

Affiliated Physicians & Employers Health Plan

A NJ Self-Insured MEWA

Services Requiring Pre-Authorization

The following services require pre-authorization from the Medical Management Department Prior to receiving services. The member Primary Care Physician or Specialist must contact the Medical Management Department for pre-authorization. As a result of new technologies, prior authorizations include, but may not be limited to the following list.

Medical Management - 1-888-670-8135

All Inpatient Admissions Including:

- Acute Care
- Hospice
- Mental Health and Substance Abuse
- Rehabilitation
- Skilled Nursing
- Subacute Care

Note: Elective inpatient admissions and outpatient services require Pre-authorization at least five (5) days before the scheduled admission. A Pre-authorization penalty will be applied to the facility claim if no Pre-authorization is received within the five (5) days before an elective procedure on the Pre-authorization list or if requested after the required five (5) days' notice.

Outpatient And Ambulatory Surgery, For Only The Procedures Listed Below:

- Blepharoplasty (eyelid surgery)
- Dialysis
- Foot Surgery using CPT Codes 28285 through 28299
- Gynecomastia Surgical Procedures (removal of excess tissue from the male breast)
- Keloid revisions (removal of scar tissue)
- Mammoplasty, reduction (breast reduction)
- Mastopexy (surgical revision of a breast or other breast surgery, whether female or male)
- Otoplasty (external ear surgery)
- Partial Hospital Stay for Behavioral Health
- Rhinoplasty (plastic surgery of the nose)
- Septoplasty (reconstruction of the partition between the nasal cavities)
- Spinal Surgical Procedure (i.e: Microdiscectomy, Percutaneous Discectomy, Laminectomy)
- Turbinectomy (removal of nasal walls)
- Uvuloplasty (surgery of the soft palate of mouth)

Pain Management Programs/ Treatment Including:

- Cryodeneration (freezing of nerves for pain relief)
- Epidurals (anesthesia into the spinal canal for pain relief)
- Facet Injections (injections into a spinal joint)
- Intrathecal (spinal canal) Pumps
- Radiofrequency denervation (procedure to destroy a nerve for relief of pain)
- Sacroiliac joint injections (injection into lower back for pain relief)
- Spinal cord stimulators

Other outpatient services:

- Ankle Foot Orthotics, Custom fitted (those custom braces made for support above the foot)
- Autologous chondrocyte implantation, Carticel®
- Braces, Custom fitted (support of a body part)
- Durable Medical Equipment (purchases greater than \$500)
- Durable Medical Equipment All Rentals
- Homecare, Hospice, Home Infusion
- Hyperbaric Oxygen Therapy
- Infertility (treatment for those that are unable to conceive, must have coverage under the Plan Benefits)
- Investigational/Experimental Services
- Obstetrical Ultrasounds greater than three (3) per pregnancy (test to visualize a fetus in the uterus)
- Outpatient Infusion therapy, excluding Cancer Chemotherapy (medicine or fluids into veins)
- Polysomnography (attended sleep Lab studies)
- Prosthetics (artificial body parts)
- Proton Beam Radiotherapy
- Rehabilitation (cardiac, cognitive, occupational, physical, pulmonary, speech therapy)
- Transplant evaluations

Cardiac Services Including*: (Effective 10/01/2016)

- Cardiac Catheterization
- Nuclear Cardiology (stress test, imaging)
- Stress Echo

Radiology Services Including*: (Effective 10/01/2016)

- 3D- Imaging (3D Rendering of CT, MRI, ultrasound, or other tomographic modality)
- CT Scan (computerized axial tomography)
- MRA (magnetic resonance angiogram)
- MRI (magnetic resonance imaging)
- PET Scan (positron emission tomography)

*Pre-Authorization provided by eviCore 1-888-693-3211

These services require pre-authorization.

For Network services, your physician should obtain pre-authorization for you, however, you are ultimately responsible for pre-authorization for all services (in or out-of-network), otherwise a penalty of 50% of the Plan's allowable amount, to a maximum of \$10,000 will be applied.

From time to time, this list may change upon 60 days advance communication to you.