

# Prior Authorization Services Guide

In order for the member to receive coverage for a certain service or supply, it may require a prior authorization. The prior authorization list below indicates services or supplies that require approval from Together with CCHP. However, it doesn't guarantee the service or supply will be covered. Coverage is determined by the member's benefit plan.

The following is not an all-inclusive list. Please be aware that this list may be amended from time to time to comply with federal requirements. Please contact Customer Service at 1-844-201-4672 if you're unsure that an item will be covered by your plan.

**Obtaining prior authorization** – The provider of the service usually submits the authorization for the service to Together with CCHP, however, it is ultimately your responsibility to ensure prior authorization was obtained before receiving services.

## Ambulance nonemergency air or ground

If you need to be transferred to another hospital that can provide a higher level of care or; if you need to be transferred to a nursing home, the facility will contact us for approval of the non-emergency transfer.

## Autism spectrum disorder services

Please review the Autism section of the covered services and the Autism exclusions for a further understanding of the services Together with CCHP will consider for authorization.

## Cosmetic procedures

Any procedure that could be considered cosmetic, including but not limited to:

- Breast reduction and mastectomy for Gynecomastia.
- A procedure that does not improve your ability to perform a bodily function may be considered cosmetic.
- Reconstructive procedures (excluding breast reconstruction surgery following mastectomy: Breast reconstruction following a mastectomy, immediate or delayed, does not require a prior authorization).

Together with CCHP will review the request from your doctor to determine whether the request will be approved. The prior authorization process is used for reconstructive surgeries to determine if the procedure is cosmetic or if the surgery will result in improved functioning of the member.

## Dialysis

Prior authorization is required for dialysis services; the facility will usually request the authorization from us.

## Durable medical equipment (DME)

Together with CCHP will decide if the equipment should be purchased or rented. Prior authorization is required if the purchase price or the monthly rental price is greater than \$500. There are DME codes that require an authorization despite their retail price. Your practitioner has access to a comprehensive list of devices that require an authorization.

## EEG / video monitoring

This service is used to determine if you are having seizures and/or what type of seizures you are having. This can be done at home or in the hospital. If you need to be taken off of your anti-seizure medications, inpatient hospitalization is often chosen for safety.

## Elective surgeries

Below is a list of elective surgeries that require a prior authorization:

- Knee arthroplasty (total)
- Elbow arthroplasty
- Shoulder arthroplasty
- Shoulder hemiarthroplasty
- Hip arthroplasty
- Hysterectomy
- Wrist arthroplasty
- Cervical and lumbar laminectomy, discectomy / microdiscectomy
- Sympathectomy by thoracoscopy or laparoscopy
- Urethral suspension procedures
- Electrophysiologic study and Implantable Cardioverter-Defibrillator (ICD) Insertion, transvenous

There may be other procedures that require an authorization; your practitioner has access to a comprehensive list of services that require an authorization.

## Genetic testing (including BRCA genetic testing)

Genetic testing has grown over the last few years. Many of the available tests do not have scientific evidence of their value in the treatment of diseases. Your genetic counselor may submit a request on your behalf for consideration.

## Hearing devices

**Bone-anchored hearing device:** If for some reason you are unable to wear an air conduction hearing device, Together with CCHP will consider the authorization of this service.

**Cochlear Implants:** If your hearing impairment is not correctable by the use of standard hearing aids, Together with CCHP will review to determine if you qualify for a cochlear implant, when requested by your doctor.

## Home health care

Home health care is indicated when you have a need for skilled nursing or therapy and a physical condition is preventing you from being able to use outpatient services. Home care is not indicated because of the lack of a caregiver in the home.

## Hospice care

Service for end-of-life care can be provided in your home or for short periods in a hospice respite facility. The providing agency has services available to you, including nursing, when your physician has determined that you meet the hospice criteria.

## Inpatient hospitalization

Stays for medical, surgical, behavioral health or delivery of a baby require notification within 48 hours of admission. The facility will usually report the admission to Together with CCHP, however, it is ultimately your responsibility to ensure authorization was obtained.

## Inpatient rehabilitation

This service requires prior authorization to help Together with CCHP determine the right level of care for you to continue your recovery after a hospitalization.

The facility will usually report the admission to Together with CCHP, however, it is ultimately your responsibility to ensure prior authorization was obtained.

Together with CCHP will ask the facility for specific information about your progress toward your prior functioning level to make sure you are receiving the care that will help to return to your best level of functioning.

## Mental health services

**Inpatient:** Stays require notification within 48 hours of admission. When you are admitted to the hospital, Together with CCHP must be notified within 48 hours. The hospital usually submits the notification, however, it is ultimately your responsibility to ensure prior authorization was obtained.

**Partial hospitalization:** This service must be approved by Together with CCHP before you are admitted, treatment for mental health partial hospitalization is usually six to eight hours per day, from five to six days per week. The provider of the service usually submits the notification, however, it is ultimately your responsibility to ensure prior authorization was obtained.

**Intensive outpatient:** This service must be approved by Together with CCHP before you are admitted; treatment for mental health intensive outpatient service is usually three to four hours per day, from three to five days per week. The provider of the service usually submits the notification however, it is ultimately your responsibility to ensure prior authorization was obtained.

## Pain management procedures

Including but not limited to: epidural steroid injections, radio frequency ablation and spinal cord stimulators.

Chronic pain is a difficult issue. Together with CCHP would like to determine whether you are accessing all of the treatment methods to help you improve your chronic pain. A case manager from Together with CCHP may contact you to help you in coordinating your care.

## PET Scans

This diagnostic service requires a prior authorization.

## Prosthetic devices

Prosthetics are comprised of many pieces. Together with CCHP uses the prior authorization process to determine the pieces that will serve you best.

## Proton beam therapy (PBT)

These services require prior authorization to ensure that you are receiving comprehensive treatment for your condition.

## Radiation oncology

These services require prior authorization to ensure that you are receiving comprehensive treatment for your condition. A case manager from Together with CCHP may contact you to help you in coordinating your care during this treatment.

## Skilled nursing facility

After a hospitalization, your follow-up care may require the services of a nurse and/or therapy to help you return to a safe functional level. If the amount of service you require is more than can be delivered by home care services, you may need a short stay at a nursing home.

Together with CCHP will evaluate your needs by the prior authorization process, looking for the appropriate level of care. The lack of a caregiver at home does not qualify as the reason for admission. Skilled nursing facility admissions have a limited amount of days per occurrence.

## Specialty medications

These medications are reviewed by a pharmacist. Some medications may require you to try other medications, a substitute, or a generic form of the medication before the requested medication will be considered.

## Substance use disorder services

Including the following levels of care:

- **Inpatient:** When you are admitted to the hospital, Together with CCHP must be notified within 48 hours. The hospital usually does the notification, however, it is ultimately your responsibility to ensure prior authorization was obtained.
- **Partial hospitalization:** This service must be approved by Together with CCHP before you are admitted; treatment for substance use disorder partial hospitalization is usually six to eight hours per day, from three to seven days per week. The provider of the service usually submits the authorization for the service, however, it is ultimately your responsibility to ensure prior authorization was obtained.
- **Intensive outpatient:** This service must be approved by Together with CCHP before you are admitted; treatment for substance use disorder intensive outpatient service is usually three to four hours per day, from three to five days per week. The provider of the service usually submits the authorization for the service, however, it is ultimately your responsibility to ensure prior authorization was obtained.

## Transplants

Including all implantable cardiac mechanical devices for destination therapy (DT) or bridge transplant (BTT). This excludes corneal transplant or keratoplasty.

When you start your evaluation for a transplant, the transplant clinic will submit an authorization request and another request may be submitted when you are listed for the transplant after the evaluation is completed. It is ultimately your responsibility to ensure prior authorization was obtained. A case manager from Together with CCHP may contact you to help you in coordinating your care.