

Prior Authorization Explanation

Dear Patient,

Prior Authorization may be required for one or more of the laboratory tests that your provider has ordered.

What is prior authorization?

Insurance companies use prior authorization to determine if a procedure, service, or medication will be covered under your medical plan before services are provided. Most insurance companies require prior authorization for certain, specialized types of laboratory tests. (Insurance companies also have specific medical criteria for genetic testing, even if prior authorization is not required.)

How does prior authorization work?

The Financial Clearance team at Yale New Haven Health works closely with both your insurance company and your healthcare provider to obtain the prior authorization needed for your test(s). Prior authorization typically takes 7-10 days. Depending on how long it takes, you may not be able to have the test done on the day of your visit. Once your insurance company authorizes the test, you may visit a Yale New Haven Health blood draw station. (A list of draw station locations will be available to you when you are notified of the approval.)

How will I know if my test is authorized?

Once your test is authorized, you will receive notice through your MyChart account or the preferred contact method listed in your Epic medical record. If you do not have a MyChart account, you can sign up online at mychart.ynhhs.org. You are also able to view the status of the prior authorization request by logging into your MyChart at mychart.ynhhs.org, click YOUR MENU, scroll down to INSURANCE and click REFERRALS.

What do I do if my insurance company denies the prior authorization for my test or the test is not a covered benefit under my policy?

The Financial Clearance team will contact your healthcare provider to determine next steps. If the insurance company still denies the request, you may opt to move forward with testing at a self-pay cost.

Your healthcare provider can answer questions you have about the need for the test and next steps.

What if I don't want to wait for the prior authorization?

If you wish to have this test without prior authorization from your insurance company, you may opt to sign a liability waiver stating that you will be responsible for covering the cost of the

test(s). Call 888-542-2925 and ask for the self-pay rate for your test(s) and how to sign the waiver electronically.

What if I have additional questions?

Every insurance plan is unique. Sometimes there are tests that fall into a category called “non-covered benefits”. These are benefits that an insurance plan will never pay for; this means that there is no coverage available with your insurance plan for this test. Contact your insurance company if you have questions about non-covered benefits or prior authorization.

We strongly encourage you to follow up with your insurance company, even if your test is authorized, so you fully understand any deductibles, co-pays or additional expenses you may have with testing.