the individual's physician has privileges; or
- An ASC's specific guideline regarding the individual's weight or health conditions that prevents the use of an ASC.

The guideline and CPT/HCPCS Code List are available at [healthplanofnevada.com/provider](http://healthplanofnevada.com/provider) and [sierrahealthandlife.com/provider](http://sierrahealthandlife.com/provider) > I Need Help With > Review Protocols and search for "Outpatient Surgical Procedures – Site of Service" or "Outpatient Surgical Procedures – Site of Service: CPT/HCPCS Code List". There is also a link to the Applicable Codes List on page 5 of the Guideline.

If you do not have privileges at a contracted ASC, we request that you obtain them prior to 1/1/2021 to minimize delays in patient care. In addition to minimizing out of pocket costs for our members and improve cost efficiencies for the overall health care system, **prior authorization is not required if services are performed in a contracted ASC by a contracted provider; however, prior authorization will be required for surgical procedures performed in an outpatient hospital department.**

The Site of Service Medical Necessity Reviews will apply to all Health Plan of Nevada (including HMO, Point of Service, Exchange and Medicaid/Nevada Check-up) and Sierra Health and Life benefit plans.

If you have questions regarding this facsimile, please contact your Provider Advocate directly or Provider Services at (800) 745-7065 or [NorthernNVProviderAdvocateTe@sierrahealth.com](mailto:NorthernNVProviderAdvocateTe@sierrahealth.com).